

Name of Measure: Loss of Face Scale (Zane, 2000)

Purpose of Measure: The purpose of this scale is to assess the extent to which one avoids situations and behaviors that are related to loss of face.

Author(s) of Abstract:
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Description of measure: Loss of face (defined as the threat or loss of one's social integrity) has been identified as a key and often-dominant interpersonal dynamic in Asian social relations (Sue & Morishima, 1982), particularly when the relationship involves help-seeking issues (Shon & Ja, 1982). Using the rational development approach, a 21-item, 7-point Likert scale measure assessing loss of face (LOF) was constructed. An item pool was generated following an extensive review of available literature on the concept of loss of face, resulting in a list of 45 face-related behaviors and face-threatening situations. These items were evaluated by a research team of five persons including 1 clinical psychologist, 1 social psychologist, and 3 research assistants, using the following criteria:

1. The item must involve a face-threatening behavior in one of the following four areas which have been suggested by literature to be the most common face-threatening situations (reference): social status, ethical behavior, social propriety, or self-discipline.
2. The item must not be highly related to maladjustment.
3. The item must be easily translated into Japanese and Chinese for cross-national research purposes.

Decisions on these criteria were reached by the unanimous agreement of all five researchers. Consequently, 21 items (for example, "I am more affected when someone criticizes me in public than when someone criticizes me in private.") were selected for inclusion in the Loss of Face Scale. Each statement was rated on a 7-point Likert scale, with 1 = Strongly Disagree to 7 = Strongly Agree. All items were scored in the direction of loss of face.

Language Availability: English

Translation Comments: N/A

Description of Asian Population: Two studies were conducted to examine the construct of loss of face among Asian and White students, and summaries of these studies are presented below. In the first study a measure assessing loss of face was developed and validated. In the second study, loss of face was examined as a possible explanatory construct for unassertiveness among Asians.

The participants were 158 undergraduate students at the University of California, Los Angeles. There were 77 Caucasian Americans (42 males, 35 females) and 81 Asian Americans (37 males, 44 females) in this sample. The Asian American sample

consisted of 34 Chinese (42%), 10 Filipino (12%), 7 Japanese (7%), 22 Korean (22%), and 8 Vietnamese (8%). Because there were no significant differences between Chinese, Korean, and other Asian American groups on the variables of interest (to be introduced below), the Asian American groups were combined for the subsequent analyses. There were no significant differences between males and females on all variables so that the groups were combined for all analyses. There were 29 U.S. born Asian Americans (35.8%) and 52 foreign-born Asian Americans (64.2%). For the foreign-born Asian Americans, the average number of years living in the United States was 12.5 ($SD = 3.9$).

Reliability and Validity: The LOF measure was internally consistent with an α of .83. Table 1 shows that all validation measures demonstrated adequate internal consistency so that estimates of validity could be made without being compromised by differential reliability among the measures. The LOF measure demonstrated concurrent and discriminant validity. As predicted, LOF correlated positively with Other-directedness ($r = .37, p < .001$), Private Self-Consciousness ($r = .20, p < .001$), Public Self-Consciousness ($r = .41, p < .001$), and Social Anxiety ($r = .57, p < .001$), and LOF correlated negatively with Extraversion ($r = -.32, p < .001$), Acting (the desire to perform before others, $r = -.21, p < .001$), and acculturation ($r = -.13, p < .001$). Similar results were found when Asians and Whites were analyzed separately. Factor analysis of the LOF measure yielded one factor which accounted for 26 percent of the variance. These results suggest that the measure is unidimensional. An inspection of factor loadings indicates that the LOF factor structure is similar for both Asians and Whites. Finally, Asians ($M = 91.8, SD = 16.9$) scored significantly higher on LOF than Whites ($M = 80.4, SD = 16.3$), $t(156) = 4.32, p < .001$, and this difference persisted even after controlling for ethnic differences on social anxiety, acting, other-directedness, social desirability, and acculturation, $F(1, 150) = 7.42, p < .01$, (adjusted means of 89.7 and 82.7 for Asians and Whites, respectively). The results support the reliability, construct validity, and incremental validity of the LOF and suggest that the measure is sensitive to cultural differences.

The second study examined to what extent cultural values -- that have been so often implicated in explaining ethnic differences in behavior -- could account for differences in assertion among Asians and Whites. In a partial replication of a previous study on Asian assertion (Zane, Sue, Hu, & Kwon, 1991), 53 Asian and 68 White American students completed an assertion questionnaire that assessed assertive behavior and anticipated outcomes for behaving assertively. The questionnaire included 21 outcome values which previous research has identified as representing important value differences among Asian and White American cultures. Nine assertion situations were surveyed, and respondents were asked to indicate (a) how assertively they would respond in the situation (response), (b) how confident they would feel in responding assertively, (c) the extent to which each outcome was important to them in the specific situation. As in the previous study by Zane et al. (1991), the nine situations were categorized into three types of interactions with intimates, acquaintances, and strangers.

The Zane et al. (1991) findings were replicated in that ethnic differences in self-reported assertive behavior were found only with interactions involving strangers $t(119) = -2.48, p < .05$. Asians reported being less assertive than Whites when interacting with strangers. When the 21 outcome values were factor analyzed, two factors emerged accounting for 51.1 and 12.8 percent of the variance. The pattern of loadings suggest that the factor structures are similar across ethnic groups. Items loading highly on the

first factor mostly involve concerns about not causing loss of face to another person or to oneself. Thus, this factor was labeled Loss of Face. The second factor appears to involve values that reflect adhering to one's perceived role in the situation. Accordingly, this factor was labeled Role Adherence. Both Role Adherence and Loss of Face factors were internally consistent with alphas of .89 and .92, respectively.

To determine if ethnic differences in values could actually account for behavioral differences in assertion, two analyses were conducted. First, ethnic differences on the two value composites were examined. Next, multiple regression analyses were conducted to determine if either Loss of Face or Role Adherence was significantly related to assertion in situations with strangers, independent of the other value. Asians were more concerned about Role Adherence ($M = 61.0$, $SD = 10.6$) and Loss of Face ($M = 72.2$, $SD = 15.8$) than Whites (Role Adherence: $M = 56.6$, $SD = 13.1$; Loss of Face: $M = 62.9$, $SD = 17.4$). However, the regression analyses indicated that only Loss of Face was a significant predictor of assertion with strangers for both Asians ($\beta = -.53$, $p < .001$) and Whites ($\beta = -.44$, $p < .01$). Role Adherence was not a significant predictor of assertion with strangers after controlling for age and Loss of Face. These results were similar for both ethnic groups. The findings strongly suggest that values reflecting concerns about Loss of Face can explain much of the difference in assertiveness between Asians and Whites. First, significant ethnic differences in anticipated outcomes occurred for the Loss of Face items with Asians placing greater importance on these outcomes. Second, these types of outcome values were the only ones significantly and independently related to assertive behavior for both groups.

Mental health practitioners and researchers continue to be perplexed by the problem of how to increase the effectiveness of mental health services to culturally-diverse groups. A major but often overlooked difficulty that hinders progress in this area is the lack of appropriate "conceptual tools" to understand the interpersonal relationships of people from different cultures. In other words, cultures often differ in the extent to which certain interpersonal dynamics such as autonomy, dependence, loss of face, etc. govern or affect social interactions. Given that change in therapy is mediated through the client-therapist relationship, it is important *that research examine certain interpersonal constructs that may be relatively more culturally-salient for different ethnic groups.*

The two studies presented demonstrate the potential utility of expanding the domain of interpersonal constructs to include loss of face issues. It appears that, consistent with accounts of Asian Pacific clinicians, loss of face is an important interpersonal dynamic that may hold the key to better understanding the treatment process between therapists and Asian clients. From a pan-cultural perspective, the results suggest that research on loss of face issues can enrich the general study of interpersonal processes. Loss of face was found to be an important predictor of behavior for Whites as well as Asians, and Loss of Face measure showed similar psychometric properties for both ethnic groups. Needless to say, loss of face is but one of many interpersonal orientations that may influence the client-therapist relationship. It appears that the identification of alternative "conceptual tools" may greatly facilitate the development of more culturally-responsive treatment approaches for ethnic minority clients.

Other References:

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Sue, S., & Morishima, J. (1982). *The mental health of Asian Americans*. San Francisco: Jossey-Bass Publishers.

Zane, N., Sue, S., Hu, L., & Kwon, J. (1991). Asian American assertion: A social learning analysis of cultural differences. *Journal of Counseling Psychology, 38*, 63-70.

How to obtain a copy of the instrument: Please contact Dr. Zane for permission to use. Requests for permission or complete manuscripts of the studies should be directed to: Nolan Zane, Ph.D., Graduate School of Education, University of California, Santa Barbara, CA 93106.

Loss of Face Questionnaire

Developed by Nolan Zane
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Instructions: Use the scale below to indicate the extent to which you agree with each statement as it applies to you.

- 1 = Strongly Disagree
- 2 = Moderately Disagree
- 3 = Mildly Disagree
- 4 = Neither Agree or Disagree
- 5 = Mildly Agree
- 6 = Moderately Agree
- 7 = Strongly Agree

- ___ 1. I am more affected when someone criticizes me in public than when someone criticizes me in private.
- ___ 2. During a discussion, I try not to ask questions because I may appear ignorant to others.
- ___ 3. I maintain a low profile because I do not want to make mistakes in front of other people.
- ___ 4. Before I make comments in the presence of other people, I qualify my remarks.
- ___ 5. I downplay my abilities and achievements so that others do not have unrealistically high expectations of me.
- ___ 6. I carefully plan what I am going to say or do to minimize mistakes.
- ___ 7. I say I may be in error before commenting on something.
- ___ 8. When I meet other people, I am concerned about their expectations of me.
- ___ 9. I hesitate asking for help because I think my request will be an inconvenience to others.
- ___ 10. I try not to do things that call attention to myself.
- ___ 11. I do not criticize others because this may embarrass them.
- ___ 12. I carefully watch others' actions before I do anything.
- ___ 13. I will not complain publicly even when I have been treated unfairly.
- ___ 14. I try to act like others to be consistent with social norms.

- 1 = Strongly Disagree
- 2 = Moderately Disagree
- 3 = Mildly Disagree
- 4 = Neither Agree or Disagree
- 5 = Mildly Agree
- 6 = Moderately Agree
- 7 = Strongly Agree

- ___ 15. Before I do anything in public, I prepare myself for any possible consequence.
- ___ 16. I prefer to use a third party to help resolve our differences between another person and me.
- ___ 17. When discussing a problem, I make an effort to let the person know that I am not blaming him or her.
- ___ 18. When someone criticizes me, I try to avoid that person.
- ___ 19. When I make a mistake in front of others, I try to prevent them from noticing it.
- ___ 20. Even when I know another person is at fault, I am careful not to criticize that person.
- ___ 21. When someone embarrasses me, I try to forget it.