ASSOCIATION OF SOULFUL ASIA

ASA 心理健康评论

ASA Mental Health Review

Bilingual Public Science Journal | 中英文双语科普期刊

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出版说明

本刊为非营利性质的中英文双语心理健康科普刊物，关注心理健康、跨文化心理、身心科学、艺术疗愈与社区教育相关议题。

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ASA Mental Health Review is a not-for-profit bilingual public education journal focusing on mental health, cross-cultural psychology, mind-body science, art-based healing, and community education.

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出版与伦理声明

《ASA 心理健康评论》是一份非营利性质的中英文双语科普期刊，致力于以专业而易于理解的内容，促进公众心理健康意识与社会理解。

本刊所有内容仅用于公众教育、知识传播与学术交流目的，不构成临床诊断、心理评估或医疗建议。读者在面对个人健康或心理困扰时，应寻求具备相应资质的专业人士帮助。

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ASA Mental Health Review is a not-for-profit bilingual public education journal focusing on mental health, mind-body science, art-based healing, and cross-cultural psychology.

All content is intended for public education, knowledge dissemination, and academic or cultural exchange. It does not constitute clinical diagnosis, psychological assessment, or medical advice. Readers experiencing mental or physical health concerns should seek support from appropriately qualified professionals.

Where articles include real-life cases, personal experiences, or third-party accounts, identifying details should be anonymised or otherwise appropriately modified.

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Editorial Note | Beginning with Understanding and Connection

筹备《ASA 心理健康评论》创刊号时，我们反复回到一个问题：为什么今天还需要这样一本期刊?

对许多东亚背景的个体与家庭而言，心理健康并不是抽象概念，而是与迁移适应、文化转换、家庭关系、求学就业压力和身份重建交织在一起的现实经验。很多困扰并非突然发生，而是在长期适应、表达受限与支持不足中逐渐累积。

创办这本期刊，是希望为这些真实而复杂的经验，提供一个稳定、可信、也有温度的公共表达空间。这里既需要专业知识，也需要对个体感受的尊重；既关注研究、教育与实践，也尊重每个人在生活现场中的挣扎、修复与成长。

作为立足澳大利亚、面向东亚社区的非营利协会，ASA 长期关注迁移、文化适应与人生转型中的心理健康议题。我们也始终强调：心理健康教育、疗愈实践与文化交流彼此相关，但边界不同、目标不同、适用场景也不同。期刊将延续这样的原则：尊重专业，尊重伦理，尊重经验，不夸大，不越界。

本期以“看见”为起点。你会读到心理健康教育、疗愈实实践、跨文化观察、临床与实用指南，也会读到来自社区与个体的真实叙述。我们希望这些内容不仅提供信息，也带来陪伴；不仅帮助读者理解问题，也帮助读者理解自己所处的位置与可能的支持路径。

愿我们从这一期开始，更准确地表达，更耐心地倾听，更诚实地理解自己，也更温和地理解他人。许多改变，往往不是从答案开始，而是从看见开始。

As we prepared the inaugural issue of the ASA Mental Health Review, we kept returning to one question: why does a journal like this matter today?

For many individuals and families from East Asian backgrounds, mental health is not an abstract idea but a lived experience shaped by migration, cultural transition, family relationships, academic and work pressure, and the ongoing reconstruction of identity.

Many difficulties build gradually through adaptation, limited expression, and insufficient support.

We created this journal to offer a stable, trustworthy, and humane public space for these real and complex experiences. It should be grounded in professional knowledge while remaining attentive to individual feeling;

it should value research, education, and practice while respecting the struggle, recovery, and growth that take place in everyday life.

As a not-for-profit association based in Australia and serving East Asian communities, ASA has long focused on mental health issues related to migration, cultural adaptation, and life transition.

We also emphasise that mental health education, healing practice, and cultural exchange are connected, but they differ in boundaries, purposes, and settings.

This journal will follow the same principle: respect professionalism, ethics, and lived experience, without exaggeration and without crossing important boundaries.

This issue begins with seeing: readers will encounter mental health education, healing practices, cross-cultural reflections, clinical and practical guidance, and authentic narratives from individuals and communities.

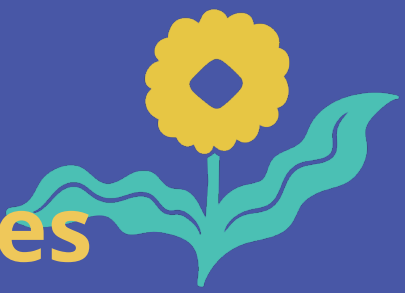
We hope these writings offer both information and companionship, helping readers understand the problems they face and the support that may be available.

May this first issue invite us to speak with greater clarity, listen with greater patience, understand ourselves with greater honesty, and extend greater gentleness toward others. Many meaningful changes do not begin with answers. They begin with seeing.

主席签名 / Chair Signature

王珺（June Wang）
ASA 协会创始人

PART 1:
Clinical and Practical Guidelines



栏目一 | 临床与实用指南

Clinical and Practical Guidelines

澳大利亚 GP 心理健康就诊系统如何运作（学生实用指南）

How the Australian GP System Works for Mental Health (Practical Guide for Students)

导语

本文以学生和初到澳洲者的实际需求为出发点，梳理澳大利亚 GP 在心理健康支持中的角色、就诊路径、Mental Health Care Plan 的使用方式，以及何时需要转介心理服务或医疗系统。

Lead

Written for students and newcomers to Australia, this practical guide explains the role of GPs in mental health care, how the Mental Health Care Plan works, and when counselling, specialist referral, or medical support may be needed.

如何安抚对心理治疗或药物有疑虑的患者?

医生不能也不强迫你接受任何治疗。全科医生的职责是用通俗易懂的语言解释选项、说明利弊，并帮助你做出明智决策。

我通常会提供清晰的治疗计划，包括可操作的小步骤——如注册大学心理咨询服务——以及必要时的短期药物试用和随访。通常会建议在一到两周后回访，以便你有时间思考和尝试初步策略。

在澳大利亚，医生开药或开检查没有任何利益驱动，开不必要的检查甚至会受到处罚。这确保了全科医生只会推荐真正相关、有用、经济且有益的药物或检查。

对刚到澳大利亚的人来说，向全科医生寻求心理健康支持的流程是怎样的?

在澳大利亚，全科医生是你所有健康问题（包括心理健康）的主要联系人。有效治疗需要坚持，可能需要数月甚至数年的多次就诊。全科医生会帮助协调治疗、转诊至专科医生、评估进展、管理药物、发现潜在影响因素（包括营养等身体因素）并提供持续支持。首次预约时，请预订长时间（双倍）咨询，并说明是心理健康咨询，以确保有足够时间讨论和规划。

小贴士:

• 如果需要，可提前向诊所申请翻译服务，可安排免费电话翻译。

• 就诊可能涉及药物治疗、转诊或两者兼有。如果你觉得医生不适合可更换。

How do you reassure patients who feel unsure or suspicious about therapy or medication?

Doctors can't and won't force you to take any treatment. A GP's role is to explain options in plain language, outline benefits and risks, and help you make informed decisions.

I usually provide a clear treatment plan with small actionable steps—such as registering for university counselling—and, if needed, a short trial of medication with a follow-up review. A return visit in one to two weeks is standard so you can think things through and trial initial strategies.

In Australia, doctors receive no incentives for prescribing medications or ordering tests. In fact, they're penalised for ordering unnecessary tests. This ensures GPs only recommend tests or medications that are truly relevant, useful, cost-effective, and beneficial.

For someone who is new to Australia, how does seeing a GP for mental health support actually work?

In Australia, GPs are your main point of contact for all health concerns, including mental health. Proper treatment requires persistence and multiple visits over months or even years.

GPs help coordinate your care, review progress, manage medications, identify contributing factors (including physical issues like nutrient deficiencies), and provide ongoing support.

When booking your first appointment, request a long (double) consultation and mention it is for mental health, so sufficient time is allocated for discussion and planning.

Tips:

Request a translator when booking if required, free telephone service is available if arranged ahead of time.

Consulting with the GP may lead to medication, referral, or both. If you don't feel the GP is a good fit for you, it is ok to see another.

• 若医生建议回访，不要惊讶，心理健康治疗和规划需要仔细考虑，不能一次完成。

• 确保预约随访。

• 如果有自伤念头，请立即拨打000或Lifeline 131 114。

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什么是“全额医保”与“差额收费”？如何知道GP就诊GP就诊费用?

“全额医保”（Bulk-billing）意味着诊所接受Medicare报销Medicare报销作为全部费用，你无需支付任何费用。由于Medicare报销未跟上成本和通货膨胀，许多诊所现在会收取“差额收费”（Gap）以维持营运。

在非全额医保诊所，你需支付诊所全额费用，然后通过Medicare或海外保险领取报销。差额即为你需自付的部分。

为避免意外费用，预约时请询问收费。海外访客保险需特别查看保险政策可以领取多少报销。因为人力成本增加，晚上或周末就诊的诊所通常收取更高费用。

什么是Mental Health Care Plan？谁可以申请?

Mental Health Care Plan是一种评估和治疗计划，可在Medicare或等效海外保险下提供通常10次心理学家补贴咨询。需由全科医生进行临床评估（至少20或40分钟），确定是否存在可受益于心理学家干预的心理健康状况。医生完成计划，通常制定SMART目标（具体、可测量、可实现、相关、时间限定）及进度评估，并转诊至注册心理学家。

全科医生的随访是必要的。具体权益和次数请向全科医生咨询。

学生在医疗系统之外可以寻求帮助的地方有哪些？（适用于轻中度心理健康问题）

• 大学心理咨询和学生支持服务

• 大学俱乐部和社团，增加社交联系

• 社区组织，如ASA 国际心理疗愈协会

• eMHPrac的在线自助或同伴支持资源，如MOST（25岁以下）、MindSpot Clinic、Mood Compass（自我诊断工具）、Smiling Mind（心理健康APP）

Don’t be surprised if the GP asks you to return another day to continue, mental health treatment and planning deserves careful and deliberate consideration, and cannot be rushed.

Ensure you book follow-up consultations.

At any point if you feel like harming yourself, please call 000 or Lifeline 131 114.

What is bulk-billing, gap and how do people know how much they will pay for a GP consultation?

Bulk-billing means the clinic accepts the Medicare rebate as full payment, so there is no cost to you. Because Medicare rebates haven’t kept up with rising costs and inflation, many clinics now charge a “gap” to stay viable.

At a non–bulk-billing clinic, you pay the clinic’s full fee, then Medicare (or overseas insurance) pays you the rebate amount. The “gap” is your out-of-pocket cost.

To avoid surprises, ask about fees when booking and check your insurance policy. Check your insurance policy if you have overseas visitor insurance.

Clinics that open after-hours (after 6pm or weekends) would usually charge a higher fee due to higher staffing costs.

What is a mental health care plan? Who qualifies?

It is an assessment and treatment plan that usually gives access to 10 subsidised psychology sessions under Medicare or equivalent overseas visitor insurance.

It requires a clinical assessment by a GP, usually in a consultation of at least 20 or 40 minutes, to determine whether there is a mental health condition that would benefit from psychologist involvement.

The GP completes the plan, ideally with SMART goals (Specific, Measurable, Achievable, Relevant, and Time-bound) and a progress-review interval, then refers the patient to a registered psychologist. GP follow-up is expected. There are limits and administrative details;

ask your GP for exact entitlements and session numbers.

Where are places students can seek help outside of the medical system? (for mild to moderate mental health issues)

• University counsellors and student support services

• University clubs and societies for social connection

• Community groups such as Association of Soulful Asia (ASA)

• Online self-guided or peer-support resources from eMHPrac such as MOST (for people under 25), MindSpot Clinic, Mood Compass (self-diagnosis tool), and Smiling Mind

作者信息 / Author Information

作者：Dr Andrew Sun 孙安德医生（译名）
作者简介：医学学士（理学）、工程与健康安全理学硕士、医学士；澳大利亚皇家全科医学院士；皮肤镜专业证书。会说日常普通话和上海话，欢迎本地居民和国际学生前来就诊与咨询。

Author: Dr Andrew Sun
Author Bio: BMedSc, MSTech(OHS), MBBS, FRACGP, Professional Certificate of Dermoscopy. Consults at UNSW Health Service, GP Maroubra, and Sun Health Clinic.

留学生常见心理健康问题与求助时机

Understanding Mental Health Issues in International Students & When to Seek Help

导语

本文聚焦留学生在学习、签证、语言、文化适应与家庭期待之间常见的心理压力，帮助读者识别何时不应再独自承受，并理解学校、GP、心理咨询与社区资源各自能提供的支持。

Lead

This guide looks at the psychological pressures international students often carry across study, visas, language, cultural adjustment, and family expectations. It helps readers recognise when to seek help and how university, GP, counselling, and community resources can work together.

留学生通常因为什么原因来UNSW Health Service寻Service寻求帮助?

很多留学生通常在面临文化适应、学业压力、签证要求以及家庭和职业期望等多重压力下，处于万万不得已时才会来到UNSW健康服务中心寻求帮助。大多数学生在此之前可能已有焦虑、抑郁或其他健康问题，但未曾得到有效治疗或处理不当。不幸的是，由于不了解学校的支持服务，许多学生在花钱找在线医生或中介（中介）后才被引导来就诊。

大多数大学提供免费或低费用的心理咨询服务，这对于应对文化冲击、学业压力、签证要求和家庭期望带来的压力非常重要。药物治疗的主要作用是将症状控制到可管理的水平，使学生能够充分受益于心理治疗，如认知行为疗法（CBT）。随着时间推移，治疗可帮助学生建立立长期应对技能和心理韧性，从而安全地逐步减少药物使用。

患者延迟寻求帮助的最常见原因是什么?

人们常因焦虑或抑郁本身导致拖延而推迟就医。学业、工作或照顾他人的繁忙也是常见的借口。许多人会告诉自己"暂时没事"或"我能应付"，但如果真能自行处理，理，就不会一直陷入困境。

What issues do international students typically present with at the UNSW Health Service?

Students usually come to the UNSW Health Service as a last resort when they are in an acute crisis due to stresses from a completely new culture, studies, visa requirements, and family and career expectations.

Most of the time, the student has a background of untreated, ignored, temporarily treated, or poorly treated anxiety, depression, and/or other medical conditions.

Unfortunately, many are directed to see us after spending money on online doctors or agents because they are unaware of university support services.

Most universities offer free or low-cost counselling services, which are essential for managing stress from culture shock, academic pressure, visa rules, and family expectations.

Medication, when used, mainly helps reduce symptoms to a manageable level so students can get the most benefit from therapy such as cognitive behaviour therapy (CBT). Over time, therapy builds long-term skills and resilience, allowing medication to be tapered off safely.

What are the most common reasons patients delay seeking support?

People often delay seeking help because anxiety and depression themselves cause procrastination. Being busy with study, work, or looking after others also becomes an easy excuse. Many tell themselves it's temporary or that they can handle it alone, but if that were true, they wouldn't still be struggling.

Delaying care makes things worse. Mental health issues affect sleep, appetite, performance, relationships, and daily functioning. So early support is far better than waiting for a crisis.

延迟治疗只会让情况恶化。心理健康问题会影响睡眠、食欲、工作表现、人际关系和日常生活。因此，早期寻求支持比等待危机到来更有益。有些人也因为害羞或"丢面子"而回避帮助，但寻求支持是一种力量，医生的目的是让你从困境中恢复，而不是评判你。

如果学生心理健康受困且父母无法理解，应该怎么办?

如果父母不了解你的心理健康困扰，你并不孤单。许多亚洲学生成长于心理健康被忽视、误解或被视为"压力而而已"的文化环境。现在你在澳大利亚，成为独立成年人人的一部分就是为自己的健康负责。

作为成年人，你的健康决策属于你自己，而非父母。这里的就诊信息是保密的，除非判断您可能存在不可控的自残或伤害他人的风险，否则未经你许可不会泄露。若希望父母理解，可向他们提供翻译后的澳大利亚心理健康资料，但你不需要他们的许可就可以寻求帮助。

重要提醒：不要因父母说好或不好就停药。他们可能出于好意，但心理健康治疗是医生的职责，擅自停药是复发的常见原因。始终先与全科医生沟通。

Some also delay help due to embarrassment or fear of losing face, but seeking support is a sign of strength, and clinicians are here to get you from worse to better, not to judge.

What advice would you give to students who struggle with mental health issues and are misunderstood by their parents too?

If your parents don't understand your mental health struggles, you're not alone. Many students from Asian backgrounds grow up in cultures where mental health is minimised, misunderstood, or seen as "just stress.

" You're in Australia now, and part of becoming an independent adult is taking responsibility for your own well-being.

As an adult, your health decisions are yours, not your parents'. Consultations here are confidential, and no information is shared without your permission unless there is risk of harm to yourself or others.

If you want to help your parents understand, you can send them translated Australian mental health resources, but you don't need their approval to get help.

One important warning: please don't start or stop medication because a parent says so. They mean well, but managing mental health treatment is the doctor's job, and stopping medication suddenly is a very common cause of relapse. Always talk to your GP first.

作者信息 / Author Information

作者：Dr Andrew Sun 孙安德医生（译名）
作者简介：医学学士（理学）、工程与健康安全理学硕士、医学士；澳大利亚皇家全科医学院士；皮肤镜专业证书。会说日常普通话和上海话，欢迎本地居民和国际学生前来就诊与咨询。

Author: Dr Andrew Sun
Author Bio: BMedSc, MSTech(OHS), MBBS, FRACGP, Professional Certificate of Dermoscopy. Consults at UNSW Health Service, GP Maroubra, and Sun Health Clinic.

血管里的阴霾：当情绪障碍源于血液循环系统

The Gloom in the Blood Vessels: When Mood Disorders Originate in the Circulatory System

导语

从一个看似普通的情绪低落案例出发，本文把读者带入血管健康与情绪障碍之间的交叉地带，介绍血管性抑郁的风险信号、身心机制与预防思路，提醒我们重新理解情绪与身体的关系。

Lead

Beginning with a seemingly familiar story of low mood, this article explores the intersection between vascular health and depressive symptoms. It introduces risk signs, mind-body mechanisms, and prevention pathways that invite a broader view of emotional well-being.

一、序幕：一个不寻常的诊断

28岁生日那天，互联网公司的视觉设计师林夏第一次明确意识到自己“不对劲”。屏幕上的设计草图明明等待处处理，鼠标却在界面上悬停整整半小时，她的大脑像被一层浓雾笼罩，连最简单的色彩搭配都无法决策。更令她恐慌的是，起身接水时，右腿突然传来一阵刺麻，仿佛无数只蚂蚁在皮肤下爬行，踉跄两步后才逐渐缓解——这已是本月第三次出现类似症状。

事实上，情绪低落早已悄然潜入她的生活。近半年间，她常感莫名疲惫，对曾经热爱的插画创作失去热情，夜间不是辗转难眠便是凌晨惊醒，耳边总萦绕着若有若无的嗡鸣，似老旧空调的低频运转。同事察觉她“变慢了””：语速放缓，步履沉重，连笑容都带着抹不去的倦意。。她将这归咎于长期熬夜、外卖饮食导致的“神经衰弱””，直到一次加班中突发头晕目眩、眼前发黑，被同事紧紧急送医。

神经内科的陈医生审阅着她的检查报告，眉头微蹙：“血血压偏高，颈部血管超声显示轻度狭窄，头颅MRI发现额叶白质高信号及数个微小的腔隙性梗死灶——这些都不应是28岁该有的血管状况。”林夏怔住了，她从未想过过作息不规律与重盐饮食会直接导致血管病变。

“你之前的抑郁情绪，很可能与这些血管问题相关。”陈陈医生的解释如光穿透迷雾，“这在医学上称为‘血管性性抑郁’，并非单纯心理问题，而是血管病变影响了脑部部情绪调节通路。你是否常感思维迟滞、决策困难、记忆减退？”

I. Prelude: An Unusual Diagnosis

On her 28th birthday, Lin Xia, a visual designer at an internet company, became clearly aware for the first time that something was “not right” with her. The design drafts on her screen were waiting to be processed, yet her mouse hovered over the interface for a full half hour.

Her mind felt as though it were covered by a thick fog, and she could not even make the simplest decisions about color combinations.

What frightened her even more was that when she stood up to get some water, a sudden tingling sensation shot through her right leg, as if countless ants were crawling under her skin.

She staggered for two steps before the sensation gradually subsided. This was already the third time such symptoms had appeared that month.

In fact, low mood had already quietly entered her life. Over the past six months, she had often felt inexplicably exhausted. She had lost enthusiasm for the illustration work she once loved. At night, she either tossed and turned without falling asleep or woke suddenly in the early morning.

A faint buzzing sound often lingered in her ears, like the low-frequency hum of an old air conditioner. Her colleagues noticed that she had “slowed down”: she spoke more slowly, walked heavily, and even her smile carried a kind of exhaustion that could not be concealed.

She attributed all of this to “neurasthenia” caused by long-term late nights and a takeaway-based diet, until one night during overtime work, she suddenly felt dizzy, her vision went black, and her colleagues rushed her to the hospital.

林夏用力点头。那些曾被她归为“意志薄弱”的症状，突然有了合理解释：不是她不够坚强，而是供应大脑的血管如堵塞的水管，血流不畅导致负责情绪与认知的额叶-皮质下通路“缺氧缺血”。

医生进一步说明，长期高盐饮食使血管脆化，熬夜与压力令交感神经持续兴奋，血压反复冲击血管内壁，逐渐形成微小病变——恰如水管内壁的锈斑，最终影响脑功能，引发淡漠、精力匮乏、精神运动迟滞等典型症状。

治疗方案比预期更全面：除SSRIs类抗抑郁药物外，还包含血管保护剂，并严格叮嘱生活方式调整：以低盐低脂饮食替代外卖，每日坚持散步，睡前远离电子屏幕。初始阶段举步维艰，时常感到浑身无力，但想到MRI报告上的“高信号”，她仍咬牙坚持。

改变悄然发生。一个月后，夜间脑鸣减轻，四肢麻木发作减少；两月时，她能流畅完成整套设计方案；三月后复查，血压恢复正常，颈动脉血流明显改善。走出医院那日，路旁梧桐叶缝洒下的阳光，竟让她感到久违的明亮——那种发自内心的轻盈感，终于归来。

如今的林夏，办公桌抽屉常备坚果与水果，手机设定每小时活动提醒。她逐渐领悟：情绪与血管犹如枝叶与根系，唯有血管健康，情绪的枝叶方能舒展。那些曾笼罩心头的阴霾，实则潜藏于看不见的血管网络；而关爱自己，从来不止于抚慰心情，更是呵护体内每一条无声运转的“生命通道”。

二、科学解析：当血管成为情绪的“调节器”

1. 血管性抑郁的医学定义

血管性抑郁（Vascular Depression）是晚近三十年来逐渐渐被学界重视的临床概念。与传统抑郁症不同，它特指由脑血管病变直接或间接引发的抑郁综合征。

Dr. Chen from the neurology department reviewed her examination results with a slight frown. “Your blood pressure is elevated. The neck vascular ultrasound shows mild narrowing, and the brain MRI has revealed high signals in the frontal white matter and several tiny lacunar infarcts.

These are not the vascular conditions we would expect to see in a 28-year-old. ”

Lin Xia froze. She had never imagined that irregular sleep and a high-salt diet could directly lead to vascular lesions.

“Your previous depressive mood is very likely related to these vascular problems,” Dr. Chen explained, like a beam of light piercing through the fog. “In medicine, this is called vascular depression. It is not simply a psychological problem.

Rather, vascular lesions affect the brain pathways involved in emotional regulation. Do you often feel mentally sluggish, find it difficult to make decisions, or notice a decline in memory? ”

Lin Xia nodded firmly. The symptoms she had once blamed on “weak willpower” suddenly had a reasonable explanation. It was not that she was not strong enough. It was that the blood vessels supplying her brain were like blocked pipes.

Poor blood flow had caused the frontal-subcortical circuits responsible for emotion and cognition to suffer from insufficient oxygen and blood supply.

The doctor further explained that long-term high-salt eating had made her blood vessels more fragile, while staying up late and chronic stress had kept her sympathetic nervous system continuously activated.

Repeated surges in blood pressure had kept striking the inner walls of the blood vessels, gradually forming tiny lesions—like rust stains on the inner wall of a pipe. Eventually, these changes affected brain function and triggered typical symptoms such as apathy, lack of energy, and psychomotor slowing.

The treatment plan was more comprehensive than she had expected. In addition to SSRI antidepressants, it included vascular-protective medication and strict lifestyle adjustments: replacing takeaway food with a low-salt, low-fat diet, walking every day, and staying away from electronic screens before bed.

The initial stage was extremely difficult. She often felt weak all over, but whenever she thought of the “high signals” on the MRI report, she forced herself to keep going.

Change came quietly. One month later, the buzzing in her head at night had lessened, and episodes of limb numbness had become less frequent. After two months, she was able to complete a full design proposal smoothly.

1997年，神经精神病学家Krishnan首次系统提出“血管性抑郁假说”，指出脑血管风险因素（如高血压、糖尿病、动脉硬化）可导致脑白质病变与腔隙性梗死，进而破坏前额叶-皮质下神经环路，引发独特的抑郁表现。

2. 病理机制：缺血如何改变情绪

大脑前额叶皮层与基底节、丘脑等结构通过复杂神经纤维连接，形成情绪调节的“决策中枢”。这一区域高度依依赖持续稳定的血流供应。当小动脉硬化或微栓塞导致慢性灌注不足时，将引发三方面病理改变：

白质完整性受损：脑白质由大量神经纤维束构成，负责不同脑区间的信息传递。MRI上的“高信号”常提示白质微质微结构损伤，如同网络电缆出现破损，导致前额叶与边缘系统（情绪产生中心）的连接效率下降。

神经递质失衡：缺血环境下，星形胶质细胞功能异常，清除谷氨酸的能力减弱。这种兴奋性神经递质过量堆积产生“兴奋毒性”，同时多巴胺、5-羟色胺等单胺类递质质合成运输受阻，双重打击下形成抑郁的生化基础。

神经炎症激活：慢性脑低灌注触发小胶质细胞活化，释放白细胞介素-6、肿瘤坏死因子-α等炎性因子。这些分子不仅能直接损害神经元，还可通过血脑屏障进入外周循环，引发全身性“病态行为”（包括疲劳、兴趣丧失、、社交回避等典型抑郁症状）。

3. 临床特征：识别血管性抑郁的“特殊面容”

血管性抑郁患者的症状谱与传统抑郁症存在微妙差异：

认知症状突出：患者常主诉“脑子转不动”，执行功能（计划、决策、转换任务）损害明显，简易精神状态检查可能正常，但专项神经心理测试揭示规划与处理速度缺陷。

Three months later, during her follow-up examination, her blood pressure had returned to normal, and the blood flow in her carotid arteries had improved significantly. On the day she walked out of the hospital, sunlight filtered through the leaves of the plane trees by the roadside.

For the first time in a long while, she felt brightness again—the kind of lightness that comes from within had finally returned.

Today, Lin Xia keeps nuts and fruit in her office drawer, and her phone reminds her to move every hour. Gradually, she has come to understand that emotions and blood vessels are like branches and roots. Only when the blood vessels are healthy can the branches of emotion stretch freely.

The shadow that once covered her heart was, in fact, hidden in an invisible network of blood vessels. Caring for oneself is never only about soothing one’s mood. It is also about protecting every silent “channel of life” running inside the body.

II. Scientific Explanation: When Blood Vessels Become Regulators of Emotion

1. The Medical Definition of Vascular Depression

Vascular depression is a clinical concept that has gradually gained attention in academic circles over the past three decades. Unlike traditional depression, it specifically refers to a depressive syndrome caused directly or indirectly by cerebrovascular lesions.

In 1997, neuropsychiatrist Krishnan systematically proposed the “vascular depression hypothesis” for the first time.

He pointed out that cerebrovascular risk factors, such as hypertension, diabetes, and arteriosclerosis, can lead to white matter lesions and lacunar infarcts in the brain, which then disrupt the prefrontal-subcortical neural circuits and cause a distinctive pattern of depressive symptoms.

2. Pathological Mechanisms: How Ischemia Changes Emotion

The brain’s prefrontal cortex is connected with structures such as the basal ganglia and thalamus through complex neural fiber networks, forming the “decision-making center” of emotional regulation. This area is highly dependent on a continuous and stable blood supply.

When arteriolosclerosis or microembolism causes chronic hypoperfusion, three main pathological changes may occur.

Damage to white matter integrity:

精神运动迟滞显著：动作迟缓、语速减慢、表情呆板较情绪低落更为明显，常被误认为“懒惰”或“缺乏主动性”。

情绪体验“淡漠化”：较少出现典型的自责自罪或晨重晚晚轻节律，更多表现为情感平淡、兴趣范围缩窄、动力缺乏，对既往爱好“心有余而力不足”。

躯体症状密集：除常见失眠、食欲改变外，常合并无法用单一疾病解释的多种躯体不适，如头晕、头痛、肢体麻木、耳鸣等。

晚年起病倾向：虽然如林夏般的早发病例逐渐增多，但血管性抑郁仍更多见于50岁以上人群，且常与血管危险因素（高血压、糖尿病、房颤等）共病。

三、隐匿的危机：现代生活方式如何侵蚀血管-情绪轴

1. 饮食的“慢性毒性”

高盐饮食不仅通过水钠潴留升高血压，更直接损伤血管内皮细胞功能。内皮源性一氧化氮（NO）是维持血管舒舒张的关键分子，盐负荷过载会抑制其合成，导致血管持续处于收缩状态。同时，外卖食品中常见的反式脂肪酸与高果糖玉米糖浆，可诱发低度系统性炎症，加速动脉粥样硬化斑块形成。

2. 久坐与缺氧循环

长时间静坐导致下肢肌肉泵作用减弱，静脉回流减少，心脏每搏输出量下降10-15%。这种“相对性低灌注”状态虽不至立即引发缺血，但日积月累可使脑部长期处于“临界供血”边缘。尤其当患者已存在颈动脉斑块或颅内动脉狭窄时，体位性低血压极易诱发短暂性缺血发作。

3. 压力与血管的“记忆效应”

慢性压力激活下丘脑-垂体-肾上腺轴，皮质醇持续升高。这种激素不仅增加血糖与血压，更赋予血管“应激记忆”——即使压力源消失，血管仍保持高反应性，轻微刺激即发生过强收缩。功能磁共振研究发现，长期高压人群的前扣带回（情绪调节关键区域）血氧水平依赖信号显著减弱，提示神经血管耦合功能受损。

Brain white matter is made up of large numbers of neural fiber bundles and is responsible for information transmission between different brain regions. “High signals” on MRI often suggest microstructural damage to the white matter.

This is like damage to network cables, reducing the efficiency of communication between the prefrontal cortex and the limbic system, which is the center of emotional generation.

Imbalance of neurotransmitters:

In an ischemic environment, astrocyte function becomes abnormal, weakening their ability to clear glutamate. Excessive accumulation of this excitatory neurotransmitter produces “excitotoxicity.

” At the same time, the synthesis and transport of monoamine neurotransmitters such as dopamine and serotonin are impaired. This double blow forms the biochemical basis of depression.

Activation of neuroinflammation:

Chronic cerebral hypoperfusion activates microglia, which release inflammatory factors such as interleukin-6 and tumor necrosis factor-alpha.

These molecules not only directly damage neurons but can also enter the peripheral circulation through the blood-brain barrier, triggering systemic “sickness behavior,” including fatigue, loss of interest, and social withdrawal—typical depressive symptoms.

3. Clinical Features: Recognizing the “Special Face” of Vascular Depression

The symptom profile of vascular depression differs subtly from that of traditional depression.

Prominent cognitive symptoms:

Patients often complain that their “brain cannot move. ” Executive functions, such as planning, decision-making, and switching between tasks, are significantly impaired.

A simple mental status examination may appear normal, but specialized neuropsychological testing can reveal deficits in planning and processing speed.

Marked psychomotor slowing:

Slowed movement, slower speech, and a dull facial expression are often more obvious than low mood. These symptoms are frequently misinterpreted as “laziness” or “lack of initiative.”

Apathetic emotional experience:

Patients are less likely to show typical symptoms such as strong self-blame or mood being worse in the morning and better in the evening. Instead, they more often present with emotional flatness, a narrowed range of interests, and a lack of motivation.

4. 睡眠碎片化的深层危害

睡眠并非仅关乎休息。在非快速眼动睡眠的深睡期，脑脊液循环速度增加60%，如同开启“脑内清洗系统”，清除β-淀粉样蛋白等代谢废物。碎片化睡眠（如林夏的早醒问题）严重削弱这一过程，使血管毒性物质积累，加速脑小血管病变。

四、诊断：如何在情绪阴霾中寻找血管的线索

1. 筛查量表的新维度

除PHQ-9、HAMD等常规抑郁量表外，血管性抑郁的筛查查需特别关注：

血管性抑郁风险量表：纳入高血压病史、步态异常、尿失禁等与血管相关的指标。

淡漠评估量表：用于量化动力缺乏与情感平淡程度。

执行功能障碍问卷：评估日常生活中的计划能力、组织能力与任务转换能力。

2. 影像学“看见”情绪通路

高分辨率 MRI：可识别直径小于 3mm 的皮质下微小梗死灶，以及常规序列难以发现的点状白质高信号。

弥散张量成像（DTI）：通过各向异性分数（FA）定量评评估白质纤维束完整性。前扣带回、眶额皮层 FA 值降低低，与淡漠症状显著相关。

动脉自旋标记（ASL）：可无创测量脑血流量。血管性抑抑郁患者常见前额叶灌注降低，较同龄人低 15% 至 20% 20%。

3. 血液生物标志物谱

新兴研究发现以下指标可能提供辅助证据：

高敏 C 反应蛋白：水平超过 3mg/L 提示系统性炎症状态。

They may still want to engage in former hobbies but feel unable to do so.

Dense physical symptoms:

In addition to common symptoms such as insomnia and appetite changes, patients often experience multiple physical discomforts that cannot be explained by a single disease, such as dizziness, headaches, limb numbness, and tinnitus.

Tendency toward late-life onset:

Although early-onset cases like Lin Xia’s are gradually increasing, vascular depression is still more commonly seen in people over the age of 50. It often coexists with vascular risk factors such as hypertension, diabetes, and atrial fibrillation.

III. The Hidden Crisis: How Modern Lifestyles Erode the Vascular-Emotional Axis

1. The “Chronic Toxicity” of Diet

A high-salt diet not only raises blood pressure through water and sodium retention, but also directly damages vascular endothelial cell function. Endothelium-derived nitric oxide is a key molecule that maintains vasodilation.

Excessive salt intake inhibits its synthesis, causing blood vessels to remain in a constricted state. At the same time, trans fatty acids and high-fructose corn syrup commonly found in takeaway foods can induce low-grade systemic inflammation and accelerate the formation of atherosclerotic plaques.

2. Sedentary Behavior and the Cycle of Hypoxia

Prolonged sitting weakens the pumping action of the muscles in the lower limbs, reduces venous return, and decreases cardiac stroke volume by 10–15%. This state of “relative hypoperfusion” may not cause immediate ischemia, but over time it can keep the brain on the edge of “critical blood supply.

” This is especially risky when a patient already has carotid plaques or intracranial arterial stenosis, as orthostatic hypotension can easily trigger transient ischemic attacks.

3. Stress and the “Memory Effect” of Blood Vessels

Chronic stress activates the hypothalamic-pituitary-adrenal axis, leading to persistently elevated cortisol levels. This hormone not only increases blood sugar and blood pressure, but also gives blood vessels a kind of “stress memory.

” Even after the stressor disappears, the blood vessels may remain highly reactive, contracting excessively in response to minor stimuli.

同型半胱氨酸：水平超过 15μmol/L 与脑小血管病风险增加 2.3 倍相关。

内皮微粒：CD31+/CD42b− 内皮微粒升高，可反映血管内管内皮损伤程度。

五、治疗新范式：双管齐下的康复之路

1. 药物联合策略

抗抑郁药的选择艺术：相较于其他类型，血管性抑郁对 SSRIs（如舍曲林、艾司西酞普兰）反应更佳，可能与其改善内皮功能、抗血小板聚集的"多效性"有关。需避免免使用抗胆碱能作用强的三环类药物，以免加重认知损害。

血管保护剂的协同作用：

钙通道阻滞剂（如尼莫地平）：选择性扩张脑血管，改善灌注。

他汀类药物：除降脂外，还可增强内皮一氧化氮合成，抑制神经炎症。

胰激肽原酶：改善微循环。临床研究显示，与 SSRIs 联用可提高有效应答率约 30%。

2. 非药物治疗的循证方案

精准运动处方：有氧运动（40-60%最大心率，每周150分分钟）可增加脑源性神经营养因子（BDNF）表达，促进进血管新生。特别设计的双重任务训练（如边走路边计算）能同时刺激运动与认知环路，改善神经血管耦合。

经颅磁刺激（TMS）的创新应用：高频刺激左背外侧前额叶不仅调节神经递质，还可通过神经-血管耦合机制增加局部脑血流。对于药物难治性血管性抑郁，深部TMS对前扣带回的刺激显示出独特优势。

Functional MRI studies have found that people under long-term high pressure show significantly weakened blood oxygen level-dependent signals in the anterior cingulate cortex, a key area for emotional regulation.

This suggests impaired neurovascular coupling.

4. The Deeper Harm of Fragmented Sleep

Sleep is not merely about rest. During deep non-rapid eye movement sleep, the circulation speed of cerebrospinal fluid increases by 60%, as if activating an internal "brain cleaning system" that removes metabolic waste such as beta-amyloid.

Fragmented sleep, such as Lin Xia's early-morning awakening, severely weakens this process. As a result, vascular-toxic substances accumulate and accelerate cerebral small vessel disease.

IV. Diagnosis: Searching for Vascular Clues in Emotional Darkness

1. New Dimensions in Screening Scales

In addition to conventional depression scales such as the PHQ-9 and HAMD, screening for vascular depression requires special attention to the following tools:

Vascular Depression Risk Scale: includes vascular-related indicators such as a history of hypertension, gait abnormalities, and urinary incontinence.

Apathy Evaluation Scale: quantifies lack of motivation and emotional flatness.

Dysexecutive Questionnaire: assesses impairments in planning and organizational ability in daily life.

2. Using Imaging to "See" Emotional Pathways

High-resolution MRI: can identify subcortical microinfarcts with a diameter of less than 3 mm and punctate white matter hyperintensities that are difficult to detect with conventional sequences.

Diffusion tensor imaging: quantitatively evaluates the integrity of white matter fiber tracts through fractional anisotropy. Reduced FA values in the anterior cingulate cortex and orbitofrontal cortex are significantly associated with apathetic symptoms.

Arterial spin labeling: non-invasively measures cerebral blood flow. Patients with vascular depression commonly show reduced perfusion in the prefrontal cortex, often 15–20% lower than that of people of the same age.

3. Blood Biomarker Profiles

Emerging research suggests that the following indicators may provide auxiliary evidence:

营养神经血管的饮食模式：MIND饮食（地中海与DASH饮食结合版）强调绿叶蔬菜、浆果、坚果、橄榄油及鱼类摄入。其中蓝莓的花青素可增强血脑屏障完整性，欧米伽-3脂肪酸（DHA）则直接整合入神经元膜，改善信号传导效率。

3. 数字疗法的辅助角色

基于手机APP的认知训练程序（如BrainHQ）可针对性改改善处理速度与注意力分配；可穿戴设备监测的心率变异性生物反馈训练，则帮助恢复自主神经平衡，降低血管应激反应。

六、预防：在第一个症状出现之前

1. 血管健康的“生命早期投资”

青年期（20-35岁）是血管弹性的黄金窗口。此阶段建立立的运动习惯（每周≥75分钟高强度有氧）、地中海式饮饮食模式、压力管理技巧，可形成持久的“血管记忆”，，延缓动脉硬化进程20-30年。

2. 筛查关口前移

建议30岁以上人群每2-3年进行：

颈动脉超声：评估内中膜厚度。

动态血压监测：发现隐匿性高血压。

踝肱指数检测：筛查外周动脉疾病。

眼底照相：通过视网膜动脉评估全身微循环状态。

3. 工作环境的人因工程改良

针对久坐人群的办公环境设计：

升降桌：每坐 45 分钟，站立工作 15 分钟。

适度照明：地面反射率保持在 30% 至 50%，避免眩光诱发血管收缩。

High-sensitivity C-reactive protein: levels above 3 mg/L suggest a systemic inflammatory state.

Homocysteine: levels above 15 μmol/L are associated with a 2.3-fold increased risk of cerebral small vessel disease.

Endothelial microparticles: elevated CD31+/CD42b− endothelial microparticle counts reflect the degree of vascular endothelial injury.

V. A New Treatment Paradigm: A Dual-Track Path to Recovery

1. Combined Medication Strategies

The art of choosing antidepressants:

Compared with other types of depression, vascular depression responds better to SSRIs, such as sertraline and escitalopram. This may be related to their pleiotropic effects in improving endothelial function and inhibiting platelet aggregation.

Tricyclic antidepressants with strong anticholinergic effects should be avoided, as they may worsen cognitive impairment.

The synergistic role of vascular-protective agents:

Calcium channel blockers, such as nimodipine: selectively dilate cerebral blood vessels and improve perfusion.

Statins: in addition to lowering lipid levels, they can enhance endothelial nitric oxide synthesis and inhibit neuroinflammation.

Pancreatic kininogenase: improves microcirculation. Clinical studies have shown that, when combined with SSRIs, it can increase the effective response rate by 30%.

2. Evidence-Based Non-Drug Treatments

Precision exercise prescriptions:

Aerobic exercise at 40–60% of maximum heart rate for 150 minutes per week can increase the expression of brain-derived neurotrophic factor and promote angiogenesis.

Specially designed dual-task training, such as walking while doing calculations, can stimulate both motor and cognitive circuits and improve neurovascular coupling.

Innovative applications of transcranial magnetic stimulation:

High-frequency stimulation of the left dorsolateral prefrontal cortex not only regulates neurotransmitters, but can also increase local cerebral blood flow through neurovascular coupling mechanisms.

For medication-resistant vascular depression, deep TMS targeting the anterior cingulate cortex has shown unique advantages.

A diet that nourishes the neurovascular system:

室内二氧化碳控制：将 CO_2 浓度保持在 1000ppm 以下，支持大脑供氧。

七、未来展望：从修复到增强的范式转变

1. 精准医学在血管性抑郁中的应用

基于多组学（基因组、蛋白组、代谢组）的生物分型正在研发中。未来可能通过血液检测区分“炎症主导型”“内”“内皮功能障碍型”“自主神经失调型”，实现个体化联合化联合用药。针对载脂蛋白E ε4等位基因携带者，早期使用线粒体保护剂（如艾地苯醌）或成为预防策略。

2. 神经血管界面的调控技术

聚焦超声联合微泡技术可暂时开放血脑屏障，靶向递送神经营养因子；光遗传学与化学遗传学工具能特异性调节周细胞（毛细血管收缩控制器），实现脑血流量的精准时空调节。

3. 数字孪生与预测模型

通过可穿戴设备持续收集生理数据（心率变异性、皮肤电导、体温波动），结合定期影像检查，构建个人“脑血血管-情绪数字孪生体”。人工智能算法可提前6-12个月预月预测抑郁发作风险，启动预防性干预。

尾声：重新理解身心联结

林夏的故事不是孤例。据《中华精神科杂志》2023年流行病学调查，我国35-55岁职场人群中，符合血管性抑郁郁特征者约占抑郁障碍总数的18.7%，且检出率逐年上升升。这个数据提醒我们，在现代生活方式冲击下，情绪问题与躯体健康的界限正日益模糊。

血管性抑郁概念的深刻意义，在于它打破了“心理”与“生“生理”的二元对立。情绪不仅是大脑的化学波动，更是是全身血管系统状态的晴雨表。每一次心跳推动的血液循环，都在塑造我们的思考方式与情感体验。

呵护血管健康，因此成为这个时代独特的自我关怀。它意味着我们开始以整体视角看待自身——不再将头痛医头、脚痛医脚，而是理解身体作为一个精密网络，任何部位的异常都可能在其他看似无关的领域产生回响。

当林夏在办公室起身活动，当她选择清蒸鱼替代麻辣香锅，当她学会在截止日期前深呼吸——这些微小选择不仅在保护她的血管，更在重塑她感受世界的方式。那些曾经笼罩她的阴霾，其实也是身体发出的最早预警，提醒她倾听血管里流淌的生命讯息。

在这个意义上，血管健康成为了一种新型的情绪素养。它教会我们：最深刻的情绪疗愈，或许始于最基础的生理呵护；而最明亮的心理晴空，永远建立在通畅健康的生命河流之上。每一次对血管的温柔对待，都是对情绪未来的长远投资——因为真正的心理健康，从来都流淌在我们的血液里。

The MIND diet, which combines the Mediterranean and DASH diets, emphasizes green leafy vegetables, berries, nuts, olive oil, and fish.

Anthocyanins in blueberries can enhance the integrity of the blood-brain barrier, while omega-3 fatty acids such as DHA can directly integrate into neuronal membranes and improve signal transmission efficiency.

3. The Supporting Role of Digital Therapeutics

Mobile app-based cognitive training programs, such as BrainHQ, can specifically improve processing speed and attention allocation. Heart rate variability biofeedback training monitored by wearable devices can help restore autonomic nervous system balance and reduce vascular stress responses.

VI. Prevention: Before the First Symptom Appears

1. Early-Life Investment in Vascular Health

Young adulthood, from ages 20 to 35, is the golden window for vascular elasticity.

Exercise habits established during this stage, such as at least 75 minutes of high-intensity aerobic exercise per week, along with a Mediterranean-style diet and stress-management skills, can create a lasting “vascular memory” and delay the progression of arteriosclerosis by 20–30 years.

2. Moving the Screening Threshold Earlier

For people over the age of 30, it is recommended that the following checks be performed every two to three years:

Carotid ultrasound to assess intima-media thickness.

Ambulatory blood pressure monitoring to detect hidden hypertension.

Ankle-brachial index testing to screen for peripheral arterial disease.

Retinal photography to evaluate systemic microcirculation through the arteries of the fundus.

3. Human-Factors Improvements in the Workplace

For sedentary workers, office environments can be designed with the following adjustments:

Sit-stand desks: after every 45 minutes of sitting, stand and work for 15 minutes.

Moderate lighting: floor reflectance of 30–50% to avoid glare-induced vascular constriction.

Indoor carbon dioxide control: keeping CO_2 concentration below 1000 ppm to support brain oxygenation.

VII. Future Prospects: A Paradigm Shift from Repair to Enhancement

1. Precision Medicine in Vascular Depression

Biological subtyping based on multi-omics approaches, including genomics, proteomics, and metabolomics, is under development.

In the future, blood tests may be able to distinguish among “inflammation-dominant,” “endothelial dysfunction,” and “autonomic dysregulation” subtypes, enabling individualized combination therapy.

For carriers of the apolipoprotein E ε4 allele, early use of mitochondrial protectants such as idebenone may become a preventive strategy.

2. Technologies for Regulating the Neurovascular Interface

Focused ultrasound combined with microbubble technology can temporarily open the blood-brain barrier and allow targeted delivery of neurotrophic factors.

Optogenetic and chemogenetic tools can specifically regulate pericytes, the controllers of capillary contraction, enabling precise spatial and temporal regulation of cerebral blood flow.

3. Digital Twins and Predictive Models

By continuously collecting physiological data through wearable devices, such as heart rate variability, skin conductance, and body temperature fluctuations, and combining these data with regular imaging examinations, it may become possible to build a personal “cerebrovascular-emotional digital twin.

” Artificial intelligence algorithms may then predict the risk of depressive episodes six to twelve months in advance and activate preventive intervention.

Epilogue: Rethinking the Mind-Body Connection

Lin Xia’s story is not an isolated case. According to a 2023 epidemiological survey published in the Chinese Journal of Psychiatry, among Chinese working adults aged 35 to 55, those who meet the characteristics of vascular depression account for approximately 18.

7% of all depressive disorders, and the detection rate is increasing year by year. These data remind us that, under the impact of modern lifestyles, the boundary between emotional problems and physical health is becoming increasingly blurred.

The profound significance of the concept of vascular depression lies in the fact that it breaks down the dualistic opposition between the “psychological” and the “physiological. ” Emotion is not only a chemical fluctuation in the brain. It is also a barometer of the state of the entire vascular system.

Every heartbeat that pushes blood through the body is shaping the way we think and feel.

Protecting vascular health has therefore become a distinctive form of self-care in our time. It means that we begin to view ourselves from a holistic perspective. Instead of treating headaches only as head problems and foot pain only as foot problems, we come to understand the body as a precise network.

An abnormality in any part of this network may echo in another seemingly unrelated area.

When Lin Xia stands up to move around in the office, when she chooses steamed fish instead of spicy hot pot, and when she learns to take deep breaths before a deadline, these small choices are not only protecting her blood vessels. They are also reshaping the way she experiences the world.

The shadow that once covered her was also the body’s earliest warning, reminding her to listen to the messages of life flowing through her blood vessels.

In this sense, vascular health has become a new form of emotional literacy. It teaches us that the deepest emotional healing may begin with the most basic physiological care, and that the brightest psychological sky is always built upon a healthy, unobstructed river of life.

Every gentle act of care toward the blood vessels is a long-term investment in the future of our emotions—because true mental health has always been flowing in our blood.

作者信息 / Author Information

作者：赵同源医生

Author: Dr Zhao Tongyuan

PART 2:
Psychology Articles

栏目二 | 心理专题

Psychology Articles

CPTSD：当我们在成年后仍背负童年的伤

CPTSD: When We Still Carry Childhood Wounds into Adulthood

导语

本文以创伤知情的视角讨论复杂性创伤如何在成年后延续为羞耻、警觉、内在批判与关系困难，并进一步提出从身体安定、自我理解到重建内在安全感的复原路径。

Lead

From a trauma-informed perspective, this article examines how complex childhood wounds may continue into adulthood through shame, vigilance, inner criticism, and relational difficulty. It then outlines pathways toward regulation, self-understanding, and rebuilding inner safety.

——理解创伤、内在批判者与重建安全的自己

一、为什么 CPTSD 值得被看见?

在过去数年的咨询中，我陆续遇到过许多“看起来已经非非常优秀”的来访者。她们有博士学历、跨国工作经历，，在外人眼中履历耀眼、前途光明，却同时承受着一种难以言说的、持续的心理痛苦：只要项目稍有不顺，就会迅速跌入彻底的自我攻击；面对压力，很容易情绪性崩溃或者整个人“僵住”，像被冻住一样动不了；

有些人在接到父母电话、听到父母的声音时，身体会下意识地紧绷、心跳加快；一靠近家乡就开始失眠、做噩梦；在职场中，只要上级语气稍微严肃一点，大脑里就自动浮现童年被训斥、被否定的画面。

很多人会因此对自己感到羞耻，困惑地问：“明明我已经经这么大了，为什么还像小孩一样害怕？”如果不了解创创伤机制，这些反应很容易被误解为“玻璃心”“抗压差”差”，然而从复杂性创伤（Complex PTSD，简称 CPTSD）CPTSD）的视角来看，这些恰恰是非常典型、非常合理的表现。

CPTSD 指的是一种长期、持续发生在亲密关系中的累积性创伤。它并不一定源于一次巨大的灾难性事件，而往往来自日复一日的语言羞辱、情感忽视、冷暴力、不可预测的惩罚性养育等经历。这些看似“家务事”的互动，会在孩子尚未发育成熟的神经系统中，刻下深深的恐惧与无力感。

长大之后，当环境中出现类似的情境线索，大脑自然会再次“拉响警报”，将人推回到当年的生存模式里。

1. Why CPTSD Deserves to Be Seen

Over the past several years in practice, I have met many clients who, from the outside, look “exceptionally accomplished. ” They hold doctoral degrees, have international work experience, maintain impressive CVs, and are widely seen as capable and resilient.

Yet beneath these achievements lies an ongoing emotional struggle that is difficult for them to explain and often even harder to share. A minor setback at work can trigger an avalanche of self-attack.

Under pressure, they may find themselves either collapsing emotionally or freezing to the point where they cannot think or respond.

A simple phone call from a parent can make their body tense up automatically. Returning to their hometown sometimes leads to insomnia, vivid nightmares, or a sense of dread.

In the workplace, a supervisor’s slightly firmer tone can suddenly evoke intrusive scenes from childhood, such as being yelled at, shamed, or punished.

Many of these clients speak with deep shame and confusion: “I’m already an adult. Why do I still react like a frightened child? ” When trauma is not part of the conversation, such reactions are easily misinterpreted as oversensitivity, lack of willpower, or “not being strong enough.

” From the perspective of Complex Post-Traumatic Stress Disorder, however, these responses are not signs of weakness but rather classic and understandable manifestations of long-term relational trauma.

CPTSD refers to a pattern of psychological injury resulting from chronic, repeated, often inescapable trauma, typically occurring within close relationships and caregiving environments. It does not always stem from a single catastrophic event.

二、CPTSD 的真正伤害：不是事件本身，而是“没没有人保护我”

与传统 PTSD 相比，CPTSD 的关键差异往往不在“发生了什么”，而在于：当那些事情发生时，是否有人站在孩子身边，提供保护与理解。

如果一个孩子长期生活在这样的环境中——惩罚多于支持、批评多于鼓励、情绪表达得不到共情和接纳、父母的情绪随时可能失控爆发、自我价值被完全捆绑在成绩与表现上——那么，为了维持与照顾者的联系，他的大脑会学会一种非常“合理”的生存逻辑：

“一定是我不够好，才会被骂。”

“我必须更懂事，问题才不会发生。”

“只有足够完美，我才是安全的。”

这种信念在童年时期也许是“最不糟糕的选择”，因为它它让孩子维持了对依恋对象的信任感，从而维系了基本的生存安全。但问题在于，这样的信念不会随着年龄自然消失，而是会沉淀成一种持续到成年的“核心信念”，，成为看待自我、他人和世界的底层脚本。于是，在成年后的学习、工作、人际关系中，只要遇到挫折或被评价，那个曾经为了生存而出现的模式，就会立刻被激活。

三、案例解析：当内在批判者成为成年人最大的痛

下面两个案例，是 CPTSD 在成年生活中常见的呈现方式式。为保护隐私，所有细节均做了充分脱敏与处理。

案例一：博士女生的“完美主义风暴”

Instead, it may arise from years of experiences that can appear “ordinary” from the outside: frequent criticism, emotional neglect, cold or withdrawn caregivers, unpredictable anger, or punitive parenting.

These daily micro-injuries are encoded in a child’s still-developing nervous system, shaping their sense of self, safety, and relationship to others.

When similar cues arise in adulthood, the nervous system often responds as if the old danger has returned, pulling the person back into survival mode even when, rationally, they know they are no longer a child.

2. The True Harm of CPTSD: Not Just the Events, but the Experience of Powerlessness

One of the key distinctions between traditional PTSD and CPTSD is that the latter is less about a single “what happened” and more about the ongoing reality that, when painful events occurred, there was no one there to truly protect, believe, or comfort the child.

A child who grows up in an environment where punishment outweighs support, criticism outweighs encouragement, emotional expression is dismissed or ridiculed, parental moods are volatile and unpredictable, and self-worth is tied entirely to performance will gradually arrive at a seemingly logical conclusion: “If something is wrong, it must be my fault.

I’m not good enough. I must be better, more obedient, more perfect in order to stay safe.”

For a dependent child, this belief is not irrational. It is one of the few ways to maintain a sense of control and preserve attachment with caregivers who may also be sources of harm.

Blaming oneself, striving for perfection, and becoming hyper-attuned to others’ moods can all be adaptive survival strategies in an unsafe environment. The difficulty is that these beliefs and strategies do not simply dissolve with age.

Instead, they solidify into core schemas that follow the person into adulthood and color how they interpret feedback, conflict, and relational tension.

When these individuals encounter criticism at work, a disappointment in academic performance, a tense conversation with a partner, or even a disapproving expression on someone’s face, their nervous system can interpret these moments not as everyday challenges but as potential threats to their basic worth and belonging.

The emotional intensity of their reaction is not about the present alone; it is anchored in the past experience of being unprotected, unseen, or blamed in moments of distress.

这位来访者在学术领域表现十分出色，一直名列前茅，也是同龄人眼中的“别人家的孩子”。然而在她的内在世界里，只要一篇论文稍有延期、一次报告被提出批评，整个人就会迅速陷入极端自责与绝望：“我完了，我不配做博士”“导师一定觉得我很糟糕”“我为什么这么差”。这种反应往往不是短暂的情绪波动，而是一连几天甚至几周的自我攻击与否定。

在情绪风暴来临时，她的脑海会自动“播放”一连串童年年画面：父亲因为一个小小的错误而严厉训斥她，母亲反复强调“你必须考第一”“不能输给别人”，稍微表现不现不好就会面临责罚、冷脸或沉默惩罚。成年人眼中的“学术挑战”，在她的神经系统里却被解读为“关系与生存生存威胁”。

从创伤视角来看，这里面至少包含三层重要机制。第一是情绪闪回（emotional flashback）：身体和情绪回到了了童年的恐惧场景，而不是局限在当下的现实情境中。第二是有毒羞耻（toxic shame）：她并不是单纯觉得“我“我这次做得不够好”，而是深信“我这个人是不够好、是、是有问题的”。

第三是内在批判者（inner critic）的暴走：那个曾经通过过“对自己严厉”“不断逼迫自己完美”来换取安全感的内的内在部分，在成年后依然沿用同一套策略，试图通过攻击和贬低来“防止更糟糕的事情发生”。

案例二：靠近家就恐慌的成年女孩

另一位来访者则有一个非常鲜明的触发情境：只要她乘车驶向父母所在的城市，即便还没有真正见到家人，身体就会不受控制地紧张起来。她描述自己在高铁上开始心悸、胸闷、手心出汗，感觉很难呼吸，心里莫名焦躁不安；晚上则反复做噩梦，梦见父母骂她、追着要打她，甚至出现被追杀、逃不掉的情景。到家之后，她往往整夜睡不踏实，任何一点动静、声调变化都会让她高度紧绷。

3. Case Illustrations: When the Inner Critic Becomes an Adult’s Deepest Wound

The following two cases, with all identifying details changed, illustrate common ways CPTSD can manifest in adult life and how the inner critic becomes a central source of suffering.

Case 1: A PhD Student Caught in a “Perfectionism Storm”

One client, a doctoral student, consistently performed at a high level. She was diligent, respected by peers, and frequently praised by faculty. Yet any minor delay in a paper submission or any feedback that was less than ideal could send her into intense emotional turmoil.

She would say things like, “I’m finished. I don’t deserve to be a PhD student,” or “My supervisor must think I’m useless,” or “Why am I so terrible? ” These were not fleeting thoughts; they often marked the beginning of days or weeks of self-criticism and despair.

Whenever something went “wrong,” her mind would instantly replay a series of childhood scenes: her father scolding her harshly for small mistakes, her mother insisting she “must be number one,” and the constant association between slightly imperfect performance and emotional withdrawal or punishment.

From the outside, an imperfect presentation or a revision request from a supervisor might seem like a normal part of academic life. But for her nervous system, these situations closely resembled early experiences where performance was directly tied to safety and love.

From a trauma perspective, several mechanisms are at work here. First, she experiences emotional flashbacks—her emotional and bodily states regress to those of a frightened child, even though her present circumstances are different.

Second, she is engulfed by toxic shame: she does not simply think, “I didn’t do well this time”;

she believes, “I am inherently not good enough.” Third, she is attacked by a powerful inner critic—the internalized voice that once pushed her to be perfect in order to avoid punishment now continues to berate and threaten her in adulthood, attempting in its own misguided way to prevent disaster.

Case 2: An Adult Who Panics Whenever She Approaches Her Hometown

Another client had a very different but equally striking pattern. Whenever she traveled toward the city where her parents still lived, her body would start to panic—even if she had not yet seen them in person.

这是非常典型的依恋性情绪闪回（attachment-based flashback）：在她的童年体验中，“家”并不是无条件安全的地方，而更像一个随时可能爆发冲突的危险区域。于是，在成年后，只要接近这些与“家”相关的线索——地理位置、父母的声音、熟悉的气味——大脑便自动进入高警觉状态，把“靠近家”等同于“可能再次受伤害”。

即使现实中父母已经年长，态度看起来比以往温和许多，她的神经系统仍然被过去的记忆所主导，优先选择“防防御”而不是“放松”。

更关键的是，只要回到家中，她很容易退回到一个“孩子子状态”（regression）：不敢说“不”，对父母情绪极其敏极其敏感，习惯性地讨好、顺从，原本在职场中逐渐建立起来的自信和专业感，会在短时间内崩塌，取而代之的是一种“瞬间归零”的自我价值感。这种退行并不是矫矫情，而是长期生活在不可预测、情感不稳定家庭环境中的孩子，为了维持关系而发展出来的高敏感和过度负责。

四、成年后的 CPTSD，为什么如此顽固?

在不了解创伤机制的人看来，这些表现也许会被简单归结为“太敏感”“太懦弱”“想太多”。然而，从神经科学与发科学与发展心理学角度出发，我们看到的是完全不同的图景。

第一，童年时期的脑可塑性，使得早期环境对大脑结构与功能的影响格外深远。长期处于批评、否定、恐吓或冷暴力之中的孩子，其杏仁核（负责威胁检测）往往处于高敏状态，前额叶（负责理性决策和情绪调节）发育受到一定抑制，海马体（负责记忆整合与时间感）功能也可能减弱。

换句话说，他们的大脑并不是朝着“安全探索与成长”的的方向被塑造，而是更倾向于成为一个随时准备迎接危险的“生存大脑”。

She described heart palpitations on the train, difficulty breathing, physical agitation, and a sense of profound unease as she drew closer to her hometown. At night, she often had nightmares of being yelled at, chased, or attacked by her parents.

She became extremely sensitive to even small changes in their tone of voice once she arrived, and she often spent the first nights at home sleeping lightly or barely sleeping at all.

This is a vivid example of an attachment-based emotional flashback. In her childhood, “home” was not a reliably safe place but rather a site where emotional explosions, severe criticism, or unpredictable discipline might occur at any time.

As an adult, her brain still associates specific cues—train routes, city names, familiar houses, and especially her parents’ voices—with danger.

Even though her parents have grown older and, on the surface, appear more gentle, her nervous system remains shaped by past experiences and continues to respond as if the danger were still present.

In addition, when she is at home, she often regresses into a childlike state. She finds it extremely difficult to say “no,” becomes hyper-attuned to her parents’ mood shifts, falls back into people-pleasing patterns, and feels as though her self-worth collapses within hours of arriving.

The competent and relatively confident professional she has become in the city is replaced by a fearful and self-doubting “inner child. ” This regression is not a failure of maturity; it is a predictable response for someone who grew up in an emotionally unpredictable, high-stress family environment.

4. Why CPTSD Persists into Adulthood

To those unfamiliar with trauma, these patterns might appear to be signs of being “too sensitive,” “too weak,” or “overreactive.” Yet when viewed through the lenses of neuroscience and developmental psychology, a very different and far more compassionate picture emerges.

First, early trauma profoundly shapes brain development.

Children raised in environments of chronic criticism, shaming, emotional withdrawal, or ongoing threat often develop an overactive amygdala (the brain’s threat detection system), an under-supported prefrontal cortex (responsible for reasoning and emotional regulation), and disrupted hippocampal functioning (involved in memory integration and a sense of time).

In other words, their brains are wired more for survival than for exploration, play, and secure learning.

The nervous system remains on alert, scanning constantly for danger, making it difficult to fully relax even in objectively safe situations.

第二，内在批判者本质上是童年时期的“生存策略”，而不是天生的性格缺陷。在无法指责父母、也不能逃离环境的情况下，孩子唯一能做的，是把一切归因到自己身上：“一定是我不好，所以才会被骂”“如果我再懂事一点，情况也许就会好一点”。通过不断否定自己、要求自己完美，孩子获得了一种“控制感”——仿佛只要自己足够努力，就可以避免下一次伤害。

这种策略在童年阶段是有功能的，但当相同的模式被带入成年后，它就会演变成极端完美主义、对失败与不确定的过度回避、动辄自责和强烈的自我怀疑。

第三，羞耻型创伤会让人深信“问题在我”，而不是“问题问题在环境”。John Bradshaw 指出，有毒羞耻是复杂性性创伤的核心根源之一。它不仅让人感到“我做错了”，，更让人相信“我这个人本身是错误的、不值得被爱”。。

在这种底层信念下，只要遇到挫折、批评或关系中的紧张，对方的一个眼神、一个语气变化，都可能被内化为“”我不值得存在”“我没有价值”“我终究会被抛弃”。久而久。久而久之，人会在退缩、抑郁、自责和自我攻击的循环中越陷越深。

五、如何走出 CPTSD？——从神经系统到内在关系系的療愈路径

结合发展心理学、依恋创伤治疗、Pete Walker 的 CPTSD CPTSD 模型，以及在咨询室中的实践，我通常会把 CPTSD 的疗愈划分为三个彼此交织的核心方向：调节神经系统、重建与内在批判者的关系，以及学习“当自己的的父母”。

方向一：调节神经系统——从情绪闪回回到当下

Second, the inner critic is best understood not as a personality flaw but as a survival strategy from childhood. In a family where blaming the parents or questioning their behavior is impossible or dangerous, the child has little choice but to turn the blame inward: “It must be my fault.

If I were better, this wouldn’t happen. ” By believing that they are the problem, children protect their attachment to caregivers—because it is less frightening to see oneself as defective than to accept that the people one depends on might be unreliable or cruel.

Over time, this self-blaming strategy strengthens into a harsh internal voice that constantly pushes for improvement, perfection, and control.

As adults, individuals may no longer be in physical danger, but the inner critic continues to operate as if failure or imperfection could still lead to abandonment or harm. It becomes a relentless inner persecutor rather than a realistic guide.

Third, shame-based trauma convinces the person that “I am the problem.” As John Bradshaw and many others have argued, toxic shame is at the core of complex trauma.

Rather than feeling, “I did something wrong,” the person internalizes, “There is something wrong with me.

” When this core belief is triggered, especially during moments of failure, conflict, or disapproval, clients often find themselves thinking: “I don’t deserve to exist,” “I have no value,” or “Sooner or later, everyone will leave me.

” Such beliefs can lead to severe withdrawal, depressive episodes, and cycles of self-attack that are difficult to break without targeted support.

5. How to Heal CPTSD: From the Nervous System to the Inner Relationship

Drawing on developmental psychology, attachment-based trauma therapy, Pete Walker’s CPTSD framework, and clinical practice, we can think of CPTSD healing as unfolding along three interrelated pathways: regulating the nervous system, transforming the relationship with the inner critic, and learning to “be one’s own parent” through self-reparenting.

Direction 1: Regulating the Nervous System — Stepping Out of Emotional Flashbacks

Emotional flashbacks are not a sign of “overthinking”; they are the nervous system’s automatic alarm response. A crucial first step in healing is helping clients learn to recognize and name these states.

When the body suddenly tightens, the heart races, the mind goes blank, or the urge to hide becomes overwhelming, clients can practice telling themselves, “I’m being triggered. This reaction belongs to an earlier time in my life.

情绪闪回并不是“想太多”，而是大脑在自动报警。療愈的第一步，是帮助来访者逐渐学会识别并命名这种状态。当身体突然紧绷、心跳加速、头脑一片空白时，可以对自己说：“我正在被触发，我现在的反应和当年很像，但我已经不是那个无助的小孩了。

”这种自我觉察并不会立刻让症状消失，却是在神经系统统中种下一个重要的“区分点”，让大脑慢慢学会分辨“过“过去的危险”和“当下的现实”。

在具体技术上，我们会使用各种“身体落地”（grounding grounding）的方法，协助神经系统从高度警觉状态缓慢慢降下来，比如：缓慢而稳定的深呼吸、用力踩地感受脚掌与地面的接触、抱着抱枕或盖上有重量的毯子、用温水洗澡或洗脸、轻轻拍打双臂（双侧刺激）帮助注意力回到此时此地。这些看似简单的动作，本质上是在通过身体向大脑传递信号：“现在是安全的。

”随着练习的积累，神经系统的可塑性会逐渐展现，人对对情绪闪回的敏感度和恢复速度，也会一点点改善。

方向二：重建与内在批判者的关系

在很多 CPTSD 来访者身上，最让人痛苦的往往不是外界界的评价，而是脑海中那个永远挑剔、严厉、毫不留情的声音。我们的目标并不是把这个声音“消灭掉”，而是是理解它曾经在童年的功能，将它从“攻击者”慢慢转化化为“保护者”。

在咨询中，我会邀请来访者尝试把内在批判者“外化”出出来——把它想象成一个具体的形象，或者为它画一幅画、写一封信，慢慢意识到：这个声音并不仅仅是“我很很差”，而是当年那个很怕再被骂、再被抛弃的孩子，为为了活下去而发展出来的策略。

I am no longer that helpless child.” This kind of self-talk does not immediately erase the symptoms, but it introduces a vital distinction between past and present, allowing the nervous system to gradually learn that it is not actually reliving the original trauma.

Alongside awareness, grounding practices play a central role. These can include slow, steady breathing; consciously feeling both feet on the floor; using weighted blankets or holding a cushion to feel supported; taking a warm shower; or using gentle bilateral tapping on the arms.

All of these are simple but powerful ways of sending the message, “I am here, now, and I am physically safe. ” Over time, repeated practice promotes neuroplastic change.

Clients often report that emotional flashbacks become less overwhelming or shorter in duration, and they feel more able to stay connected to the present moment when triggered.

Direction 2: Transforming the Relationship with the Inner Critic

For many people with CPTSD, the inner critic is one of the most painful aspects of daily life. It comments relentlessly, judges harshly, and rarely acknowledges any success. Yet from a trauma-informed perspective, the inner critic is not simply an enemy to destroy;

it is an internal part that once tried to protect the child by demanding perfection and vigilance. The therapeutic task is not to erase this voice but to change the relationship with it.

One useful approach is externalization—inviting clients to imagine the inner critic as a character, an image, or even to draw or write from its perspective. This can help them see that the critic is not identical with the whole self, but rather a part that developed in response to fear and instability.

When the critic becomes loud and punishing, clients can practice responding differently: “I know you are scared, and that’s why you are speaking so harshly,” or “You believe that if you push me hard enough, I won’t be hurt again,” or “Thank you for trying to protect me, but I am an adult now, and I can choose another way.

”

At the cognitive level, cognitive defusion is also important. Instead of fusing with thoughts like “I’m a failure” or “I am worthless,” clients learn to notice, “I am having a shame-based thought,” or “I can hear the old critical voice speaking again.

” This subtle shift—from full identification to mindful observation—marks an essential move from automatic self-blame toward self-awareness and self-compassion.

当它又开始批判时，我们可以练习用不同的方式回应它，比如："我知道你在害怕，所以才会说这么重的话""你这么严厉，是因为你以为只有这样才能保护我""谢谢你提醒我，但现在我已经长大了，有些事情可以换一种方式处理"。

与此同时，认知层面的练习也很重要。通过"思维脱钩""（cognitive defusion），我们尝试从"我就是个失败者""败者""我一无是处"，转变为"我现在被强烈的羞耻感触感触发了""我又听见那个旧的声音在说话"。这种从"完"完全认同"到"能够观察"的改变，是从自动自责过渡到渡到自我觉察的关键一步。

方向三：学习"当自己的父母"——重建内在的安全基地地

John Bradshaw 提出的"重新养育"（reparenting）理念，理念，强调人在成年后有机会为自己提供童年错失的那种稳定、温暖、可靠的照顾。这并不是某种空泛的自我安慰，而是从依恋与神经科学的角度，重新为内在系统建立一个"安全基地"。

在实践中，这意味着：一方面，我们开始学习用一种更像"好父母"的语气对自己说话——例如在失败、情绪崩崩溃、被批评之后，不再只是"你怎么又这样""你真没用没用"，而是尝试对自己说："你已经很努力了""你值得值得被理解""犯错不会让你失去被爱的资格"。

另一方面，我们也需要在现实生活中逐步建立情绪和关系的界限：成人的你，有权决定哪些关系不能再无限靠近、哪些伤害应该彻底终止、哪些不合理的期待可以不再接收。

Direction 3: Learning to "Be Your Own Parent" — Rebuilding an Inner Secure Base

John Bradshaw's concept of reparenting highlights the idea that, in adulthood, we can begin to offer ourselves some of the understanding, protection, and care that we may have missed in childhood.

From an attachment and neuroscience standpoint, this is not a fantasy exercise but a genuine way of rebuilding an inner sense of safety.

In practice, this means gradually adopting a more compassionate and supportive inner tone, especially in moments of distress. Instead of saying, "You messed up again. What's wrong with you?

" clients are encouraged to experiment with responses like, "You've already tried so hard," "It makes sense that you feel this way," or "Making a mistake does not mean you lose your right to be loved.

" Over time, this more nurturing inner voice can begin to counterbalance the harsh critic and provide a new emotional baseline.

Reparenting also involves setting boundaries in the external world. The adult self is now in a position to decide which relationships can remain close, which forms of harm must stop, and which expectations are no longer acceptable to carry.

This may involve physical distance, emotional limits, or renegotiating patterns with family members. Saying "no" and protecting one's energy are not acts of betrayal; they are acts of self-care and survival.

When clients reach the point where they can genuinely say, "I'm allowed not to be perfect, and that does not mean I will be abandoned," a profound shift has begun.

The old survival logic—"I must perform flawlessly in order to deserve existence"—starts to give way to a new, healthier belief: "I am inherently worthy of care and safety, even when I make mistakes. "

6. A Message to Anyone Living with CPTSD

If you see yourself in these descriptions, you may have spent years criticizing yourself for being "too sensitive," "too emotional," or "too easily triggered.

" You may wonder why a raised voice shakes you so deeply, why you dread phone calls from home, or why a simple setback at work feels like proof that you are fundamentally broken. From a trauma-informed perspective, these reactions are not signs that something is "wrong with you.

" They are signs that you once lived in environments that were too overwhelming, too unpredictable, or too unprotected for a nervous system still under construction.

当来访者第一次由衷地说出："原来我可以不那么完美，也不会被抛弃"，往往意味着一部分旧信念正在松动，一个新的自我图景正在生成——从"时时刻刻要证明自己配得活着"，转变为"我本身就是值得活着、值得被好好对待的人"。

六、写给正在经历 CPTSD 的你

也许你曾无数次责怪自己：为什么这么敏感、这么脆弱、这么容易被触发？为什么别人一句话，你就难过很久？为什么明明知道"父母不会再打我了"，身体还是会害害怕？但如果从创伤的角度来看，这些并不是你的"毛病病"，而是你在非常艰难的环境里，为了活下来、为了维维持关系而发展出的生存方式。

CPTSD 不是你的错，它指向的不是"你有多糟糕"，而是"是"你曾经没有被好好保护"。而现在，作为一个已经长长大的你，你有机会慢慢成为那个真正会站在自己这边的人。你可以开始重新定义：什么是对你而言的"安全""？什么才是你的"价值"？你愿意如何理解"爱"？你又愿你又愿意如何看待"自己"？

创伤恢复并不是强迫自己忘记过去，而是在足够安全的环境中，有力量回头看一眼那些曾经的疼痛，并在新的关系和体验里，重新进入生命。

如果你在阅读这些文字时，隐约看到了自己的影子，愿这篇文章能成为你疗愈旅程中的一个温柔起点——不催促你，也不评判你，只是在那里，和你一起，慢慢走。

作者信息 / Author Information

作者：June | ASA 咨询与情绪健康研究组

Author: June | ASA Counselling & Emotional Well-being Research Group

CPTSD is not your fault. It is not evidence that you are weak, dramatic, or incapable. It is the imprint of a childhood in which you were not adequately defended, believed, or comforted.

The good news—though it may not always feel like good news—is that now, as an adult, you have the possibility of becoming the person who finally stands up for you, believes you, and stays with you when things are hard.

You can begin to redefine what "safety" means for you, beyond old patterns of fear and hypervigilance. You can reconsider what "value" means, beyond performance and perfection. You can explore new understandings of "love" that are not based on conditions, fear, or control.

And you can rediscover a sense of "self" that is deeper and kinder than the identity shaped by shame and survival.

Healing from CPTSD is not about erasing the past or forcing yourself to forget. It is about gaining enough safety, support, and inner stability to be able to look back without being overwhelmed, and then to move forward with more choice, more connection, and more compassion toward yourself.

If this article resonates with something inside you, may it serve as a gentle beginning—a reminder that your reactions make sense, that your story deserves to be understood, and that you are not alone on the path toward healing.

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在两种文化之间：亚洲女性的跨文化心理困境与自我重塑

Between Two Cultures: Asian Women's Cross-Cultural Psychological Challenges and Self-Reconstruction

导语

本文从亚洲女性在澳洲及跨文化环境中的真实经验出发，讨论语言、羞耻文化、家庭期待与身份重塑如何交织成隐形心理压力，并尝试为自我理解与自我重建打开更细腻的叙事空间。

Lead

Grounded in the experiences of Asian women living across cultures, this article examines how language, shame culture, family expectations, and identity reconstruction can become invisible psychological pressures, while opening a more nuanced space for self-understanding and renewal.

一、引言：跨文化迁徙不是搬家，而是心理与身份的移动

在 ASA 举办的跨文化心理讲座、女性支持小组与情绪健康工作坊中，我听过许多亚洲女性的故事。她们来自中国、日本、韩国、越南等不同的文化背景，却在分享中不约而同地表达出相似的感受："我明明很努力，但在澳澳洲总觉得自己不够好。""我想参与，但不知道怎样才才算自然。""越紧张越不敢说话。""我怕给别人添麻烦麻烦。""我不知道怎么和他们一样自信。

"这些看似零散的表述，慢慢在我心中拼成了一幅"隐形形心理地图"——它记录的不是地理位置，而是亚洲女性性在跨文化环境中的情绪地貌。

跨文化迁徙，从来不只是从一个城市搬到另一个城市。它往往意味着语言结构的调整、人际关系逻辑的改变、自我认知框架的重组，以及对于"什么是好的生活""如何如何表达情绪"的价值重写。对许多亚洲女性而言，这种种重写既是成长的机会，也是撕裂的来源；既带来更开阔的视野，也带来更深层的迷茫与疲惫。

二、亚洲女性的文化心理结构：羞耻、期待、体面与沉默

当我们观察亚洲女性在澳洲的心理反应时，很容易用"内向""怕生""不自信"等标签去概括。但如果回到文化语境，会发现这些反应背后有着深厚而复杂的文化土壤。

1. Introduction: Cross-Cultural Migration as a Movement of Identity

In ASA's cross-cultural psychology talks, women's support circles, and emotional well-being workshops, I have listened to many stories from Asian women now living in Australia.

They come from Chinese, Japanese, Korean, Vietnamese and other Asian backgrounds, yet when they speak in small-group discussions or anonymous feedback, their feelings often echo one another: "I work so hard, but in Australia I still feel not good enough.

" "I want to join in, but I don't know what looks natural. " "The more nervous I am, the less I can speak. " "I'm afraid of troubling others. " "I don't know how to express confidence the way they do. "

Taken together, these voices form an invisible psychological map. It does not describe physical geography, but the inner terrain that many Asian women walk across in their daily lives here. Cross-cultural migration is rarely just a change of address.

It involves a reconfiguration of language, the logic of relationships, how identity is understood, what counts as "good" or "proper" behaviour, and how emotions are allowed—or not allowed—to be expressed.

For many Asian women, this reconfiguration brings both expansion and fracture: it opens possibilities and, at the same time, exposes them to new forms of pressure, self-doubt, and emotional fatigue.

2. The Cultural Psychology of Asian Women: Shame, Expectation, Dignity, and Silence

The emotional reactions that Asian women show in Australia are often mislabelled as shyness, oversensitivity, or a lack of confidence. When placed back into their cultural context, however, they are revealed to be grounded in a complex and deeply rooted psychological structure.

首先，“羞耻文化”是许多亚洲社会的重要心理基底。在集体主义文化中，“我好不好”很大程度上来自“别人怎么看我”。许多女性从小被教导要懂事、要体贴、要顾及他人感受，不要给别人添麻烦。久而久之，“避免让他人失望”“不要给别人增加负担”成为一种自动反应。在跨文化情境中，这往往表现为过度自责、过度解释、过度努力去“做对”，以及对冲突与负面评价的高度敏感。

羞耻在这里并不是单纯的“丢脸感”，而是一种用来维护护关系、维护体面的社会机制。

其次，亚洲许多地区属于“高语境沟通”文化。含蓄被视视为礼貌，暗示、眼色、语气变化往往比直白言语更重要，善于“读空气”被看作一种成熟的人际能力。然而，，在澳洲这样的低语境文化中，沟通规则几乎反过来：直接表达被视为尊重，清晰说出观点才算参与，不表达则可能被解读为“不关心”或“没有意见”。

因此，许多亚洲女性并不是“不会说话”，而是在两套沟沟通规则之间不断切换，心中顾虑重重——一方面担心自己说得太直接被认为不礼貌，另一方面又担心沉默被理解为冷淡或不投入。

再次，自我沉默（self-silencing）也是理解亚洲女性心理理状态的重要线索。自我沉默理论指出，许多女性为了维持关系和谐，会有意无意地压抑自己的需求、隐藏真实情绪、避免表达不满，并在关系中扮演“调解者”的角角色。在许多亚洲家庭里，这种把情绪收起来、不给别人添麻烦的行为，常常被视为“懂事、乖巧、体贴”。

然而，当这一模式被带入西方社会，就很容易导致不敢表达意见、难以为自己发声、在遇到困难时选择沉默、在社交情境中出现短暂冻结。这些并不是单纯的“害羞””，而是文化脚本在跨文化情境中的延续。

最后，“好女儿脚本”几乎塑造了许多亚洲女性的成长轨轨迹。这个脚本往往并不会被直接说出，但却无处不在：要懂事、要照顾家人的情绪、不要任性、要成为家人的骄傲、要维持体面、不要给家里添麻烦。

One important layer is shame culture. In collectivist contexts, a person’s sense of worth is closely tied to how they are seen by significant others. Many women grow up learning not to inconvenience people, not to “make trouble,” to be considerate and responsible, and to put others’ needs before their own.

Over time, this produces an automatic tendency to monitor oneself, to prevent disappointment, and to preserve harmony. In cross-cultural environments, this can manifest as excessive self-blame, over-explaining, trying very hard to “do it right,” and a heightened sensitivity to criticism and conflict.

Shame here is not simply a feeling of embarrassment; it functions as a relational maintenance mechanism, keeping dignity and belonging intact.

A second layer concerns high-context communication, which characterizes many Asian societies. Under this style, subtlety is valued, implications and nonverbal signals are important, and “reading the air” is considered a social skill. Directness can be perceived as blunt or insensitive.

In contrast, Australia largely operates on low-context norms: direct speech is equated with clarity and respect, explicit verbal participation signals engagement, and silence can be read as disinterest or lack of opinion. Asian women are thus not “unable” to communicate;

rather, they are navigating between two very different sets of communicative expectations, constantly balancing the risk of being “too direct” with the fear of being “too quiet.”

A third layer is self-silencing. Self-Silencing Theory suggests that many women suppress their own needs and feelings in order to maintain relational harmony.

In Asian families, this tendency is often reinforced and even praised: not burdening others with one’s problems, holding back anger, smoothing over conflicts, and making oneself “easy to live with” are taken as signs of maturity, kindness, and being a “good daughter.

” When this pattern is carried into Western environments, however, it can lead to difficulty voicing opinions, reluctance to assert boundaries, emotional withdrawal under stress, and moments of social “freezing” in which the person feels unable to speak even when they would like to.

This is not a personal flaw, but the continuation of a cultural script in a very different cultural arena.

Finally, many Asian women have been shaped by an implicit “good daughter” script. This script is rarely written down, yet it is widely felt: be understanding, regulate your emotions, avoid being “difficult,” strive for excellence, bring pride to your family, maintain face, and never cause trouble.

这样的脚本在原生文化中帮助她们获得认可和归属感，却在澳洲带来了意想不到的心理冲突：在职场上不敢推销自己，在课堂上不敢举手发言，在社交场合中变得紧绷而谨慎，一旦遇到压力，首先责备的往往是自己。与其说亚洲女性“不够自信”，不如说她们“太习惯承担”。

三、跨文化冲击：当两种文化在身体里相遇

基于 ASA 的活动观察与我个人的跨文化生活体验，我逐渐发现，许多亚洲女性在跨文化适应过程中呈现出一些高度相似的心理现象。

其一是“语言焦虑”，但真正焦虑的往往不是语言本身，，而是“被误解的恐惧”。不少女性明明听得懂英语，也也有足够能力表达，却依旧在开口前反复斟酌。她们并不是怀疑自己的智力或努力，而是担心因为表达不流畅、语法不完美，会被误读为“不专业”“不认真”甚至“不够“不够聪明”。

这是一种典型的“能力感威胁”和“身份连续性焦虑”——说”——说的不是“我比别人差”，而是“如果表现不够好，我好，我的努力会被看不见，我原本的身份价值会受到质疑”。

其二是“社交冻结”。在陌生的社交场合中，许多亚洲女女性并非始终沉默，而是在刚刚接触环境时会出现短暂的“卡住”——不知道什么时候插话合适、不确定自己的的表达会不会打断别人、不太明白现场互动到底遵循什么样的隐形规则。这并不等同于社交恐惧，而更像是两种文化节奏之间的“延迟反应”：从高语境文化切换到低低语境文化，大脑需要额外的时间去捕捉线索、判断边界。

其三是“求助羞耻”。在不少亚洲文化中，“麻烦别人”本”本身就可能被视为一种失礼或能力不足的表现。因此，，很多女性宁愿一个人硬扛，也不愿轻易开口求助。在跨文化的场域里，这种倾向往往被进一步放大——她们担心求助会被理解成“不能胜任工作”“适应能力差”，于，于是更倾向于把压力内化，用沉默和退缩来处理困境。这使得她们在异国生活中显得格外坚强，同时也格外孤独。

四、案例：跨文化交流中的真实心理轨迹

以下几个案例，来自 ASA 活动参与者在分享时的片段，以及我个人在澳洲生活过程中对身边亚洲女性的观察。所有案例均经过脱敏处理。

In their home culture, this script helps women gain acceptance, approval, and a sense of belonging. But when transplanted into the Australian context, it can create significant friction.

Women may hesitate to promote themselves at work, hold back from speaking up in class, feel tense in networking situations, and automatically blame themselves when things go wrong.

Rather than lacking confidence, many Asian women have simply learned to carry more responsibility—both emotional and relational—than most people can see on the surface.

3. Cross-Cultural Impact: What Happens Internally When Cultural Scripts Collide

Drawing on ASA’s programs and my own migration journey, I have observed several recurring psychological patterns among Asian women during cross-cultural adaptation.

One common experience is language anxiety, but in many cases the core issue is not the language itself. These women often understand English well and are fully capable of expressing complex ideas, yet they hesitate at the moment of speaking.

The fear is less about grammar or vocabulary and more about being misinterpreted—as unprofessional, not serious enough, or less competent—because of an accent, a pause, or imperfect phrasing.

This reflects what can be called competence threat and identity continuity anxiety: speaking up is not merely sharing content, it is exposing one’s identity to possible misjudgment.

Another pattern is social freezing. In unfamiliar social settings—professional events, parties, or group gatherings—many Asian women experience brief internal “pauses.

” They struggle to know when it is appropriate to join the conversation, whether their comment might interrupt, or how informal they are allowed to be. This is not simply social anxiety or introversion.

It is the moment when two different cultural rhythms meet: the high-context rhythm that prioritizes not interrupting and careful observation, and the low-context rhythm that expects spontaneous verbal participation.

The mind needs a bit more time to recalibrate.

A third recurring experience is help-seeking shame. Many Asian women describe thoughts such as “I don’t want to trouble anyone” or “If I ask for help, they might think I’m not capable.

” In cultural contexts where asking for help can be equated with imposing a burden, or where independence is highly valued, seeking support may feel risky.

案例 A 中，L 是一位远赴澳洲读硕士的学生。她在活动中说："我听得懂，也知道该怎么回答，但我总担心一旦说得不顺，别人就会觉得我不专业。"她不是在怀疑自己的知识水平，而是在担心自己的专业形象在一种陌生的表达体系中被误读。这种语言焦虑背后，是对身份和努力被看见与否的深切在意。

案例 B 中，T 描述自己在课堂与社交场合的困惑："我其其实很想参与，但总是不知道什么时候插话才显得自然。"她并不是没有观点，而是在两种不同的"礼貌规则"之"之间小心翼翼地平衡：在亚洲文化里，不随意打断别人人往往被视为尊重；而在澳洲，如果不主动开口，很容易被解读为"没有意见"或"不感兴趣"。她的犹豫，是试是试图在两种文化标准之间找到一个不至于"犯错"的位位置。

案例 C 发生在一次节庆活动中。那天现场气氛热烈，音乐、灯光、交流声此起彼伏。我注意到，包括我在内的几位亚洲女生，很自然地靠近彼此，形成一个小小的聊天圈子，更多是安静交谈、观察环境，而不是立刻冲进舞池或与陌生人寒暄。

这并不是排外，也不是对他人的拒斥，而更像是一种文化性的自我保护——先在熟悉的氛围中找到一点安全感，确认自己并不孤单，再慢慢向更大的社交场域靠近。跨文化心理学把这种现象称作"文化同源聚集（cultural clustering）"，它是跨文化适应过程中的正常阶段，而非而非"不合群"。

五、如何在两种文化之间重塑自我？

跨文化适应并不是要抛弃一种文化、投靠另一种文化，而是要让两种文化在一个人身体与心灵之中，找到一种可以共存的平衡。对于许多亚洲女性来说，重塑自我的过程可以从几个关键方向展开。

In Australia, this can lead to women appearing quiet, overly self-reliant, or emotionally withdrawn—not because they do not need support, but because the act of asking feels like a violation of deeply ingrained cultural norms.

4. Case Vignettes: Real Psychological Moments in Cross-Cultural Spaces

The following anonymized vignettes are drawn from ASA activities and personal observations of Asian women's experiences in Australia.

In Case A, L is a postgraduate student who came from Asia to study in Australia. During a workshop, she shared: "I can understand everything, and I know what I want to say, but I'm afraid that if I speak slowly or make mistakes, people will think I'm not professional.

" Her anxiety was not about intelligence or effort; it was about the possibility that her competence and dedication would be misread through the lens of language. Her primary concern was not being "the best," but being accurately seen.

In Case B, T described a recurring dilemma in class and social environments: "I want to participate, but I never know when to jump into the conversation naturally. " What she was negotiating was not a lack of ideas but a conflict between two sets of politeness rules.

In the cultural script she grew up with, not interrupting and waiting for a clear turn to speak is a way of showing respect. In the Australian script, however, participation often requires a certain degree of initiative and interruption.

Her hesitation reflects the difficulty of reconciling these two norms without feeling rude in either language.

In Case C, at a festive event with music, dancing, and loud conversation, I noticed that several Asian women—including myself—naturally gravitated toward one another. We stood together, talking quietly, observing the environment, and slowly warming up to the atmosphere.

This was not an act of exclusion or resistance to integration. It was a way of seeking familiarity, lowering cultural overload, and creating a small psychological safe zone before moving outward.

Cross-cultural psychology refers to this phenomenon as cultural clustering—a normal and often helpful stage of acculturation in which people first anchor themselves among those who share similar backgrounds before extending connections across differences.

5. Reconstructing the Self Between Two Cultural Worlds

Cross-cultural adaptation is not about abandoning one culture in order to "become" another. Instead, it is about learning how to allow more than one cultural world to coexist within the self. For Asian women, this process of reconstruction often unfolds along several dimensions.

第一，是理解：学会区分“文化脚本”与“自我价值”。当你发现自己在表达意见前反复犹豫，在需要帮助时习惯性退缩，在关系中总忍不住过度迎合他人时，很容易下意识地认为“是我不够好”“是我有问题”。然而，如果我们把这些反应放回文化语境，就会发现，它们往往是长期文化训练的结果，而不是个人性格的缺陷。

意识到这一点，本身就会让羞耻感稍微松一松——你不是一个“有问题的人”，你是在一套特定文化逻辑中长大大，而这套逻辑此刻正在新的文化环境里继续运行。

第二，是自我慈悲：允许自己在跨文化学习中“慢一点”“”“笨一点”。自我慈悲并不是给自己找借口，而是一种对种对真实处境的理解。你可以对自己说：“我正在适应两两套完全不同的规则，感到累是正常的。”“我害怕被误误解，是因为我在乎这段关系。”“我有权利需要别人，，而不仅仅是照顾别人。”当你用这样的态度对待自己时时，温柔就不再是退缩，而是一种在高压环境下维持心理弹性的力量。

第三，是重建身份：在文化的交界处成为一个更完整的自己。你不需要强迫自己成为“典型的亚洲人”或“典型的型的澳洲人”。你可以是一个温柔但有界限的亚洲女性，，一个谦逊但敢表达的新移民，一个既体贴他人又愿意照顾自己的成年人，一个敏感却同时拥有力量的个体。你并不是被两种文化撕裂的人，恰恰相反，你是被两种文化共同扩展的人。

第四，是建立“桥梁关系”：从安全感出发，逐渐靠近陌陌生文化。人与文化之间的接触很少是“一步到位”的。。对于许多在异乡生活的亚洲女性来说，她们需要的往往不是“立刻融入”，而是一座可以慢慢走过去的桥——一个不评判她们口音和语法的朋友，一个可以容许停顿与思考的对话空间，一个懂得亚洲文化语境、愿意耐心倾听的人。

The first is understanding—learning to distinguish between cultural scripts and personal worth. When you find yourself hesitating to express an opinion, struggling to ask for help, or automatically taking responsibility for others' feelings, it is easy to conclude, “Something is wrong with me.

” From a cultural perspective, however, these reactions are often products of long-term socialization rather than evidence of personal deficiency. Recognizing this difference can loosen the grip of shame: you are not “the problem”;

you are living out a script that once made sense in a particular cultural context, and that script is now being tested in a new environment.

The second dimension is self-compassion. Cross-cultural life is, by definition, complex. You are trying to learn two sets of rules at once: how to remain connected to your original culture while navigating a new one.

Self-compassion allows you to say to yourself, “It makes sense that I am tired,” “It makes sense that I am afraid of being misunderstood,” “It makes sense that I am not always fluent in a system I am still learning. ” This is not self-indulgence;

it is a realistic and kind recognition of your actual circumstances.

Gentle self-talk—acknowledging your efforts, your fears, and your needs—can become a crucial source of resilience.

The third dimension is identity reconstruction. You do not have to choose between being “a typical Asian woman” or “a typical Australian. ” You can be gentle and have clear boundaries, be humble and still speak up, be relationally oriented and still protect your own needs, be sensitive and also strong.

Rather than seeing yourself as someone torn between two cultures, you can begin to see yourself as someone enlarged by two cultures.

The fourth dimension involves building bridge relationships. Successful adaptation does not require you to jump immediately into the deepest end of unfamiliar social waters.

Instead, many people benefit from intermediate spaces: a nonjudgmental friend, a slower-paced environment to practice English, someone who understands both Asian and Australian cultural logic, or a group where it is safe to ask “naïve” questions.

ASA's programs and community spaces are designed with this bridging function in mind: they offer a middle ground between familiarity and novelty, where Asian women can bring their own cultural background, explore new ways of relating, and gradually build confidence without losing themselves.

ASA 的活动与社群，正是希望扮演这样一座桥梁：在熟悉与陌生之间，提供一个心理的中间地带，让人可以带着自己的文化来，又带着新的经验离开，而不必丢掉任何一边。

第五，是拥抱一种“文化整合式自我”：把文化从负担转转化为资源。亚洲文化赋予我们的，是敏感、细腻、同理心、对关系的在意与对他人情绪的关注；澳洲文化带来的，则是对表达的鼓励、对边界的尊重、对独立与行动力的肯定。

当我们开始允许两种力量在自己身上并存时，文化就不再只是“障碍”或“包袱”，而成为一种可以调动的资源——源——在需要倾听时发挥敏感，在需要发声时借用直接，在关怀他人时不忘记照顾自己。

六、写给在异乡努力生活的亚洲女性

如果你正在为语言、文化、社交、身份而感到疲惫，请记住：你不是“格格不入的人”，你是正在跨越两种文化化的人；你不是“不够外向的人”，你只是带着另一种情情绪语言在生活；你不是“不够自信的人”，你是在陌生生制度下慢慢重建安全感；你不是“融不进去的人”，你你是在让两种文化在身体里慢慢对话、彼此靠近。

愿你在跨文化的旅程里，不再只把自己看作“迟迟没融入入的人”，而是看作一个在两个世界之间，认真练习、不不断尝试、逐渐长成自己的生命。愿你在来回摆动中，找到属于自己的节奏、自己的力量，也找到一个真正可以安放自己的归属。

作者信息 / Author Information

作者：June | ASA 咨询与情绪健康研究组

Author: June | ASA Counselling & Emotional Well-being Research Group

Finally, there is the work of embracing a culturally integrated self. Asian cultures may offer sensitivity, attentiveness, relational depth, and emotional nuance. Australian culture may offer clearer boundaries, greater encouragement of self-expression, and a stronger emphasis on independence and agency.

When you allow these qualities to coexist within you, culture transforms from a burden into a resource. You are no longer simply trying to escape one world or dissolve into another; you are learning how to become someone who can carry multiple identities with coherence and dignity.

6. A Message to Asian Women Living Between Cultures

If you are struggling with language, culture, social life, or questions of who you are, I hope you can remember this: you are not someone who is perpetually “behind”; you are someone who is courageously learning how to live between worlds. You are not simply “too quiet”;

you are speaking and feeling in another emotional language. You are not “not confident enough”; you are rebuilding a sense of safety in systems that were not designed with your story in mind. You are not “unable to integrate”; you are slowly allowing two cultural worlds to enter into conversation within you.

May you come to see yourself not as a problem to be fixed, but as a bridge being carefully built. May you find a rhythm that belongs to you, a voice that feels true to you, and a place—both inner and outer—where you can finally say, with ease and certainty: This, too, can be my home.

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与孤独症孩子的对话

A Dialogue with Children with Autism

导语

借由 52Hz 鲸鱼的隐喻，本文进入孤独症儿童的感知世界，讨讨论孤独、沟通、社会理解与家庭陪伴之间的复杂关系，提醒我们在标签之外看见一个孩子真实而独特的存在。

Lead

Using the metaphor of the 52Hz whale, this article enters the perceptual world of children with autism. It reflects on loneliness, communication, social understanding, and family companionship, inviting readers to see the child beyond the label.

一、孤独者的追逐

引言 52Hz 的链接：感受孤独

1989 年，科学家借助声波探测仪，偶然发现了一头极为为特殊的鲸鱼 ——ALICE。通常，鲸鱼的叫声频率多在 20Hz 左右，而 ALICE 的歌声频率却高达 52Hz。在同类的的 “语言体系” 里，这独特的 52Hz 成了一道无形的屏障障，它的吟唱从未被其他鲸鱼听见，难过时没有同伴理睬，喜悦时也无人分享。

就这样，这头 52Hz 的鲸鱼独自歌唱、独自旅行，从太平平洋穿越西北通道，一路游弋到大西洋，那份深入骨髓的孤独，远超常人的想象。

自被发现后，ALICE 又独自存活了 20 年。没人知道它不不停穿梭于海洋的目的，在生物学家眼中，它十分健康，毕竟它凭借一己之力，在广袤的海洋里生活了漫长的岁月。

可它真的孤独吗？

就像我们身边的孤独症孩子，他们能感知到自己的独特吗？他们会产生孤独的情绪吗？他们又是否知道，我们能体会到他们世界里的那份疏离？

52Hz 的链接，不仅连接着一头鲸鱼的孤独，更隐喻着每每一个孤独症孩子的独特频率。

（一）孤独症概况

孤独症≠情感上的 “孤独”。它是一种起病于 3 岁之前的广的广泛性发展障碍。社会动机假说指出，与神经典型同龄人相比，孤独症个体从社会刺激中获得的内在奖励更少。这种社会动机的差异，被认为是造成孤独症谱系障碍（ASD）患者社交缺陷的核心因素之一，且社会动机与神经肽催产素密切相关。

I. The Pursuit of the Lonely One

Introduction: The 52Hz Connection — Feeling Loneliness

In 1989, scientists using acoustic detection equipment accidentally discovered an extremely special whale named ALICE. Usually, whale calls are around 20Hz, but ALICE’s song reached a frequency of 52Hz. Within the “language system” of its own species, this unique 52Hz frequency became an invisible barrier.

Its singing was never heard by other whales. When it was sad, no companion responded; when it was joyful, no one shared its happiness. And so, this 52Hz whale sang alone and travelled alone, swimming from the Pacific Ocean through the Northwest Passage and all the way to the Atlantic Ocean.

The loneliness buried deep in its bones was far beyond what most people could imagine.

After being discovered, ALICE continued to live alone for another 20 years. No one knew why it kept travelling through the ocean. In the eyes of biologists, it was very healthy. After all, it had survived on its own in the vast ocean for many long years.

But was it truly lonely?

This is similar to the children with autism around us. Can they sense their own uniqueness? Do they experience loneliness? Do they know that we are trying to understand the sense of distance within their world?

The 52Hz connection is not only linked to the loneliness of one whale. It is also a metaphor for the unique frequency of every child with autism.

1. An Overview of Autism

Autism is not the same as emotional “loneliness. ” It is a pervasive developmental disorder that begins before the age of three. According to the social motivation hypothesis, compared with neurotypical peers, individuals with autism receive less intrinsic reward from social stimuli.

孤独症的典型症状表现为儿童的社会化障碍、交流障碍与想象障碍，具体呈现为社交沟通困难、重复刻板行为、兴趣范围狭隘等特征。需要明确的是，孤独症孩子在社交互动中表现出的“孤立”状态，并非源于主观的情感偏好，更多是由其独特的行为模式所决定的。

（二）孤独症的分类

典型意义上的自闭症与非典型自闭症

典型意义上的自闭症（Autistic Disorder），指在人际关关系、语言交流以及行为兴趣等方面存在全面障碍，且症状通常在三岁前显现，是自闭症谱系障碍中程度最严重的类型。

非典型自闭症的起病年龄往往不典型，或症状表现存在特殊性，在部分领域可能与普通儿童无异，并未呈现出全面的功能缺损。

折线型自闭症与非折线型自闭症

折线型自闭症（Knick Type Autism）的核心特征是发育过育过程中出现明显的发育退行，尤其强调语言能力的倒退 —— 具体表现为儿童在两岁前已经掌握的语言能力，，在后续病程中逐渐消退。据相关研究统计，这类自闭症约占自闭症患儿总数的 22.4% 至 37.2%。日本学者小林的研究还发现，折线型自闭症的发病不存在性别差异。

非折线型自闭症则不存在发育退行的现象，患儿的能力发展虽可能较为缓慢，但始终保持着循序渐进的态势。

高功能自闭症与低功能自闭症

这是目前我国多数医院临床诊断中采用的分类标准。其中，高功能自闭症 指患儿仅存在轻度智力损伤或智力水平正常，能够基本适应学校的教育环境；低功能自闭症则指患儿伴随中度或重度智力损伤，在生活自理、社交学习等方面需要长期的支持与辅助。临床数据显示，在孤独症群体中，男性多表现为高功能自闭症，女性则更多为低功能自闭症。

（三）ASD 的社交系统

2020 年，美国脑科学领域的权威期刊刊登了加州大学教授的研究成果 ——《社交技能干预后 ASD 青少年神经奖励反应性增加》。该研究指出，奖励系统功能异常是导致孤独症谱系障碍（ASD）群体社交沟通缺陷的潜在神经机制。

This difference in social motivation is considered one of the core factors behind social deficits in people with autism spectrum disorder, or ASD, and social motivation is closely related to the neuropeptide oxytocin.

The typical symptoms of autism include difficulties in socialization, communication, and imagination. More specifically, they may appear as challenges in social communication, repetitive and stereotyped behaviors, and restricted interests.

It is important to clarify that the “isolated” state shown by children with autism in social interaction does not arise from a subjective emotional preference. It is more often determined by their unique behavioral patterns.

2. Classifications of Autism

Typical Autism and Atypical Autism

Typical autism, or Autistic Disorder, refers to comprehensive difficulties in interpersonal relationships, language communication, and behavioral interests. Symptoms usually appear before the age of three, and it is considered one of the more severe forms within the autism spectrum.

Atypical autism usually has an atypical age of onset, or its symptoms present in a special way. In some areas, the child may appear no different from typically developing children and may not show comprehensive functional impairment.

Regressive Autism and Non-Regressive Autism

Regressive autism is characterized by obvious developmental regression during the child’s development, especially regression in language ability. More specifically, language skills that the child had already acquired before the age of two gradually disappear during the later course of the condition.

According to relevant studies, this type of autism accounts for approximately 22. 4% to 37. 2% of children with autism. Research by Japanese scholar Kobayashi also found no gender difference in the occurrence of regressive autism.

Non-regressive autism does not involve developmental regression. The child’s abilities may develop more slowly, but the development remains gradual and progressive.

High-Functioning Autism and Low-Functioning Autism

This is currently the classification standard used in many hospitals in China for clinical diagnosis. High-functioning autism refers to children who have only mild intellectual impairment or normal intellectual ability and can basically adapt to the school education environment.

Low-functioning autism refers to children who also have moderate or severe intellectual impairment and require long-term support and assistance in daily self-care, social interaction, and learning.

通过脑电图（EEG）测量奖励特异性事件相关电位（ERP）的实验发现：ASD 儿童往往对非社会刺激的关注度远高于社会刺激；同时，他们面对面孔等社交线索时，大脑产生的奖励相关活动显著少于神经典型同龄人。这表明，ASD 人群的奖励系统并非对所有刺激都反应迟钝，而是存在选择性 —— 对某些类型的刺激敏感，对另一些类型则相对淡漠。

此外，ASD 个体对社交信息的习惯化速度与神经典型人群存在明显差异，这一点可通过杏仁核对面部信息的激活程度得到印证。研究显示，当重复呈现社交信息时，ASD 个体大脑的激活水平，与神经典型受试者面对全新刺激时的激活水平相近。

而习惯化本身是学习能力的重要指标，强化学习正是通过最大化奖励反馈、实现预期目标的过程来逐步推进的，这也从侧面解释了 ASD 儿童在社交学习中面临的独特挑战。

二、镜子里的孤独 —— 心理学视角下的支持

（一）什么是孤独

英国著名儿科医生、精神分析学家温尼科特提出，婴儿必须在一个安全的保护性环境中，才能逐渐建立起清晰的 “自我” 概念。当婴儿能够区分 “我” 与 “非我” 的边界的边界后，才会在客体环境缺失时，产生 “我是孤单的、我是孤独的” 主观体验。这一理论深刻揭示了早期抱持环境对婴儿心理发展的关键作用。

从科胡特的自体心理学视角来看，孤独感并非单纯源于 “被剥夺外部交往” 的客观处境，而是内在深层需求无法法被满足的结果—— 个体内心始终渴望获得共情、镜映与理想化的回应，当这份渴求长期无法企及，孤独感便会油然而生。

（二）如何面对 “孤独”

营造抱持性的环境，是帮助孤独症孩子缓解孤独感的核心路径。这里的抱持性环境，指的是一个安全、接纳、富有韧性且充满共情的心理空间。在这样的空间里，孩子可以自由地探索世界、表达脆弱、经历挫折，并且在这个过程中获得成长的力量，而不必担心被评判、被抛弃或被过度干预。

Clinical data show that within the autism population, males are more likely to present with high-functioning autism, while females are more often associated with low-functioning autism.

3. The Social System of ASD

In 2020, an authoritative American journal in the field of brain science published research by a professor from the University of California titled Increased Neural Reward Responsivity in Adolescents with ASD After Social Skills Intervention.

The study pointed out that abnormalities in the reward system may be a potential neural mechanism underlying social communication deficits in people with autism spectrum disorder.

Experiments using electroencephalography, or EEG, to measure reward-specific event-related potentials, or ERPs, found that children with ASD often pay far more attention to non-social stimuli than to social stimuli.

At the same time, when facing social cues such as faces, their brains generate significantly less reward-related activity than those of neurotypical peers. This suggests that the reward system of people with ASD is not slow to respond to all stimuli.

Rather, it is selective: sensitive to certain types of stimuli and relatively indifferent to others.

In addition, the speed at which individuals with ASD habituate to social information differs significantly from that of neurotypical individuals. This can be confirmed by the activation level of the amygdala in response to facial information.

Studies show that when social information is repeatedly presented, the brain activation level of individuals with ASD is similar to that of neurotypical participants when they face new stimuli.

Habituation itself is an important indicator of learning ability. Reinforcement learning progresses by maximizing reward feedback and achieving expected goals. This also explains, from another perspective, the unique challenges faced by children with ASD in social learning.

II. Loneliness in the Mirror — Support from a Psychological Perspective

1. What Is Loneliness?

The renowned British pediatrician and psychoanalyst Donald Winnicott proposed that infants must first be in a safe and protective environment before they can gradually establish a clear concept of the “self.

欧洲健康心理学专业期刊的研究显示，当人们以同理心去解读他人的行为时，不仅能提升自身的共情能力，还能改善对他人的感知与理解。具体到孤独症群体中，同理心能够有效提升 ASD 孩子对 “温暖” 与 “能力” 的主观感知，帮助他们更好地接纳自己与他人。

核心原则：安全与信任的基石

无条件的积极关注向孩子传递 “你的存在本身就有价值” ” 的核心信念。即便孩子无法像同龄孩子一样流畅表达，即便他们的行为模式与众不同，我们依然要让孩子感受到，他们的存在无需附加任何条件，本身就值得被珍视。就像那一头 52Hz 的鲸鱼，它的独特歌声、它的独自自遨游，都是它存在的意义，它的存在本身，就是一种价值。

非评判的接纳接纳不是因为孩子 “优秀”“美好”，而是源是源于 “你是我的孩子” 这一纯粹的事实。无论孩子的智智商是否出众、语言是否丰富，甚至是否会出现情绪失控的情况，我们都要给予全然的接纳。这种不带评判的接纳，是孩子建立安全感的重要基础。

实践策略：倾听、共情、镜映

倾听：倾听不仅是用耳朵听，更要全身心投入。与孩子交流时，保持温和的眼神接触，既要听懂他们语言表达的内容，更要捕捉到话语背后隐藏的情感与未说出口的需求。或许孩子的话题永远那么单一，就像 52Hz 的鲸鱼鱼执着地唱着同一首歌；就像曾经接触过的孤独症孩子，日复一日地讲述着关于高跟鞋的故事 —— 这时的倾听听，就是对孩子最大的尊重。

” Only after infants can distinguish the boundary between “me” and “not me” will they develop the subjective experience of “I am alone” or “I am lonely” when the object environment is absent. This theory deeply reveals the key role of the early holding environment in infants’ psychological development.

From the perspective of Kohut’s self psychology, loneliness does not simply come from the objective situation of “being deprived of external interaction. ” Rather, it is the result of deep internal needs that cannot be satisfied.

The individual’s inner world always longs for empathy, mirroring, and idealized responses. When this longing remains unreachable for a long time, loneliness naturally arises.

2. How to Face “Loneliness”

Creating a holding environment is the core path to helping children with autism ease their sense of loneliness. Here, a holding environment refers to a psychological space that is safe, accepting, resilient, and full of empathy.

In such a space, children can freely explore the world, express vulnerability, experience frustration, and gain strength through the process, without worrying about being judged, abandoned, or excessively interfered with.

Research published in a European professional journal of health psychology shows that when people interpret others’ behavior with empathy, they not only improve their own empathic ability, but also improve their perception and understanding of others.

More specifically, for people with autism, empathy can effectively enhance ASD children’s subjective perception of “warmth” and “competence,” helping them better accept themselves and others.

Core Principle: Safety and Trust as the Foundation

Unconditional positive regard conveys to the child the core belief that “your existence itself has value.

” Even if a child cannot express themselves fluently like their peers, and even if their behavioral patterns are different from others, we still need to let the child feel that their existence does not require any additional conditions. Their presence itself is worthy of being cherished.

Just like the 52Hz whale, its unique song and its solitary journey are both part of the meaning of its existence. Its existence itself is a kind of value.

Non-judgmental acceptance does not mean accepting the child because they are “excellent” or “wonderful. ” It comes from the simple fact that “you are my child.

共情：很多时候，孤独症孩子可能没有流畅的语言表达，但他们的非语言行为，比如肢体动作、面部表情、声调变化，都在传递着情绪。我们要敏锐捕捉这些信号，读懂孩子的喜怒哀乐，并给予理解与包容。曾有这样一个案例：一名七岁的孤独症男孩因上课不遵守纪律被批评后，便拒绝配合课堂活动。

当老师运用共情的方法，将男孩被批评后的委屈、难过清晰地表达出来时，孩子感受到了被理解，后续的课堂配合度也明显提升。

镜映：温尼科特强调，当婴儿望向母亲的脸庞时，会特别依赖母亲面部表情的“呼应”。如果此时母亲处于“原原始母亲贯注”的状态 —— 能够敏锐捕捉婴儿的情绪，，并以恰当的表情、动作给予回应，将有助于婴儿建立稳定而真实的自体感。

对于孤独症孩子，家长可以借鉴这一理念：带孩子去公园观察同龄孩子的表情与动作，引导他们感知不同情绪对应的外在表现；在家中，可以开展照镜子游戏，让孩子通过观察自己的面部表情，理解“开心”“难过”“生气”生气”等情绪的外在特征，逐步建立情绪认知与表达的能力。

（三）如何促进社交发展

孤独症儿童的社交发展，可从深度的归属感建立与广度的环境关系拓展两个维度着手。相关研究表明，社会参与度是衡量孤独症孩子生活质量与整体功能水平的关键指标。

” Whether the child has outstanding intelligence, rich language ability, or even moments of emotional loss of control, we need to offer full acceptance. This kind of non-judgmental acceptance is an important foundation for the child’s sense of safety.

Practical Strategies: Listening, Empathy, and Mirroring

Listening:

Listening is not only about hearing with the ears. It requires full involvement. When communicating with a child, we should maintain gentle eye contact, understand the content of their language, and also notice the emotions and unspoken needs hidden behind their words.

Perhaps the child’s topic is always the same, just as the 52Hz whale keeps singing the same song. Or perhaps, like a child with autism once encountered, the child talks day after day about high heels. At such moments, listening is the greatest respect we can offer the child.

Empathy:

Many children with autism may not have fluent verbal expression. However, their non-verbal behaviors, such as body movements, facial expressions, and changes in tone, are all transmitting emotions.

We need to sensitively capture these signals, understand the child’s joy, anger, sadness, and fear, and respond with understanding and tolerance.

There was once a case involving a seven-year-old boy with autism. After being criticized for not following classroom rules, he refused to cooperate with classroom activities.

When the teacher used empathy to clearly express the boy’s feelings of grievance and sadness after being criticized, the child felt understood. His later cooperation in class also improved significantly.

Mirroring:

Winnicott emphasized that when an infant looks at the mother’s face, the infant relies especially on the mother’s facial “response.

” If the mother is in a state of “primary maternal preoccupation” at that moment, meaning she can sensitively capture the infant’s emotions and respond with appropriate expressions and actions, this helps the infant establish a stable and authentic sense of self.

For children with autism, parents can also draw from this idea. They can take children to the park to observe the expressions and movements of other children, guiding them to perceive the external expressions corresponding to different emotions.

孤独症儿童的社交发展大致可分为四个阶段：对物的兴趣大于对人的兴趣、渴望和其他孩子一起玩、建立最初的友谊、寻找合适的伙伴。针对孤独症儿童鲜明的视觉加工优势，我们可以在每个阶段设计适宜的活动，助力孩子的社交能力逐步提升。

第一阶段：对物的兴趣大于对人的兴趣核心原则：允许接纳，给予特权，增强感官刺激，提升自我掌控感。在此阶段，孩子的注意力更多集中在物品上，家长无需强迫孩子进行社交，而是要尊重孩子的兴趣偏好。可以通过录像示范的方式，让孩子直观地观察简单的社交场景；开展贴五官、照镜子等游戏，帮助孩子认识身体部位、感知面部表情，为后续的社交发展奠定基础。

第二阶段：想和其他小朋友一起玩核心原则：助力融入，缓解焦虑。当孩子开始表现出对同伴活动的兴趣时，往往会因意识到自身与他人的差异而产生焦虑，进而出现调整与补偿的心理。此时，家长可以采用社会故事法，通过编写简单易懂的社交故事，演示与他人交往的过程及技巧；

在学校场景中，建议采用同伴介入法，组建爱心小组，让友善的同伴引导孤独症孩子参与集体活动，帮助他们平稳过渡到社交场景中。

第三阶段：建立最初的友谊核心原则：理解并预测情绪，提升共情能力。研究证实，情绪理解与预测能力是同伴交往的关键因素 —— 能够准确解读他人情绪、预判他他人行为的孩子，更容易被同伴接纳，进而建立稳定的友谊。

At home, parents can also play mirror games with children, helping them observe their own facial expressions and understand the external features of emotions such as happiness, sadness, and anger. In this way, children can gradually build the ability to recognize and express emotions.

3. How to Promote Social Development

The social development of children with autism can be supported from two dimensions: building a deeper sense of belonging and expanding broader relationships with the environment.

Relevant research shows that social participation is a key indicator of the quality of life and overall functional level of children with autism.

The social development of children with autism can roughly be divided into four stages: having more interest in objects than in people, wanting to play with other children, establishing initial friendships, and finding suitable companions.

Considering the clear visual processing strengths of children with autism, we can design appropriate activities at each stage to help their social abilities gradually improve.

Stage One: Greater Interest in Objects Than People

Core principles: allow and accept, provide privileges, increase sensory stimulation, and strengthen the child’s sense of self-control.

At this stage, the child’s attention is more focused on objects. Parents do not need to force the child to socialize. Instead, they should respect the child’s interests and preferences.

Parents can use video modeling to allow the child to intuitively observe simple social scenes. They can also play games such as placing facial features or looking in the mirror, helping the child recognize body parts and perceive facial expressions.

These activities lay a foundation for later social development.

Stage Two: Wanting to Play with Other Children

Core principles: support integration and reduce anxiety.

When a child begins to show interest in peer activities, they may become anxious because they realize the differences between themselves and others. This may lead to psychological adjustment and compensation.

At this point, parents can use social stories by writing simple and easy-to-understand stories that demonstrate the process and skills of interacting with others. In school settings, peer-mediated intervention is recommended.

家长可以设计一些“不把孩子当孩子”的游戏，比如模拟购物、角色扮演等，让孩子在游戏中体验不同角色的情绪，通过再现情境、亲身演绎，增加孩子感受他人情绪的机会，提升共情能力。

第四阶段：寻找合适的伙伴核心原则：最小限制，最大支持。此阶段，可将直接观察法升级应用，为孩子创造更多参与社交体验的机会。当孩子在社交中遇到实际问题时，家长或老师不必急于干预，而是在一旁观察，待适当的时机再给予针对性的指导。通过减少对孩子的限制，给予充分的支持，帮助孩子逐步学会自主选择伙伴、维护友谊，最终更好地融入社会。

三、跨越频率的桥梁——家庭与社会的协同守护

孤独症孩子的成长之路，从来都不是一个人的独行，而是家庭、学校与社会携手搭建的一场温柔奔赴。52Hz 的的鲸鱼终其一生在海洋里寻找能听懂它歌声的同类，而孤独症孩子的世界，也需要我们以专业的知识、包容的心态、持久的耐心，搭建起跨越独特频率的沟通桥梁。

从科学认知孤独症的本质，到用心理学的视角给予孩子心理支持，再到分阶段助力孩子的社交发展，每一步探索与实践，都是在为孤独症孩子驱散成长路上的迷雾。家庭的接纳与陪伴是孩子内心安全感的源泉，学校的包容与引导是孩子融入集体的阶梯，社会的理解与支持则是孩子自由成长的土壤。

For example, a supportive peer group can be formed so that friendly classmates guide the child with autism to participate in group activities, helping them transition smoothly into social situations.

Stage Three: Establishing Initial Friendships

Core principles: understand and predict emotions, and improve empathy.

Research confirms that the ability to understand and predict emotions is a key factor in peer interaction. Children who can accurately interpret others' emotions and anticipate others' behaviors are more likely to be accepted by peers and to establish stable friendships.

Parents can design games that do not treat the child as “just a child,” such as simulated shopping or role-playing. Through these games, children can experience the emotions of different roles.

By recreating situations and personally acting them out, children gain more opportunities to feel the emotions of others and improve their empathic ability.

Stage Four: Finding Suitable Companions

Core principles: minimum restriction, maximum support.

At this stage, direct observation can be applied in a more advanced way to create more opportunities for children to participate in social experiences. When a child encounters real problems in social interaction, parents or teachers do not need to intervene immediately.

Instead, they can observe from the side and provide targeted guidance at an appropriate moment.

III. A Bridge Across Frequencies — Joint Support from Family and Society

The growth journey of children with autism is never a solitary path taken by one person alone. It is a gentle journey built together by family, school, and society. The 52Hz whale spent its whole life searching the ocean for others who could understand its song.

Likewise, the world of children with autism needs us to use professional knowledge, an inclusive attitude, and lasting patience to build a bridge of communication across their unique frequency.

From scientifically understanding the nature of autism, to offering psychological support from a psychological perspective, and then to helping children develop socially in stages, every step of exploration and practice helps dispel the fog on the path of growth for children with autism.

当我们不再以“异样”的眼光看待孤独症孩子，而是尊重他们独特的生命频率，学会用他们能理解的方式去沟通、去陪伴，那些曾经看似无形的屏障，终将被温柔的联结所消融。愿每一个孤独症孩子，都能在爱与接纳中，找到属于自己的生命节奏，唱出独一无二却能被世界听见的歌声。

本文以 52Hz 鲸鱼的孤独隐喻切入，围绕孤独症儿童的社交困境与心理支持展开系统论述，旨在为孤独症儿童的照护与干预提供理论参考和实践路径。

1. 概念澄清：孤独症是起病于 3 岁前的广泛性发展障碍，其社交“孤立”是行为模式所致，并非主观情感上的“孤独”；社会动机假说假说指出，孤独症个体从社会刺激中获得的内在奖励较少，这与神经肽催产素相关，是社交缺陷的重要诱因。

2. 分类标准：从症状表现、发育进程、智力水平三个维度，将孤独症分为典型 / 非典型、折线型 / 非折线型、高功能 / 低功能三类，其中折线型孤独症以语言能力退行为核心特征，我国临床常用高功能 / 低功能的分类方式。

3. 神经机制：孤独症谱系障碍（ASD）群体的奖励系统存在选择性反应缺陷，对非社会刺激的关注度高于社交刺激；其对社交信息的习惯化速度异于神经典型人群，这影响了社交学习的进程。

4. 心理支持原则：基于温尼科特的保护性环境理论与科胡特的自体心理学，提出需为孤独症儿童营造安全、接纳的抱持性环境，以无条件积极关注和非评判接纳为核心，建立安全与信任的关系基石。

5. 实践干预策略：通过倾听、共情、镜映三种方式回应孩子的内在需求；结合孤独症儿童的视觉加工优势，按“对物兴趣为主 — 渴望望同伴互动 — 建立初步友谊 — 选择合适伙伴”的社交发展四阶段，，设计针对性活动，助力其逐步提升社会参与度。

作者信息 / Author Information

作者：郝德利老师
作者简介：中国政法大学应用心理学硕士，辽宁师范大学中国古代史硕士。心理咨询师、讲师，精神分析取向，擅长催眠、沙盘、绘画等技术。致力于个人成长和情绪管理，个案累积约 800 小时，个人成长约 100 小时。

Author: Deli Hao
Author Bio: Deli Hao holds a master's degree in Applied Psychology from China University of Political Science and Law and a master's degree in Chinese Ancient History from Liaoning Normal University. Deli Hao is a psychological counsellor and lecturer with a psychodynamic orientation, specialising in hypnosis, sandplay, and drawing-based techniques. This work focuses on personal growth and emotion management, with approximately 800 hours of casework and 100 hours of personal growth practice.

Acceptance and companionship from the family are the source of the child’s inner sense of safety. Inclusion and guidance from the school are the steps that help the child integrate into a group. Understanding and support from society are the soil that allows the child to grow freely.

When we no longer look at children with autism through the lens of “difference,” but instead respect their unique life frequency and learn to communicate and accompany them in ways they can understand, the once invisible barriers will eventually dissolve through gentle connection.

May every child with autism find their own rhythm of life in love and acceptance, and sing a unique song that can be heard by the world.

This article begins with the metaphor of the loneliness of the 52Hz whale and systematically discusses the social difficulties and psychological support needs of children with autism. Its aim is to provide theoretical reference and practical pathways for the care and intervention of children with autism.

1. Conceptual Clarification

Autism is a pervasive developmental disorder that begins before the age of three. The social “isolation” of children with autism is caused by behavioral patterns rather than subjective emotional “loneliness.

” The social motivation hypothesis suggests that individuals with autism obtain less intrinsic reward from social stimuli. This is related to the neuropeptide oxytocin and is an important contributing factor to social deficits.

2. Classification Standards

From the three dimensions of symptom presentation, developmental process, and intellectual level, autism can be divided into typical and atypical autism, regressive and non-regressive autism, and high-functioning and low-functioning autism.

Among these, regressive autism is characterized mainly by regression in language ability. In China, clinical practice commonly uses the classification of high-functioning and low-functioning autism.

3. Neural Mechanisms

The reward system of people with autism spectrum disorder shows selective response deficits. They pay more attention to non-social stimuli than to social stimuli. Their habituation speed to social information also differs from that of neurotypical individuals, which affects the process of social learning.

4. Principles of Psychological Support

Based on Winnicott’s theory of the protective environment and Kohut’s self psychology, the article proposes that children with autism need a safe and accepting holding environment.

Unconditional positive regard and non-judgmental acceptance should be at the core of this environment, forming the foundation of safety and trust.

5. Practical Intervention Strategies

Adults can respond to children’s inner needs through listening, empathy, and mirroring.

Taking advantage of the visual processing strengths of children with autism, targeted activities can be designed according to the four stages of social development: interest in objects, desire for peer interaction, establishment of initial friendships, and selection of suitable companions.

These activities can gradually improve children’s level of social participation.

在纸上画一棵树：植物学与心理学的相遇

Draw a Tree on Paper: Botany Meets Psychology

导语

本文从“画一棵树”这一简单动作出发，把树木意象、投射测测验与植物学观察连接起来，带领读者在根、枝干、树冠与生长状态中重新理解自我、关系和生命力。

Lead

Starting from the simple act of drawing a tree, this article connects tree imagery, projective expression, and botanical observation. Through roots, trunks, crowns, and patterns of growth, it invites readers to reconsider selfhood, relationships, and vitality.

一、引言：树——联结身体与心理的“桥”

无论是北欧神话中象征着宇宙轴心的“世界之树”，还是是象征着家族脉络的“家谱树”，树在所有文化中都承载载着一个共同隐喻——生命的循环。从种子到参天，再从繁茂到枯朽，是所有生命都会经历的“出生-成长-衰老-老-回归”。

心理学家很早就捕捉到这一点：当一个人被邀请“随便画画一棵树”时，他/她往往会无意识地，把对自我、他人和世界的感受，安放在这棵树上。于是，“树木画”逐渐渐发展为一种重要的投射绘画形式，与人格评估、情绪理解和心理疗愈实践紧密相关。

与此同时，植物学和生态学也在不断刷新我们对“树”的的想象——例如，树根与真菌形成的菌根网络（mycorrhizal network）能够在地下共享资源、传递信号，号，被形象地称为“木质宽带网（Wood Wide Web）”。”。这让我们开始意识到：树，不只是孤零零的一株个体体，而是一个嵌入巨大关系网的“系统”。

因此，当我们谈“画一棵树”的时候，其实站在了两个学学科的交叉点上：

- 从心理学看，它是内在经验的投射；
- 从植物学看，它是生命系统的缩影。

本稿希望在大众易懂的语言中，让这两条线彼此对话。

二、心理学视角：树木画里的“自我缩影”

1. 房树人测验（HTP）：树里“更深的那部分我”

1. Introduction: Tree - the "bridge" connecting body and mind

Whether it is the "World Tree" that symbolizes the axis of the universe in Norse mythology, or the "Family Tree" that symbolizes family lines, trees carry a common metaphor in all cultures - the cycle of life.

From seed to towering, and then from flourishing to decay, it is the "birth-growth-aging-return" that all life will experience.

Psychologists have long captured this point: when people are invited to "draw a random tree," they often unconsciously place their feelings about themselves, others, and the world onto the tree.

As a result, "tree painting" gradually developed into an important form of projective drawing, closely related to personality assessment, emotional understanding, and psychological healing practices.

At the same time, botany and ecology are constantly refreshing our imagination of "trees" - for example, the mycorrhizal network formed by tree roots and fungi can share resources and transmit signals underground, and is vividly called the "Wood Wide Web.

" This makes us realize that a tree is not just an isolated individual, but a "system" embedded in a huge network of relationships.

Therefore, when we talk about "drawing a tree", we are actually standing at the intersection of two disciplines:

- From a psychological perspective, it is the projection of inner experience;
- Botanically, it is the epitome of a living system.

房树人测验（House-Tree-Person, HTP）由美国心理学家John N. Buck 在1948年提出，最早发表于《Clinical Psychology Monographs》[1]。测验要求来访者分别画“房子、树、人”，再配合访谈进行理解。

在三幅画中，研究者普遍发现：

• 房子：较多反映家庭氛围、成长环境；

• 人：更直接对应自我形象、人际互动；

• 树：往往呈现出个体更深层、更难以言说的部分——包包括了较抽象的概念：生命力、自尊、自我支撑感，以及和外界的基本连接方式。

常被解读的细节包括：

• 树干：像是心理上的“脊梁”，与自我力量、承压能力有力有关；

• 树枝：是向外伸展的象征，关系到探索、社交、追求目标的方式；

• 树根：当被画出来时，多与安全感、现实感、家庭和过去的联结有关。

需要强调的是，HTP属于临床辅助工具，其解释必须结合完整个案和专业训练，不能被简化为“画成XX就代表有问题”的速成判断。

• Baum Test：一棵树，也能反映认知和情绪

瑞士心理学家 Karl Koch 在20世纪中期发展了树木测验（Baum Test），要求被试在白纸上画一棵树，之后根据形态特征进行分析[2]。

近年的研究进一步发现，树木画不仅可以用于人格与情绪评估，还可能对认知障碍的筛查提供辅助价值：

• Maserati 等人[3]（2015）对阿尔茨海默病、轻度认知障碍与健康组的树木画进行比较，发现患者画的树往往更小、占纸空间更少、细节缺失的树，且树干与树冠比例异常，这些指标也许可以作为认知退化的线索之一。

• 此后的一项纵向研究指出，在阿尔茨海默病进程中，树木画的结构会随着病程变化而恶化，提示树木测验有望成为传统认知测验之外的补充工具。

这些研究同时强化了一个观点：

一棵看似简单的树，往往承载着复杂的心理与神经心理信息。

3. 原型与象征：荣格的“树之心理地图”

This article hopes to allow these two lines to dialogue with each other in a language that is easy for the public to understand.

2. Psychological Perspective: "Self-Miniature" in Tree Paintings

1. House Tree Person Test (HTP): "The deeper part of me" in the tree

The House-Tree-Person (HTP) test was proposed by American psychologist John N. Buck in 1948 and was first published in "Clinical Psychology Monographs" [1]. The test requires visitors to draw "houses, trees, and people" respectively, and then cooperate with the interview to understand.

In the three paintings, researchers generally found:

• House: mostly reflects the family atmosphere and growing environment;

• People: more directly corresponds to self-image and interpersonal interaction;

• Trees: often represent the deeper, more indescribable parts of an individual - including more abstract concepts: vitality, self-esteem, a sense of self-sustainment, and basic ways of connecting to the outside world.

Details that are often interpreted include:

• Trunk: Like the psychological "backbone", related to self-strength and ability to withstand pressure;

• Branches: It is a symbol of outward extension, related to the way of exploring, socializing and pursuing goals;

• Tree roots: When drawn, are associated with a sense of security, reality, family, and connections to the past.

It needs to be emphasized that HTP is a clinical auxiliary tool, and its interpretation must be based on complete cases and professional training, and cannot be simplified into a quick judgment of "drawing XX means there is a problem".

• Baum Test: A tree can also reflect cognition and emotion

Swiss psychologist Karl Koch developed the Baum Test in the mid-20th century, asking subjects to draw a tree on a white paper and then analyze it based on its morphological characteristics [2].

Research in recent years has further found that tree paintings can not only be used for personality and emotion assessment, but may also provide auxiliary value in screening for cognitive impairment:

在更深的象征层面，荣格的分析心理学为树的意义提供了重要框架。荣格提出“集体无意识”和“原型”的概念，认为某些意象在人类文化中反复出现，是我们共同的心理底层结构[4]。树便是其中之一。

• 根：象征无意识、童年与家族文化根源；

• 树干：象征不断成长和调节的“自我”；

• 树冠：象征意识、理想与精神追求；

• 整棵树则常常被视为“自性（Self）”的象征——一个整个整合意识与无意识的内在整体。

当来访者画一棵树、再讲述它的故事时，我们实际上是在倾听他/她用“树的语言”讲述自己：这是一棵怎样扎根根、怎样承压、怎样伸向光的树？这棵树，往往就是此刻的“我”。

三、植物学视角：树的生命系统与心理隐喻

如果说心理学让我们看到“树如何像人”，那么植物学则则让我们看到“人其实也像树”。理解树的结构与生理过过程，可以帮助我们找到更多具体、扎实的心理隐喻。

1. 生命周期：从种子到枯木的人生隐喻

从植物学上看，一棵树大致经历：

• 种子：浓缩了遗传信息和初始养分；

• 幼苗 / 幼树：最脆弱的阶段，快速生长、依赖环境照顾；

• 成熟树：树干粗壮、枝叶繁茂，能稳定开花结果；

• 衰老与倒伏：逐渐失去活性，最终倒下，转化为土壤和他者的养分。

心理上，我们很容易把这对应到不同的人生阶段：

• 把一个新计划视为“种子”；

• 把刚起步的事业、关系视为“幼树”；

• 把承担责任、反哺他人的时期视为“结果期”；

• 甚至把人生后期视为“回馈土壤”的阶段——不再只追求向上，而是愿意分享经验、给下一代提供养分。

• Maserati et al. [3] (2015) compared tree drawings of Alzheimer's disease, mild cognitive impairment and healthy groups and found that the trees drawn by patients tended to be smaller, take up less paper space, lack details, and have abnormal trunk-to-crown proportions.

These indicators may be used as one of the clues to cognitive deterioration.

• A subsequent longitudinal study noted that the structure of tree drawings deteriorates over the course of Alzheimer's disease, suggesting that the tree test has potential as a complementary tool to traditional cognitive tests.

These studies also reinforce a point:

A seemingly simple tree often carries complex psychological and neuropsychological information.

3. Archetypes and Symbols: Jung’s “Psychological Map of Trees”

On a deeper symbolic level, Jungian analytical psychology provides an important framework for the meaning of trees.

Jung proposed the concepts of "collective unconscious" and "archetype" and believed that certain images appear repeatedly in human culture and are our common underlying psychological structure [4]. Tree is one of them.

• Root: Symbolizes the unconscious, childhood and family cultural roots;

• Trunk: Symbolizes the growing and adjusting “self”;

• Tree crown: symbolizes consciousness, ideals and spiritual pursuits;

• The entire tree is often seen as a symbol of "Self" - an inner whole that integrates consciousness and unconsciousness.

When a person draws a tree and tells its story, we are actually listening to them speak about themselves in the "language of trees": How does this tree take root, withstand pressure, and reach toward the light? This tree is often "me" at this moment.

3. Botanical Perspective: The Life System and Psychological Metaphor of Trees

If psychology allows us to see "how trees are like people", then botany allows us to see "people are actually like trees". Understanding the structure and physiological processes of trees can help us find more concrete and solid psychological metaphors.

1. Life cycle: a metaphor of life from seed to dead wood

Botanically speaking, a tree roughly goes through:

当我们在纸上画出一棵幼树、古树或枯树时，往往也在不自觉地表达：我自己的人生正在经历哪一个阶段?

2. 根、干、冠与花果：一套“自我结构的解剖图”

（1）根系：安全感与支持系统

植物学功能：根部固定树的位置，通过吸收水、矿物质来储存能量，并通过菌根网络与其他植物进行资源交换。

心理隐喻：

• 对应我们的原生家庭、成长经历、文化背景和潜意识；

• 也对应现实生活中的安全感、财务与居住稳定程度，以及亲密关系和社群支持。

画中有无根、根的深浅与形态，往往映照了个体对“我是是否被支持”、“是否有归属感”的主观体验。

（2）树干：自我的力量与生命姿态

植物学功能：树干支撑全树，并通过木质部和韧皮部负责水分与养分的运输，年轮则记录着每年的生长状况与环境变化。

心理隐喻：

• 树干的粗细、挺拔程度、是否弯曲或折断，常被视为自我力量、自尊感和承压方式的象征；

• 树干上的“疤痕”好比人生中的创伤，有的被新生木质包裹整合，有的则长期裸露。

当一个人画出一个细长、摇晃或伤痕累累的树干时，心理师通常不会直接下判断，而是会温柔地问：“这棵树经历了什么？”引导来访者说出自己的故事。

（3）树冠与叶片：思想、成就与社交能量

植物学功能：树冠是光合作用的主战场，叶片负责与环境进行气体和水分交换。

心理隐喻：

• 繁茂的树冠，常常被联想到思维活跃、兴趣广泛、与外界连接较多；

• 稀疏或枯黄的树冠，有时象征疲惫、耗竭，或者阶段性的“能量回收”；

• Seed: Condensed genetic information and initial nutrients;

• Seedling/sapling: the most vulnerable stage, growing rapidly and dependent on environmental care;

• Mature trees: with thick trunks, lush branches and leaves, capable of stable flowering and fruiting;

• Aging and lodging: Gradually loses activity and eventually collapses, transforming into nutrients for the soil and others.

Psychologically, we can easily map this to different stages of life:

• Think of a new initiative as a “seed”;

• Treat nascent careers and relationships as “saplings”;

• Consider the period of taking responsibility and feeding back to others as the “result period”;

• Even consider the later stages of life as a stage of "giving back to the soil" - no longer just pursuing improvement, but being willing to share experiences and provide nutrients to the next generation.

When we draw a sapling, old tree or dead tree on paper, we often unconsciously express: Which stage am I going through in my own life?

2. Roots, stems, crowns, flowers and fruits: a set of “anatomy diagrams of self-structure”

(1) Root system: sense of security and support system

Botanical functions: The roots fix the position of the tree, store energy by absorbing water and minerals, and exchange resources with other plants through the mycorrhizal network.

Psychological metaphor:

• Corresponds to our original family, growth experience, cultural background and subconscious;

• Also corresponds to real-life feelings of security, financial and residential stability, as well as close relationships and community support.

The presence or absence of roots in the painting, as well as the depth and shape of the roots, often reflect an individual’s subjective experience of “whether I am supported” and “whether I have a sense of belonging.”

(2) Tree Trunk: Self-strength and life attitude

Botanical functions: The trunk supports the whole tree and is responsible for the transportation of water and nutrients through the xylem and phloem. The annual rings record the annual growth conditions and environmental changes.

Psychological metaphor:

• 有的人会画出很整齐的树冠，有的人则画出向一侧倾斜的树——这都可能与他/她对“世界是否安全”的体验有关。

（4）花与果：创造力与“馈赠世界的能力”

当一棵树在开花结果时，意味着它不仅可以维持自己，还能把能量转化为“礼物”——花吸引授粉者，果实滋养养动物，也带着种子去到更远的地方。

心理上，花与果常被理解为：

• 创造力、生产力；

• 对他人有所给予（例如养育子女、教导学生、贡献作品或知识）的能力与愿望；

• 对“生命有意义、有价值”的主观感受。

在某些阶段，我们可能画出一棵“只长叶、不结果”的树树——那也没关系，这恰好提醒我们：并不是每一年都必须高产，有时候，只是活着和长叶子，就已经很不容易。

3. 菌根网络：树与树之间的“关系之网”

现代生态学研究表明，许多树木会通过菌根网络进行资源和信息的交换，有时大型“母树”会优先把碳源输送给阴影处的幼树[5]。

这给人类心理一个非常重要的隐喻：

森林不是“弱肉强食的战场”，更多时候，它是一个高度互助的社区。

如果说一棵树象征一个人，那么菌根网络就像我们的关系系统：家人、朋友、同事、社群，在我们看不见的地方提供支持、反馈和连结。

因此，在解读树木画时，除了看这棵树本身，还可以留意：

• 画面中有没有其他树？

• 有没有地面、草、花、动物、建筑？

• 这棵树，是孤零零站着，还是和其他生命共享一片空间？

这些，都可以引导出关于“我和他人”或“我在群体中扮演什么角色”的进一步对话。

四、综合实践：一个简单的“画树自我觉察”练习

以下是适合普通读者的日常小练习，不是专业测验，也不用于任何诊断，只是帮助你更温柔地了解自己。

• The thickness, straightness, and whether the trunk is bent or broken are often regarded as symbols of self-strength, self-esteem, and the way it withstands pressure;

• The "scars" on tree trunks are like wounds in life. Some are wrapped and integrated by new wood, while others have been exposed for a long time.

When a person draws a slender, shaken, or scarred tree trunk, the psychologist usually does not make a direct judgment, but gently asks: "What has this tree experienced?" to guide the client to tell his or her story.

(3) Crown and leaves: thoughts, achievements and social energy

Botanical functions: The canopy is the main battlefield for photosynthesis, and the leaves are responsible for gas and water exchange with the environment.

Psychological metaphor:

• Lush tree crowns are often associated with active thinking, broad interests, and greater connections with the outside world;

• Sparse or yellow tree crowns sometimes symbolize fatigue, exhaustion, or periodic “energy recovery”;

• Some people will draw neat tree crowns, while others will draw trees leaning to one side - this may be related to his/her experience of "whether the world is safe".

(4) Flowers and Fruits: Creativity and “the ability to give to the world”

When a tree is blooming and bearing fruit, it means that it is not only sustaining itself, but also converting energy into "gifts"—flowers attract pollinators, fruits nourish animals, and seeds travel further afield.

Psychologically, flowers and fruits are often understood as:

• Creativity, productivity;

• The ability and desire to give to others (such as raising children, teaching students, contributing work or knowledge);

• The subjective feeling that “life is meaningful and valuable”.

At some stage, we may draw a tree that "only grows leaves but no fruits" - that's okay, it just reminds us: not every year has to be productive, sometimes, just living and growing leaves is not easy.

3. Mycorrhizal network: the “network of relationships” between trees

Modern ecological research shows that many trees exchange resources and information through mycorrhizal networks, and sometimes large "mother trees" preferentially transport carbon sources to young trees in the shade [5]. This gives a very important metaphor for human psychology:

• 找一张白纸和一支笔（或彩笔）。

• 给自己 5–10 分钟，不设定好坏，只要画出一棵“此刻最想画的树”。

• 画完后，看看这棵树，并写下几个简短回答：

• 这是一棵几岁（或处于哪个阶段）的树？

• 它的根长什么样？它稳固吗？它从哪里汲取营养？

• 它的树干是怎样站着的？直、弯、粗、细？像不像现在的你？

• 它的枝叶往哪里伸？拥挤还是稀疏？是在积极拥抱世界，还是有点缩回去？

• 它有没有花和果？如果没有，你觉得它此刻在把能量用在哪里？

• 最后，给这棵树写一句“简介”，比如：

• “一棵正在努力扎根的年轻树。”

• “一棵受过伤、但仍然向光伸展的树。”

• “一棵选择先休息一年、不急着结果的树。”

当你回头翻看这些树时，你会发现：画面的变化，其实记录了你这段时间的心情、状态与调整方式。

五、结语：从一棵树，走进自己

树的美，在于它既具体又抽象：具体到每一片叶子、每一道年轮都有物理的存在；抽象到只需要画一个树干和树冠，我们就能立刻感到“那是生命”。

当我们用心理学的视角看树，会发现：树是一份可以被画出来的“自我地图”；当我们用植物学的视角看树，又会发现：自我是一个类似树的生命系统，既需要根，也需要光，还需要别的树。

希望这篇科普，可以成为你与自己、与自然之间的一条小小“树之通道”。下次当你再画一棵树时，不妨轻轻地问一句：

“这棵树今天过得怎么样？

而我，又过得怎么样？”

内容警示：本文章涉及心理学概念、症状描述及心理健康议题，内容仅用于大众科普，不构成临床建议、诊断或治疗。如您正在经历明显的情绪困扰，请寻求专业心理健康服务的支持。

参考文献（延伸阅读）

The forest is not a "battlefield where the weak can prey on the strong". More often than not, it is a community with a high degree of mutual help.

If a tree symbolizes a person, then the mycorrhizal network is like our relationship system: family, friends, colleagues, community, providing support, feedback and connection where we cannot see it.

Therefore, when interpreting tree paintings, in addition to looking at the tree itself, you can also pay attention to:

• Are there other trees in the frame?

• Are there grounds, grass, flowers, animals, buildings?

• Is this tree standing alone, or does it share a space with other life forms?

These can lead to further conversations about "me and others" or "what role do I play in the group".

4. Comprehensive practice: a simple “self-awareness of tree drawing” exercise

The following are daily exercises suitable for ordinary readers. They are not professional tests and are not used for any diagnosis. They are just to help you understand yourself more gently.

• Find a piece of white paper and a pen (or colored pencils).

• Give yourself 5–10 minutes, no set criteria, just draw the tree you “want to draw most at the moment.”

• After you have finished drawing, look at the tree and write a few short answers:

• How old (or what stage) is this tree?

• What do its roots look like? Is it stable? Where does it draw its nourishment?

• How does its trunk stand? Straight, curved, thick, thin? Does it look like you now?

• Where do its branches and leaves extend? Crowded or sparse? Are you actively embracing the world, or are you withdrawing a bit?

• Does it have flowers or fruits? If not, where do you think it is using its energy at the moment?

• Finally, write an "introduction" to the tree, such as:

• “A young tree struggling to take root.”

• “A tree wounded but still reaching toward the light.”

• “A tree that chooses to rest for a year and is not in a hurry to bear fruit.”

When you look back at these trees, you will find that the changes in the pictures actually record your mood, state and adjustment methods during this period.

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注：本文为面向普通读者的科普与自我觉察引导，所有内容仅用于个人反思和观察，不具备任何临床诊断效力。如有严重情绪困扰或功能受损，建议及时寻求专业心理服务或医疗支持。

作者信息 / Author Information

作者：魏统超
作者简介：植物学硕士，心理学与疗愈爱好者。

Author: Tongchao Wei
Author Bio: Master of Botany; interested in psychology and healing.

5. Conclusion: From a tree, walk into yourself

The beauty of a tree is that it is both concrete and abstract: concrete enough that every leaf and growth ring has a physical existence; so abstract that we only need to draw a trunk and crown, and we can immediately feel that "that is life."

When we look at trees from a psychological perspective, we will find that the tree is a "map of the self" that can be drawn; when we look at the tree from a botanical perspective, we will find that the self is a tree-like life system that requires roots, light, and other trees.

I hope this popular science can become a small "tree passage" between you, yourself and nature. Next time you draw a tree, you might as well ask gently:

“How is this tree doing today?

And how am I doing?”

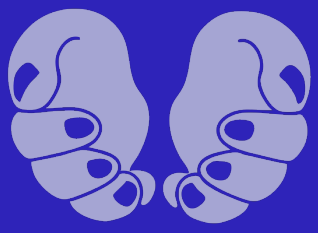
Content warning: This article involves psychological concepts, symptom descriptions and mental health issues. The content is only for popular science and does not constitute clinical advice, diagnosis or treatment.

If you are experiencing significant emotional distress, please seek support from professional mental health services.

References (further reading)

Note: This article is a popular science and self-awareness guide for general readers. All content is for personal reflection and observation only and does not have any clinical diagnostic effect.

If you have severe emotional distress or functional impairment, it is recommended to seek professional psychological services or medical support in a timely manner.



PART 3:
Feature Interview

栏目三 | 专题采访

Feature Interview

特殊儿童专题采访：孙耀金医生

Special Feature on Children with Additional Needs: Interview with Dr Sun Yaojin

导语

这篇专题采访从一线临床工作者的视角出发，围绕特殊儿童的早期识别、康复支持、家庭配合与社会误解展开讨论，为公众理解儿童发展支持提供更清晰而务实的专业视角。

Lead

This feature interview brings a frontline clinical perspective to early identification, rehabilitation support, family collaboration, and common misunderstandings around children with additional needs. It offers readers a clear and practical professional lens on developmental support.

目前，国内对儿童的科普、资源及治疗支持仍显不足。本次访谈从一线临床人员的视角出发，探讨孤独症儿童的诊断、干预与家庭支持，融合医学与心理学观点，旨在增进公众认知、消除误解，并为临床实践提供参考。

1. 专业背景：从功能康复到“精神运动”

孙耀金医生是医院临床一线的工作者，目前专注于精神运动康复，主要帮助特殊儿童家庭进行行为干预。他主持着国内规模大的精神运动治疗项目，每年服务约5000名儿童。孙医生认为，精神运动是融合心理学、医学与教育学的专业领域，目前他也在进行相关培训与推广，希望将这一理念普及到更多医院和机构，以更全面的视角帮助孩子们。

孙医生毕业于南京医科大学康复治疗技术专业，该专业曾连续五年排名全国第一。他就职的医院是江苏省规模最大的儿童专科三甲医院，儿科诊疗项目覆盖全面。最初，孙医生主要专注于儿童运动障碍康复，服务于脑瘫、发育迟缓等特殊儿童。那时的治疗侧重于功能恢复——例如，孩子不会抬手，就围绕这个功能进行训练，认为功能恢复了，问题也就解决了。

1. Professional Background: From Functional Rehabilitation to Psychomotor Therapy

Dr. Sun Yaojin is a frontline clinical practitioner in a hospital setting. He currently focuses on psychomotor rehabilitation, primarily supporting children with additional needs and their families through interventions related to psychological, emotional, and behavioural development.

He leads the largest psychomotor therapy programme in China, serving approximately 5,000 children each year. In Dr. Sun’s view, psychomotor therapy is a professional field that integrates psychology, medicine, and education.

He is also actively involved in related training and promotion, hoping to bring this concept to more hospitals and institutions so that children can be supported from a more comprehensive perspective.

Dr. Sun graduated from Nanjing Medical University with a degree in Rehabilitation Therapy. The programme had ranked first in China for five consecutive years.

The hospital where he works is the largest tertiary children’s specialty hospital in Jiangsu Province, with a comprehensive range of paediatric diagnosis and treatment services.

At the beginning of his career, Dr. Sun mainly focused on rehabilitation for children with motor disorders, including children with cerebral palsy and developmental delays. At that time, treatment centred on functional recovery.

For example, if a child could not raise their hand, training would focus on restoring that specific function. The assumption was that once the function recovered, the problem would be resolved.

2022年，孙医生赴法国作为访问学者学习一年。他发现，国内对于“精神”与“运动”融合的概念还比较缺乏。以往的治疗多通过物理或器械方式恢复运动功能，但仅解决功能问题并不足够。孙医生注意到，很多孩子虽然在功能上有所改善，却难以将这些能力运用到日常生活中——或许他们内心并不“认可”这些功能。这一发现促使他思考功能训练与生活融合之间的断层。

回国后的两年里，孙医生的治疗方向发生了转变：从过去十三年以运动功能训练为主，转向更综合的干预方式。他将精神运动康复与心理学结合，在功能训练的基础上，关注孩子自身的感受，尝试理解症状背后的原因，从而更深入地帮助特殊儿童。

2. 孤独症谱系障碍：认识与理解

根据2023年世界卫生组织数据，全球孤独症谱系障碍患病率约为1%，而美国疾控中心的数据则为2.8%。到2025 2025年，WHO的数据保持稳定，而美国的数据已上升至至3.2%。这两组数据的差异在一定程度上反映出，在医疗水平较低、对精神心理问题关注不足的地区，许多儿童可能未被及时识别与诊断。

我们身边看似“越来越多”的孤独症儿童，其实一直存在在，只是过去未被正确发现和定义。

从性别比例看，男性患病率约为女性的3–4倍。值得注意意的是，社会对男女性别角色的期待可能影响诊断，导致某一性别被过度诊断或诊断不足。孙医生建议家长关注孩子是否过度安静、缺乏活动兴趣、不愿社交，而非简单将其归为“乖巧”“内向”。

In 2022, Dr. Sun went to France as a visiting scholar for one year. There, he noticed that in China, the integrated concept of “psyche” and “movement” was still relatively underdeveloped. In the past, treatment often restored motor function through physical methods or equipment.

However, addressing function alone was not enough.

Dr. Sun observed that although many children improved functionally, they still struggled to apply these abilities in daily life. It was as if, internally, they did not truly “recognise” or accept these functions as part of themselves.

This discovery led him to reflect on the gap between functional training and real-life integration.

In the two years after returning to China, Dr. Sun’s treatment direction changed. After thirteen years of focusing mainly on motor function training, he shifted toward a more integrated intervention model.

He began localising psychomotor rehabilitation for clinical use in China, combining rehabilitation with psychology.

On the foundation of functional training, he now pays more attention to the child’s own feelings and tries to understand the reasons behind symptoms, in order to support children with additional needs more deeply.

2. Autism Spectrum Disorder: Recognition and Understanding

According to data from the World Health Organization in 2023, the global prevalence of autism spectrum disorder was approximately 1%. Data from the U. S. Centers for Disease Control and Prevention, however, showed a prevalence of 2.8%. By 2025, WHO data remained stable, while U. S. data had risen to 3.2%.

The difference between these two sets of figures reflects, to some extent, that in regions with lower levels of medical care or insufficient attention to mental and psychological issues, many children may not be identified or diagnosed in time.

The children with autism who seem to be “increasing” around us have, in fact, always existed. In the past, many were simply not correctly recognised or defined.

In terms of gender ratio, the prevalence among males is approximately three to four times that among females. It is worth noting that social expectations of male and female gender roles may influence diagnosis, leading to overdiagnosis or underdiagnosis in one gender. Dr.

Sun suggests that parents pay attention to whether a child is excessively quiet, lacks interest in activities, or is unwilling to socialise, rather than simply interpreting these behaviours as being “well-behaved” or “introverted. ”

孤独症、阿斯伯格、高功能/低功能等术语，均属于“孤独症谱系障碍”这一范畴。“谱系”意味着相关症状如同光谱，是一个连续带，每个个体的表现与程度各不相同。

被诊断为谱系的儿童，通常具有以下三个核心特征：

社交沟通障碍：难以理解社交规则或言外之意，共情能力较弱；

重复刻板行为：出现特定舒缓行为或必须遵循的规则；

狭窄的兴趣：过度沉迷于特定领域的细节。

谱系上每个孩子都不一样。孙医生举例说，今年接触过一名5岁的阿斯伯格儿童，智力与语言能力正常，痴迷于于天体物理，喜欢讨论黑洞、时光机等远超年龄的话题。而另一名智力普通的儿童，则会出现明显的答非所问：

医生问：“你想去哪里？”

他答：“苹果是红色的。”

医生再问：“哪里是红色的？”

他说：“我要上厕所了，拜拜。”

这种场景匹配能力弱是常见的社交困难。干预目标往往是帮助他们更好地适应社会生活。对于伴随其他认知、语言或运动问题的广泛性发育障碍儿童，仅改善社交可能效果有限。

孙医生指出，孤独症儿童的感官体验与多数人不同。例如在商场，我们可能关注音乐、装饰、人流，而他们可能放大某些细节——脚步声、空调运转声、门开关的细微声响——从而导致感官超载。重复刻板行为，或许是帮助他们感受自我存在、应对嘈杂世界的一种方式。

3. 医学“标签”与社会认知

疾病的命名方式会影响公众认知，甚至带来病耻感，阻碍及时求助。目前社会对孤独症的认知仍不充分，存在不同程度的偏见与误解。孙医生坦言，过去作为康复医学科，他会用比较直接的医学用语告知家长诊断，希望以科学态度帮助家庭接受现实。而在融合神经与心理视角后，他更倾向于使用“特殊儿童”“边缘儿童”等更具包容性的表述。

Terms such as autism, Asperger’s syndrome, and high-functioning or low-functioning autism all fall under the broader category of Autism Spectrum Disorder. The word “spectrum” means that related symptoms exist along a continuum, like a spectrum of light.

Each individual presents differently, and the degree of difficulty varies from person to person.

Children diagnosed as being on the spectrum usually show three core characteristics:

Social communication difficulties: difficulty understanding social rules or implied meanings, and relatively weaker empathic ability.

Repetitive and stereotyped behaviours: specific self-soothing behaviours or rules that must be followed.

Restricted interests: intense focus on details within specific areas of interest.

Every child on the spectrum is different. Dr. Sun shared that this year he met a five-year-old child with Asperger’s whose intelligence and language abilities were normal. The child was fascinated by astrophysics and enjoyed discussing black holes, time machines, and other topics far beyond his age.

The doctor asked, “Where do you want to go?”

The child replied, “Apples are red.”

The doctor asked again, “What is red?”

The child said, “I need to go to the toilet. Bye-bye.”

This weak ability to match language to context is a common social difficulty. The goal of intervention is often to help children adapt better to social life.

For children with pervasive developmental disorders who also have cognitive, language, or motor difficulties, improving social skills alone may have limited effect.

Dr. Sun pointed out that children with autism often experience sensory information differently from most people. For example, in a shopping mall, most of us may notice the music, decorations, and flow of people.

They, however, may magnify certain details—the sound of footsteps, the hum of the air conditioner, or the subtle sound of doors opening and closing. This can lead to sensory overload.

Repetitive and stereotyped behaviours may be one way for them to sense their own existence and cope with a noisy, overwhelming world.

3. Medical “Labels” and Social Understanding

The way a condition is named can affect public perception. It may even create stigma and prevent families from seeking help in time. At present, society’s understanding of autism remains insufficient, and prejudice and misunderstanding still exist to varying degrees.

从神经多样性角度看，每个孩子本就不同，只是社会倾向于要求标准化。

4. 干预策略与方法

孙医生在临床中指出，系统化、个体化的干预是支持孤独症儿童发展的关键。约30%–50%的孤独症儿童共患注注意缺陷多动障碍（ADHD），而感官超载常引发情绪与与行为问题。

干预需多维度协同：

功能训练：包括语言、社交及辅助沟通工具的使用；

行为支持：应用行为分析与正向行为支持，帮助建立稳定行为模式；

环境调整：根据儿童感官特点，降低噪音、提供结构化视觉提示等；

游戏化学习：提升参与度，促进认知与社交发展。

对于共患ADHD的儿童，药物可缓解注意力问题，但长期来看，行为习惯培养与家庭持续配合仍是核心。

5. 给家长的建议

家庭在儿童康复中作用关键。家长首先需建立理性认知，避免因焦虑频繁更换方法或尝试缺乏科学依据的疗法。在信息碎片化的时代，建议通过正规医疗机构、专业团队及可靠科普渠道获取知识。

孙医生强调，家庭与医院在干预方法上保持一致至关重要，这有助于儿童在不同场景中建立稳定的行为模式。

6. 未来展望

孙医生认为，对孤独症儿童的支持应超越医疗系统，需要社会共同参与。提升公众对神经多样性的认知与接纳，是重要的发展方向。目前社会仍存在误解与紧张，无形中加重了家庭压力。

此外，专业干预理念也需持续更新。当代儿童成长于信息密集、屏幕时间增多、文化多元的环境，其发展背景已不同于以往。如何在此背景下探索更贴合现实的干预模式，是专业领域需要持续思考的课题。

致谢：感谢孙耀金医生接受采访，为我们科普孤独症谱系障碍的相关知识，增进对这类儿童处境的理解。

内容警示：本文内容旨在科普，不构成临床诊断或治疗建议。如您或孩子需要帮助，请寻求专业医疗或心理服务支持。

Dr. Sun said frankly that in the past, as a medical professional in a rehabilitation department, he would use relatively direct medical language to inform parents of the diagnosis. His intention was to help families accept reality through a scientific attitude.

However, after integrating neurological and psychological perspectives, he now prefers more inclusive terms such as “children with additional needs” or “children at the margins. ” From the perspective of neurodiversity, every child is different by nature.

It is society that often tends to demand standardisation.

4. Intervention Strategies and Methods

In clinical practice, Dr. Sun emphasises that systematic and individualised intervention is the key to supporting the development of children with autism.

Approximately 30% to 50% of children with autism also have attention-deficit/hyperactivity disorder, or ADHD, and sensory overload often triggers emotional and behavioural difficulties.

Intervention needs to work across multiple dimensions:

Functional training: including language, social skills, and the use of augmentative and alternative communication tools.

Behavioural support: using applied behaviour analysis and positive behaviour support to help establish stable behavioural patterns.

Environmental adjustment: reducing noise, providing structured visual cues, and adapting the environment according to the child’s sensory characteristics.

Play-based learning: increasing engagement while promoting cognitive and social development.

For children with co-occurring ADHD, medication may help relieve attention difficulties. However, in the long term, the cultivation of behavioural habits and the family’s continuous cooperation remain central.

5. Advice for Parents

Families play a critical role in children’s rehabilitation. First, parents need to build a rational understanding and avoid frequently changing intervention methods out of anxiety or trying therapies that lack scientific evidence.

In an era of fragmented information, Dr. Sun recommends that parents obtain knowledge through formal medical institutions, professional teams, and reliable public education channels.

He also emphasises that consistency between family and hospital intervention methods is extremely important. This helps children establish stable behavioural patterns across different settings.

6. Future Outlook

Dr. Sun believes that support for children with autism should go beyond the medical system and requires the participation of society as a whole. Improving public awareness and acceptance of neurodiversity is an important direction for future development.

At present, misunderstanding and tension still exist in society, and these pressures invisibly increase the burden on families.

In addition, professional intervention concepts need to continue evolving. Children today are growing up in an environment marked by dense information, increased screen time, and cultural diversity. Their developmental context is already different from that of previous generations.

How to explore intervention models that better fit this reality is a question the professional field must continue to reflect on.

Acknowledgement

We sincerely thank Dr. Sun Yaojin for accepting this interview and for sharing his professional knowledge about autism spectrum disorder. His insights help deepen public understanding of the experiences and needs of these children.

Content Notice

This article is intended for public education only and does not constitute clinical diagnosis or treatment advice. If you or your child need support, please seek help from qualified medical or psychological professionals.

作者信息 / Author Information

作者：Olivia Shao & Cathy Tian
作者简介：ASA协会编辑部志愿者

Author: Olivia Shao & Cathy Tian
Author Bio: ASA Editorial Department volunteers

特殊儿童专题采访：谱系儿童家长

Special Feature on Children with Additional Needs: Interview with the Parent of a Child on the Autism Spectrum

导语

这篇家长访谈从真实家庭经验出发，呈现谱系儿童养育过程中的崩溃、学习、接纳与行动。文章不把家庭困境简化为励志故事，而是让照护者的压力、选择与韧性被认真听见。

Lead

Told from a parent's lived experience, this interview traces the breakdowns, learning, acceptance, and action involved in raising a child on the autism spectrum. Rather than simplifying the journey into inspiration, it gives serious attention to caregiver pressure, choice, and resilience.

这是一期围绕症谱系儿童家庭干预经验的访谈。我们希望通过家长的第一视角，还原真实的育儿挑战与情感历程——从崩溃、迷茫，到接纳、行动。同时，也期望这些分享能为其他家庭带来信心，并传递科学的干预认知。以下内容，来自一位4岁症谱系男孩家长的讲述。

1. 从发现到接纳

我的孩子今年4岁，在2025年春天被确诊为症谱系障碍。。其实是幼儿园老师最先发现了他在行为和社交上的不同，建议我们去做评估。刚拿到诊断时，我对症了解很少，整个人都崩溃了。但很快，我们决定面对现实，积极开始干预。

孩子一直在孙医生那里做康复训练，两周一次。坚持下来，变化是看得见的。最让我感动的是，幼儿园老师最近说，觉得孩子"眼睛里有光了"。这句话，给了我莫大大的鼓励，也让我们相信，所有的努力都没有白费。

2. 看不见的压力

在生活中，我们不得不频繁使用"症"这个医学诊断，来申请或办理手续。每次写下或说出这三个字，心理上都会有负担。公众对"症"往往有刻板印象，也不太理解"谱系"意味着巨大的差异。最常遇到的情况是，亲友们看了孩子会说："他看着挺正常的呀。" 这种"安慰"反而让我们感到孤独——它忽略了孩子面临的真实挑战，也让我们的沟通变得困难。

3. 如何调整自己

在自我调整的过程中，我的切身经验是：

This interview focuses on one family's experience of home-based intervention for a child on the autism spectrum.

Through the parent's first-person perspective, we hope to present the real challenges and emotional journey behind parenting a child with autism—from breakdown, confusion, and fear, to acceptance, action, and gradual hope.

At the same time, we hope this story can bring confidence to other families and help share a more scientific understanding of intervention. The following account comes from the parent of a four-year-old boy on the autism spectrum.

1. From Discovery to Acceptance

My child is four years old this year. In the spring of 2025, he was diagnosed with autism spectrum disorder. In fact, it was his kindergarten teacher who first noticed differences in his behaviour and social interaction and suggested that we take him for an assessment.

When we first received the diagnosis, I knew very little about autism. I completely broke down. But very soon, we decided to face reality and begin intervention actively.

My child has been receiving rehabilitation training with Dr. Sun. The schedule is two weeks of classes, followed by a two-week break, and then the cycle repeats. After continuing with this routine, the changes have become visible.

The moment that moved me most was when his kindergarten teacher recently said that she felt there was "light in his eyes" now. That sentence gave me enormous encouragement. It also made us believe that none of our efforts had been wasted.

2. The Invisible Pressure

In daily life, we have to use the medical diagnosis of "autism" again and again when applying for support, subsidies, or handling administrative procedures. Every time I write or say these words, I feel an emotional weight.

- 与“对的人”交流：我优先选择和有专业背景的人交流，比如康复师、医生，或者有医疗行业经验的朋友。他们的认知能给我客观的支持，帮助我保持理性，避免被恐慌淹没。

- 避免过度依赖网络信息：网络信息太杂，真假难辨。过过度搜索常常会加剧焦虑。我现在更信赖专业渠道的建议，让自己更专注于孩子的实际干预，而不是无谓的担忧。

4. 我们的干预之路

目前，孩子在接受语言、感统和课程，同时也在尝试中医针灸调理。我们采用中西医结合的方式，是希望先让孩子身体舒适，更能接受和吸收训练内容。

在课程安排上，我们也做了调整。从最初连续两周密集上课，改为 “上一周课，休息一周” 的节奏。我们发现，，这样调整后，孩子的状态更稳定了，情绪波动变小，注意力也更集中，干预的效果反而更能持续。

5. 夺回“定义权”；我的孩子，不止一个标签

回顾这段日子，我觉得自己仿佛在打一场“定义权”的争争夺战。

一开始，是社会的刻板印象让我崩溃；接着，是冷冰冰的医学标签让我感到孩子被隔离开来；后来，又是亲友们“看起来正常”的误解，忽视了孩子神经多样的特质。。

一个深刻的矛盾是：那个有时让我们感到隔离的“症”标签，却又是我们获取专业帮助时无法绕开的“通行证”。这种无力感，或许很多家长都有。

但我想，我们不能让标签定义孩子的一生。每一个孩子都是一个完整的、发展中的人。也许社会需要更多关于“谱系”和“神经多样性”的科普，而每个家庭，也需要一场“叙述的解放”——不再仅仅通过诊断书来理解孩子，而是真正去看见他独特的样子、他的努力，和他的光芒。

这条路，不应该只是家长在单打独斗。它需要整个社会，拥有更多的包容、理解与尊重。

致谢：谨向这位妈妈致以最深的敬意与感谢。感谢她如此真诚的分享，这些具体而微的喜悦与挣扎，远比任何抽象的数据更有力量。她的声音，让相似处境者感到共鸣，也为更多人提供了一份珍贵的理解地图。

内容警示：本文为匿名访谈，已隐去所有隐私信息。内容旨在分享经历与观点，不构成医疗建议。如需帮助，请寻求专业人士支持。

The public often holds stereotypes about autism and does not really understand that “spectrum” means great variation between individuals. The situation we encounter most often is that relatives or friends see my child and say, “He looks quite normal.”

This kind of “comfort” actually makes us feel more isolated. It ignores the real challenges my child faces and makes communication even more difficult.

3. How I Adjusted Myself

In the process of adjusting myself, my own experience has been this:

Speak with the right people.

I choose to speak first with people who have professional knowledge, such as rehabilitation therapists, doctors, or friends with experience in the medical field. Their understanding gives me objective support. It helps me stay rational and prevents me from being overwhelmed by fear.

Do not rely too heavily on online information.

There is too much information online, and it is difficult to tell what is true and what is not. Excessive searching often increases anxiety. Now, I trust professional guidance more and try to focus on my child’s actual intervention, rather than being trapped in unnecessary worry.

4. Our Intervention Journey

At present, my child is receiving speech therapy, sensory integration training, and psychomotor rehabilitation. We are also trying acupuncture and traditional Chinese medicine-based regulation.

We chose an integrated approach combining Chinese and Western medicine because we hope to first help the child feel more physically comfortable, so that he can better accept and absorb the training.

We have also adjusted the course schedule. At first, he attended intensive classes for two consecutive weeks. Later, we changed it to one week of classes followed by one week of rest.

After making this adjustment, we found that his condition became more stable. His emotional fluctuations became smaller, his attention became more focused, and the effects of intervention seemed to last better.

5. Reclaiming the Right to Define My Child: My Child Is More Than a Label

Looking back on this period, I feel as if I have been fighting a battle over the right to define my child.

At the beginning, it was society's stereotypes that made me break down. Then, the cold medical label made me feel as if my child had been separated from others. Later, relatives and friends would say that he "looks normal," which overlooked the neurodiverse characteristics of my child.

There is a deep contradiction here: the label "autism," which sometimes makes us feel isolated, is also the unavoidable "passport" we need in order to access professional help. This sense of helplessness may be familiar to many parents.

But I believe we cannot allow a label to define a child's entire life. Every child is a whole person, and a person still developing.

Perhaps society needs more public education about the "spectrum" and neurodiversity. Every family may also need a form of "liberation in storytelling"—no longer understanding the child only through a diagnostic report, but truly seeing the child's unique self, their effort, and their light.

This road should not be one that parents walk alone. It requires society as a whole to offer more inclusion, understanding, and respect.

Acknowledgement

We would like to express our deepest respect and gratitude to this mother. Thank you for sharing your story with such honesty. These specific, subtle moments of joy and struggle are more powerful than any abstract data.

Her voice allows people in similar situations to feel seen and understood. It also offers others a precious map for deeper understanding.

Content Notice

This article is based on an anonymous interview, and all private information has been removed. The content is intended to share personal experience and perspectives only. It does not constitute medical advice. If support is needed, please seek help from qualified professionals.

作者信息 / Author Information

作者：Cathy Tian & Olivia Shao
作者简介：ASA协会编辑部志愿者

Author: Cathy Tian & Olivia Shao
Author Bio: ASA Editorial Department volunteers

PART 4:
Healing Articles

栏目四｜疗愈专题

Healing Articles

内在小孩的疗愈心路：粉水晶的妙用

The Healing Journey of the Inner Child: The Wonderful Uses of Rose Quartz

导语

本文以粉水晶、冥想与内在觉察为线索，记录作者与内在小孩重新相遇的疗愈过程。它不是对神秘经验的简单描述，而是一段关于柔软、信任与自我连接如何重新发生的个人叙事。

Lead

Through rose quartz, meditation, and inner awareness, this personal narrative follows the author's reconnection with the inner child. More than a description of spiritual practice, it is a story of softness, trust, and the gradual return of self-connection.

【引言】

我叫羽秋，喜欢水晶、冥想与读经。对我而言，玄学并非虚幻的迷信，而是古人探索宇宙与自我的一套博大精深的"内在科学"。它像一把钥匙，帮我打开感知世界的的另一扇门。而疗愈，则是我将这份感知落地的实践，是让身心回归和谐与平衡的艺术。我深信，真正的疗愈是唤醒我们每个人内在本就具足的光与力量。

借助这些古老而智慧的工具，我们可以清理阻塞的能量，找回本属于我的觉知与力量。

【初识】

最初结缘水晶，是被它们炫目的颜值吸引，只当作好看的饰品佩戴。慢慢了解后，商家会告诉我，白水晶镇定情绪、黄水晶带来丰盛、紫水晶激发灵感……被这些功效吸引，我陆续结缘了各色水晶饰品。

故事要从一串粉水晶说起，结缘时，店家说粉水晶对于工作很有帮助，能增强人际关系的处理，吸引人缘，我觉得不错，而且粉水晶本身漂亮可爱，便入手了一串手链和一颗原石。

然而佩戴粉晶手链的几天，心情却异常难受。那些关于原生家庭的不快乐回忆，一阵阵涌上心头，牵动情绪，甚至还不由自主地回忆起早已遗忘的细节，陈年的信息翻滚着，撕扯着我的心。我把粉水晶放置几天，换上白水晶，情绪缓和些，再换回粉水晶，忧伤又回来了。

【Intro】

My name is Yuqiu. I love crystals, meditation, and reading scriptures. To me, metaphysics is not an illusory superstition, but a profound "inner science" through which ancient people explored the universe and themselves. It is like a key that helps me open another door to perceive the world.

Healing is where I put this perception into practice: an art that brings the body and mind back to harmony and balance. I firmly believe that true healing is about awakening the inherent light and power within each of us.

With these ancient and wise tools, we can clear blocked energy and regain our innate awareness and strength.

【Acquaintances】

I first became interested in crystals because I was attracted by their dazzling appearance, treating them simply as beautiful ornaments to wear.

As I gradually learned more, merchants told me that clear quartz calms emotions, citrine brings abundance, and amethyst inspires creativity... Attracted by these qualities, I gradually collected various kinds of crystal jewelry.

The story starts with a string of rose quartz beads. When I bought it, the merchant said that rose quartz can support work, improve interpersonal relationships, and attract popularity. I thought that sounded wonderful.

Since rose quartz itself was also beautiful and lovely, I bought both a bracelet and a raw stone.

However, in the few days after wearing the rose quartz bracelet, I felt extremely uncomfortable. Unhappy memories from my family of origin kept surfacing and affecting my emotions. I even involuntarily recalled long-forgotten details. The old memories kept churning and tearing at my heart.

这种变化很是微妙，也引起了我的好奇，我开始查阅关于水晶的知识，仿佛打开了一个新的世界，原来水晶还有疗愈人心的作用啊，粉水晶可以疗愈心轮，此时的我还不懂疗愈具体指什么？但我决定试一试。

【链接】

那天晚上，我将粉晶原石放到心轮的位置，半躺着，放松自己的身体与意识，这样的放松就像一杯带着沙子的水，不去搅浑它，让沙子沉淀下去水慢慢变得清澈。

放松着，感觉自己的呼吸像个圆形，一直在旋转。过了一会儿，呼吸不再旋转了，身上出现了酥麻的感觉，空气中也仿佛有一种力量，像氢气球，一会儿把我往左上方拉，一会儿往右上方拉，从各个方向拉起我，像拉芝士一样，还会拔丝。结束后，顿感神清气爽，仿佛体重都轻了几斤。

第二晚，我继续将粉晶原石放在心轮，放松身心，起初身体仍有酥麻感，但这次没有拉扯感了。突然脑海中浮现一个黑白画面，一个小黑屋，有个长发小女孩蹲在角落。抱着头蹲看不清脸。小黑屋有扇窗，阳光透进来，却照不到她，她缩在阴影里。紧接着，光变成七彩的折射光，有了颜色，但依然照不到她。我的呼吸突然变得急促过了一会儿，画面就消失了。

结束后，我很惶惑，甚至担心自己出现了精神问题，疯狂在手机上查资料，终于查到了“内在小孩”这个词。

【疗愈】

幸运的是，那时我结识了一位很好的水晶疗愈师，我将困惑告诉她，她信任我，真诚的鼓励我，说这不是臆想，很多人心中都潜伏着内在小孩，他若受伤，我们的情绪也会被压抑。她鼓励我勇敢的和水晶链接，让水晶治愈我的心。

I put the rose quartz aside for a few days and replaced it with clear quartz, and my mood eased a little. But when I put the rose quartz back on, the sadness returned.

This subtle change aroused my curiosity. I started looking up information about crystals, as if I had opened a new world. I learned that crystals are also believed to support emotional healing, and that rose quartz is associated with the heart chakra.

At that time, I still did not understand what healing specifically meant, but I decided to give it a try.

【Connection】

That night, I placed the raw rose quartz stone on my heart chakra, lay half-reclined, and relaxed my body and awareness. This kind of relaxation was like a cup of water with sand in it: instead of stirring it up, I let the sand settle until the water gradually became clear.

As I relaxed, I felt my breath become circular, as if it were constantly rotating. After a while, the rotation stopped, and a tingling sensation spread through my body.

There also seemed to be a force in the air, like a balloon, pulling me first to the upper left, then to the upper right, and then from all directions, like stretched cheese being drawn into threads. When it ended, I suddenly felt refreshed, as if I had become several pounds lighter.

The next night, I again placed the raw rose quartz stone on my heart chakra and relaxed my body and mind. At first, there was still a tingling sensation in my body, but this time there was no pulling feeling.

Suddenly, a black-and-white image appeared in my mind: a small dark room, and a little girl with long hair squatting in the corner. She was holding her head, so her face could not be seen. There was a window in the small dark room, and sunlight came through, but it could not reach her.

She remained huddled in the shadow.

Then, the light turned into colorful refracted light, but it still could not reach her. My breath suddenly became rapid, and after a while, the image disappeared.

After that, I was very confused and worried that something might be wrong with me psychologically. I frantically searched for information on my phone and finally found the term "inner child".

【Healing】

Fortunately, around that time, I met a wonderful crystal healer. I told her about my confusion, and she trusted me, sincerely encouraged me, and said that what I had experienced was not an illusion.

疗愈师的开解让我萌生了一个想法，我编了一个故事，让现在的我穿越回过去，成为小时候我的邻居的阿姨，在她难过的时，我拥抱她，陪她吐槽，走过最无助时光，我甚至在她前面为她吵架争执，在这场心流里，我置换了角色，再回看过去，就像读一篇“爽文”。心境舒畅了许多。

两天后，我再次用粉晶疗愈心轮，这次观想到一个奇怪的画面，一个山洞，洞底有台阶，一个白衣小孩从台阶向上走，洞口有位个白衣成年人在等待她，美丽的阳光照耀着洞口，小孩最终走向了大人。

此后，我感觉自己身上背负的东西被卸掉了一些，轻松了许多。从前的心总是觉得空落落的，仿佛少了点什么，现在心满满的，很舒畅。

后来的一天，我再回忆过去，我看到了一个有觉知的我，她像一个看客，一个智者，静静觉察曾经的一切。人们常说，过去无法改变，但是我改变了我的过去，当我带着觉知回溯，态度与角色的改变，就是最大的改变。

我的内在小孩从此由我来亲自养育、守护。

原来，改善人缘是粉水晶最不值得一提的优点啊，粉晶用强大的爱的疗愈力，治愈我的心轮多年的伤痛，让我的生活有了崭新的开始。

作者信息 / Author Information

作者：羽秋
作者简介：疗愈爱好者

Author: Yuqiu
Author Bio: Healing enthusiast

Many people carry an inner child within them, and when that child is hurt, our emotions may also become suppressed. She encouraged me to connect bravely with the crystal and let it support the healing of my heart.

The healer’s insight gave me an idea. I imagined a story in which my present self travelled back to the past and became the aunt next door to my childhood self.

When she was sad, I hugged her, stayed with her as she released her feelings, walked with her through the most helpless moments, and even stood up for her when she could not defend herself. In this state of flow, I shifted roles.

Looking back at the past became like reading a “satisfying story,” and my heart felt much lighter.

Two days later, I used rose quartz to heal my heart chakra again. This time, I visualized a strange scene: a cave with steps at the bottom. A child in white clothes was walking up the steps, and an adult in white clothes was waiting for her at the cave entrance.

Beautiful sunlight shone on the cave entrance, and the child finally walked towards the adult.

Since then, I have felt that something I had been carrying was lifted, and I have felt much lighter. In the past, my heart always felt empty, as if something was missing, but now my heart feels full and at ease.

One day later, when I recalled the past, I saw an aware self, like a spectator or a wise person, quietly observing everything that once happened. People often say that the past cannot be changed, but I had changed my relationship with the past.

When I look back with awareness, the shift in attitude and role becomes the greatest change.

From that moment on, I decided to nurture and protect my inner child myself.

It turns out that improving popularity is the least important gift of rose quartz. Through its gentle healing power of love, rose quartz helped heal the long-standing wounds in my heart chakra and brought a new beginning to my life.

我终于找回了自己的心！

I Finally Found My Heart!

导语

本文回望一段从情绪压抑到重新感受生命的个人疗愈旅程。作者透过冥想、催眠、亲子观察与日常觉察，慢慢找回被遗忘的心，也让读者看见自我恢复并非一瞬间完成。

Lead

This personal essay looks back on a healing journey from emotional suppression toward renewed aliveness. Through meditation, hypnotherapy, observations of children, and daily awareness, the author gradually rediscovers a forgotten heart and shows that recovery rarely happens all at once.

【引言】

本文为一篇个人叙事，回溯自我恢复与内在觉醒的旅程。通过冥想、催眠疗愈以及对孩子们的观察，作者重拾被遗忘的情绪，重新连接长期被压抑的自我，并发现当我们允许自己去感受和存在时，真正的力量与生命活力便自然涌现。

嗨，亲爱的你，你相信人生的每一步都没有浪费吗？

我会坐在电脑前在数字里徘徊，也会手握锅铲在西餐厨房创造美味，更在幼儿园里听着童声稚语。如今，我安静地坐在催眠工作室里，陪伴一个个鲜活的生命，找回内在智慧和力量。

有人问我：这些身份转变会不会太跳跃？

我微笑着想起——会计的严谨让我学会专注，厨房的烟火教我创造与生活，孩子的纯净带我找回真诚。而所有这些经历，都在悄悄为我的使命铺路。

【遇见催眠，遇见真实自己】

曾经的我，习惯把想法锁在心里，以为不表达就不会有冲突。把情绪压得太久太重，渐渐活成了一种“躺平”的的姿态——不挣扎，却也没有了动力。直到遇见回溯催眠，在深度的放松与回溯中，我看见了那些被遗忘的时刻——委屈时沉默的自己，愤怒时失望的自己，渴望时却说“不重要”的自己。

【Intro】

This personal narrative looks back on a journey of self-recovery and inner awakening.

Through meditation, hypnotherapy, and memories of working with children, the author reconnects with long-suppressed emotions and discovers that true vitality begins to return when we allow ourselves to feel and exist as we are.

Hi, dear you, do you believe that no step in life is ever wasted?

I once sat in front of a computer, moving through numbers. I once held a pan in a Western kitchen, creating flavours and warmth. I also listened to children’s innocent voices in a kindergarten.

Today, I sit quietly in a hypnotherapy studio, accompanying one vivid life after another as they rediscover their inner wisdom and strength.

Someone once asked me: “Doesn’t this shift between identities feel too abrupt?”

I smiled and thought: the discipline of accounting taught me focus; the warmth of the kitchen taught me creation and daily living; and the purity of children brought me back to sincerity. All these experiences had quietly been preparing the way for my calling.

【Meeting Hypnosis, Meeting My True Self】

I used to keep my thoughts locked inside, believing that silence would prevent conflict. I suppressed my emotions for so long and so deeply that I gradually slipped into a state of “lying flat”: no struggle, but no motivation either. Then I encountered regression hypnotherapy.

那些年被压抑的情绪，像终于被打开的盒子，释放出积存太久的泪水与真相。在安全的空间里，我允许自己脆弱，也允许愤怒流动，更允许悲伤被看见。奇妙的是，当这些情绪被温柔接纳后，心底竟自然涌出一股力量。那不是外界的激励，而是生命本来的活力。它一直都在，只是曾被太多的“应该”与“恐惧”覆盖。

现在的我，依然不会时时充满动力，但我学会了倾听身体的信号，尊重情绪的起伏，在需要时说“不”，在愿意意时说“好”。像个孩子重新学走路，每一步，都踏实而而自由。

【那些孩子教会我的事】

还记得在幼儿园工作的日子，孩子们从不介意我唱歌是否在调上，他们在乎的是我眼里闪烁的光，是那个愿意陪他们傻笑的老师。他们想哭就哭，想笑就笑，那份真实，曾经我也拥有过。

妈妈总说小时候我是个“小话唠”，追着老师问“为什么天么天是蓝的”，“为什么树叶会变黄”。不知从何时起，那，那个爱问问题的女孩，学会了把话咽回肚子里，面无表情，把情绪压在最深处。

【内观冥想中听见了灵魂的声音】

在十日内观冥想中，我第一次听见心里那个被遗忘的小女孩的感受。我收到了一段清晰的讯息，眼前浮现出一行字：“I AM TRAPPED IN THE PAST.” 我被困在了过去。去。

In deep relaxation and guided exploration, I saw the forgotten versions of myself: the silent self who felt wronged, the disappointed self who hid her anger, and the yearning self who kept saying, “It doesn’t matter. ”

The emotions I had repressed for years poured out like a box finally opened, releasing tears and truths that had been stored for too long. In that safe space, I allowed myself to be vulnerable, to let anger move, and to let sadness be seen.

Something remarkable happened: once these emotions were gently received, a quiet strength began to rise from within. It was not motivation imposed from outside, but the innate vitality of life itself. It had always been there, only buried under layers of “should” and “fear. ”

Today, I am still not motivated all the time, but I have learned to listen to my body, honour the ebb and flow of my emotions, say “no” when I need to, and say “yes” when I truly mean it. It feels like learning to walk again as a child: each step steady, grounded, and free.

【What the Children Taught Me】

I still remember my days working in a kindergarten. The children did not care whether I could sing in tune. They cared about the light in my eyes and about whether I was the teacher who would laugh with them. They cried when they wanted to cry and laughed when they wanted to laugh.

Their authenticity was something I once possessed too.

My mother always said that I was a “little chatterbox” as a child, chasing after teachers and asking, “Why is the sky blue? ” and “Why do leaves turn yellow?

” At some point, that curious little girl learned to swallow her questions, hide her expressions, and bury her emotions so deeply that even she could no longer find them.

【Hearing the Soul in Vipassana】

During a ten-day Vipassana retreat, I heard the feelings of that forgotten little girl for the first time. A clear message appeared before me, like a line of text written in my mind: “I AM TRAPPED IN THE PAST.” I was trapped in the past.

In that moment, I sensed a small, confused, and hurt girl curled in a corner, not knowing what to do. Tears streamed silently down my face. It was the echo of a self forgotten for years, finally being seen again: I see you now. Later in meditation, something even more extraordinary happened.

那一刻，我感受到一个委屈而迷茫的小女孩，蜷缩在角落里，不知所措。顿时，我泪水无声涌出，那是被遗忘多年的自己在心底发出的回响：我终于看到你了。而在后续的冥想中，更神奇的体验发生了。我仿佛置身于一座宏大的宫殿，寂静无人。突然，一个充满力量的声音响起，如环绕立体声般震撼心灵："你们将臣服于我——我可以！我可以！"

那个声音并非来自外界，而是源于我灵魂的最深处。我恍然大悟：原来这才是真正的我，如此有力量。而我曾经只是被旧有的模式和恐惧所困。冥想结束后，我感受到身体的变化：原本紧绷的驼背仿佛被解锁，肩上像卸下了两个沉重的沙包，整个人轻盈而舒展。更深刻的转变发生在生活中。

从前遇到挑战，我总先想到困难，脱口而出："我做不到到"。而现在，我的第一反应是："我可以，先开始再说说。"从"我不行"到"我可以"，这不仅是一句话的改变，改变，更是整个生命姿态的转向。在成长的道路上，让我进一步懂得，每个情绪都是需要被聆听的信使。

焦虑时，我不再急着控制，而是温柔地问自己："此刻，，我真正需要的是什么？"这个过程就像剥洋葱，一层层层褪去"应该"和"必须"，渐渐露出生命最本真的模样。样。现在的我，依然会在人群前紧张，但已学会与这份紧张共处，允许声音微微颤抖，也允许心跳加速——这就是真实的我啊。

【致谢】

感谢ASA期刊全体成员的努力，感谢Ling的邀稿和支持。
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I felt as if I were standing in a vast, silent palace. Suddenly, a powerful voice echoed around me like surround sound: "You shall surrender to me. I can. I can. "

The voice did not come from outside. It rose from the deepest chamber of my soul. I suddenly understood: this is my true self, powerful and capable. I had only been trapped by old patterns and fears. When the meditation ended, I felt a physical release.

The tightness in my hunched back loosened, as if two heavy sandbags had been lifted from my shoulders. My whole body felt lighter and more open. An even deeper transformation then began to unfold in daily life.

In the past, whenever I faced a challenge, my first thought was always, "I can't. " Now, my instinctive response has become, "I can. I will begin first. " The shift from "I can't" to "I can" is not merely a change of words; it is a change in the posture of my life.

On this path of growth, I have come to understand that every emotion is a messenger asking to be heard.

When anxiety arises, I no longer rush to control it. Instead, I gently ask myself, "What do I truly need in this moment? " The process is like peeling an onion: layer by layer, the "shoulds" and "musts" fall away, gradually revealing the most authentic shape of life beneath.

I still feel nervous in front of crowds, but I have learned to coexist with that nervousness, to allow my voice to tremble and my heart to race. This, too, is the real me.

【Acknowledgments】

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作者信息 / Author Information

作者：Sailing
作者简介：高我链接师；美国量子催眠师；照见催眠工作室创办人；生命智慧导师

Author: Sailing
Author Bio: Higher-self connection practitioner; US quantum hypnotist; founder of Zhaojian Hypnosis Studio; life wisdom mentor

云南之行：关于慈悲的传讯

Where Compassion Finds Us

导语

本文从云南旅途中的雨、寺庙、古树与偶然传讯写起，记录“慈悲”如何从抽象词语变成可感、可停留、可反复回望的生生命经验。它是一篇关于静默、觉察与温柔的旅途随笔。

Lead

Beginning with rain, temples, ancient trees, and unexpected messages during a journey through Yunnan, this essay follows how compassion becomes more than an abstract word. It is a travel reflection on stillness, awareness, and the quiet force of tenderness.

【引言】

本随笔回溯了云南旅途中，在雨润古寺与古树之间悄然浮现的“慈悲”之意。通过静默、感悟与不期而至的瞬间间，文章呈现慈悲如何从抽象概念化为一种被切身体验的存在。

每到一座城市，我们可能会因为它的气候、美食、景色，又或是同行的旅伴而对这个地方有着深深浅浅的回忆。这次七月份的云南之旅，我去了能人异士聚集的大理、被山林包裹的西双版纳和淅淅沥沥的昆明。更为重要的是，整趟旅程当中，有两条信息一直重复贯穿：慈悲和表达。

“慈悲”这个词，似乎很宏大，渺无边际。之前对于慈悲悲的印象：挂在寺庙里的牌匾，很多人会把慈悲挂在嘴边，我感觉这个词宽广到我无法理解，似乎漂浮在空中无法落地。有趣的是，这个词突如其来、重复多变，让我从多个维度去感受、体验和思考。我跟一位朋友提及了这件事，为什么这段旅程“慈悲”就像弹框消息一样呢呢?

“当你无法理解的时候，不如把自己回收到那个当下，去去好好感受一下。”朋友的这个提议的确很有意思，我立立即开始时光倒流，回到第一次收到信息的场景。

【第一次传讯：雨中的山间寺庙】

【Intro】

This essay retraces the quiet emergence of compassion during a journey through Yunnan, amid rain-washed temples and ancient trees. Through stillness, reflection, and unexpected moments of awareness, it shows how compassion can shift from an abstract word into a lived experience.

Every arrival in an unfamiliar city leaves a trace. Sometimes it comes from the climate, food, scenery, or the friends who travel with us. During my journey through Yunnan this past July, I visited Dali, where people of many gifts and sensibilities gather; Xishuangbanna, wrapped in emerald forests;

and rain-soaked Kunming. More importantly, two messages accompanied me throughout the journey: compassion and expression.

The word “compassion” had always felt vast and difficult for me to grasp. I associated it with temple plaques or with something people often say aloud, but it felt too broad to land in daily experience.

Yet during this journey, the word appeared again and again, almost like a notification asking for my attention. It invited me to feel, experience, and think from different dimensions.

When I mentioned this to a friend, wondering why “compassion” kept appearing like a pop-up message, she suggested, “When you cannot understand it, return to the moment and feel it again. ” So I followed that thread back to the first scene in which the message appeared.

【The First Message: A Mountain Temple in the Rain】

On my second day in Kunming, my companion and I wanted to climb to a higher place. We found that there was an old temple on the mountain, so we set out together. The path was quite primitive. After more than two hours through fields, stone steps, and muddy trails, we finally reached the mountaintop.

在昆明停留的第二天，我和同伴想去登高，查看到山上有一座很古老的寺庙，于是两人便一同前往。通往寺庙的山路比较原始，大概花了两个多小时的时间，经过田野、阶梯、泥路，终于到达了山顶。寺庙的名字叫妙高寺，看上去比较淳朴，当地人热爱爬山之后进去拜佛。我们匆匆参观完之后，发现旁边有一座人更少的龙王庙。

刚开始依稀有4、5个旅客，忽然天空下起了小雨，人一晃就都离开了。我和同伴进入了主庙，殿里有龙母、龙王太子等的像，庙里因为没有太阳光的原因显得比较阴暗。突然我的耳朵就像听到了一声猛烈的敲钟声，然后在跨出寺庙门的瞬间，听到了绵长的声音“慈悲”。转头头我就跟同伴说，“欸，有传讯：慈悲”。同伴长期以来来受到我的“玄学传播”，自然也没多理会。

此时的雨势更大了，下起了倾盆大雨。

我俩找到了两把椅子，坐在庙前呆呆地看着中间的大缸，雨水不断拍打着缸里的莲花叶子，泛起了急促的水圈。眼神偶尔移到庙檐，有几只看着很肃穆的龙的雕刻，雨水随着风的转向迅速地变化着，晃神间我感觉龙在呼风唤雨、时而在山里盘旋，时而又回到了龙王庙的据点。

我和同伴一直播着不同版本的《听见下雨的声音》，有时闭目冥想，有时聊聊家常，有时感受着歌里的情绪，任由它们流动。而我们就像观众，又像戏台中的一环。

第一个“慈悲”发生在这里，现在想起来还是觉得不可思思议。人生当中有这么一个多小时，在我认为的“景点”“里，两人平静地坐着，没有在想接下来的旅程应该如何何安排，我们应该如何下山。我在龙王庙里貌似“浪费”“了这几十分钟，却在多少天之后，每每想到这个场景，，都感觉是一场心灵的洗涤：天要下雨，人等雨停，天道轮回，顺应自然。

The temple was called Miaogao Temple. It looked simple and modest, a place local hikers liked to visit after climbing. After a brief visit, we noticed a smaller and quieter Longwang Temple nearby. At first there were four or five visitors, but when light rain suddenly began to fall, they quickly left.

My companion and I entered the main hall, where statues of the Dragon Mother and the Dragon Prince stood in the dimness, with little sunlight entering the space.

Suddenly, my ear seemed to hear a forceful bell strike. As I stepped out of the temple, I heard a long, lingering sound: “Compassion. ” I turned to my companion and said, “There is a message: compassion. ” My companion, long accustomed to my spiritual messages, did not make much of it.

By then, the rain had become much heavier.

We found two chairs and sat under the eaves, looking quietly at a large basin in the courtyard. Rain struck the lotus leaves inside it, sending out urgent ripples. From time to time, my gaze moved to the temple eaves, where several solemn dragon carvings looked outward.

As the wind shifted with the rain, I had a momentary feeling that the dragons were stirring the weather, circling through the mountains, and returning to Longwang Temple. We played different versions of “Rhythm of the Rain.

” Sometimes we closed our eyes in meditation, sometimes we chatted lightly, and sometimes we simply allowed the emotion of the music to move through us. We were like observers, and yet also part of the scene.

The first experience of “compassion” happened there. Looking back, it still feels astonishing. For more than an hour of my life, in what I had thought of as an ordinary “scenic spot,” two people sat quietly, not planning the next destination and not thinking about how to get down the mountain.

At the time, it seemed as if I had “wasted” those minutes in Longwang Temple. Yet many days later, whenever I recalled that scene, it felt like a cleansing of the heart: when the sky rains, people wait for the rain to stop; nature moves in cycles, and we learn to follow it.

Many things we believe we must complete, and many rules we feel we must obey, are only attachments of the mind. Who can stop the sky from raining?

Only our own fixed thoughts, mixed with the noise of the times, make these attachments seem necessary. They gradually thin the strength of the heart and turn us outward toward other people’s systems of evaluation.

【The Second Message: Beneath the Bodhi Tree】

原来有很多我们认为必须完成、必须遵循条条框框的事情，不过是一念之执。谁又能阻止天要下雨呢？只有自己的执念，夹杂时代的噪音，让执念变得理所当然，让我们心里的能量越来越薄弱，倾向依靠他人的评价系统。

【第二次传讯：菩提树下】

第二次的“慈悲”，发生在一棵菩提树下。当时很多旅客客围着一位导游听讲解，好巧不巧，刚好走近，导游说：“菩提树代表着慈悲……”同伴们都惊呼：“又是慈悲！”！”笑声和吵杂声交织在一起。此时的我拨开所有的动静静，用心里的静谧去感受此刻在菩提树。

我是一棵菩提树，千百年扎根于此，若以我为中心，身边的一切都在迅速地变动，只有我，这棵树，安静地以第三视角看着这个世界。我不是菩提树，我只是以分子或粒子的存在，我可以是花草树木，也可以是小溪石子；我觉得我是谁便是谁，又或许我根本不存在。

“身是菩提树，心如明镜台。时时勤拂拭，莫使有尘埃。。”还是“菩提本无树，明镜亦非台。本来无一物，何处处惹尘埃。”

【关于慈悲的传讯】

菩提是树还是心，是有相还是无相，已经变得不再重要。是呀，不重要。慈悲之心流动着，围绕着千千万万的树，穿梭于形形色色的人群。此刻“慈悲”不再是一个刻刻板的词，而是有生命力的、不带批判的愿力，渗透在每个人的心里。

【致谢】

ASA期刊所有成员，感谢你们的辛勤付出，从0到1跨出了巨大的一步。感谢June对协会事无巨细的关怀和帮助，以及感谢June对于协会期刊的推进。

作者信息 / Author Information

作者：严火火
作者简介：ASA 协会秘书长；身心灵爱好者及从业人员

Author: Yan Huohuo
Author Bio: Secretary-General of ASA; mind-body-spirit practitioner and enthusiast

The second message of “compassion” came beneath a bodhi tree. Many visitors were gathered around a guide. Just as we approached, the guide said, “The bodhi tree represents compassion…” My companions exclaimed, “Compassion again! ” Their laughter mixed with the surrounding noise.

In that moment, I tried to move past the noise and feel the stillness beneath the bodhi tree.

I imagined myself as a bodhi tree, rooted in that place for hundreds or thousands of years. If I were the centre, everything around me would be changing rapidly, while I, the tree, would quietly watch the world from a third-person perspective. Then I was no longer a bodhi tree;

I was only a molecule or a particle. I could be flowers, grass, trees, a stream, or a stone. I could be whoever I felt I was, or perhaps I did not exist at all.

Ancient verses surfaced in my mind:

“The body is the bodhi tree;
the mind is a bright mirror stand.
Polish it diligently,
and let no dust alight.”

And then their counterpart:

“There is no bodhi tree,
nor a bright mirror stand.
Originally there is nothing;
where could dust alight?”

【A Message About Compassion】

Whether bodhi is a tree or the mind, whether form is real or empty, no longer seemed important. What mattered was this: compassion was moving. It moved around thousands of trees and through all kinds of people. In that moment, compassion was no longer a fixed word.

It became a living, non-judging intention, quietly permeating the heart.

【Acknowledgments】

My sincere thanks to all members of the ASA Journal for their dedicated work and for taking this publication from zero to one. My gratitude also goes to June for her meticulous care and support for the Association and for helping move this journal forward.

在ASA，用正念连接世界：我的远程公益成长记

In ASA, Connecting with the World Through Mindfulness: My Remote Public Welfare Growth Journey

导语

本文记录一位远程志愿者在 ASA 公益实践中的成长经验。透过社群运营、正念沟通与跨地域协作，作者看见公益并不只发生在现场，也可以在持续、细微而真诚的连接中发生。

Lead

This article records the growth of a remote volunteer within ASA's public-interest work. Through community operations, mindful communication, and cross-regional collaboration, it shows that service does not happen only on site, but also through steady, subtle, and sincere connection.

大家好，我叫九宝。坐标广州，做了多年的财务，是一个既爱内省又爱生活、喜欢自我觉察、心灵成长的正念实践者。

最开始接触ASA这个团体是因为9月初看到朋友转发的推文，说正在招募志愿者，因为是国际心理疗愈协会，没有地点的限制，可以用灵活碎片化的时间、远程的方式来参与公益实践，于是觉得很可行。同时自己也是心理爱好者，也很有兴趣和同好们一起交流和玩耍，所以就报名了志愿者。

Hello everyone, my name is Jiu Bao. Based in Guangzhou, I have worked in finance for many years. I am a mindfulness practitioner who values both introspection and life, and is passionate about self-awareness and spiritual growth.

My initial contact with the ASA community came in early September when I saw an article forwarded by a friend. It mentioned that volunteers were being recruited.

Since it was for the Association of Soulful Asia (ASA), there were no location restrictions, and it offered flexible, fragmented time slots for remote participation in charitable practice, I found it very feasible.

Dione面试我了之后给我定的岗位是社群运营，帮助运营营线上社群，与关注心理成长的大家建立真诚互动、进行用户联结。

然后从加入到现在不到三个月的时间，已经感觉收获颇丰：

运营的内容一般是大家共同讨论出大的主题，具体的内容都是自己去收集和构想的，我们几个运营的小伙伴都会轮流去发布自己精心准备的内容，营造积极正向的群氛围。

内容涉猎了灵性成长、三脉七轮、心理学小知识、正念传播、情绪管理、身心疗愈、艺术鉴赏、读书分享、互动游戏等等，每一次看到是在学习，而每一次准备更是一种学习，而且准备的人的印象反而更深刻，无形当中学到了很多知识。

As a psychology enthusiast myself, I was also excited about the opportunity to communicate and connect with like-minded people, so I signed up as a volunteer.

After the interview with Dione, I was assigned to community operations. My main responsibility is to help manage the online community, establish sincere interactions, and build user connections with everyone who cares about psychological growth.

In the less than three months since I joined, I have already gained a great deal:

The content we operate is generally based on broad topics discussed together, but the specific content is collected and conceived individually. Several of us in the operations team take turns posting carefully prepared content to create a positive and supportive group atmosphere.

The content covers a wide range of topics, including spiritual growth, the chakra system, psychology tips, mindfulness promotion, emotional management, physical and mental healing, art appreciation, book sharing, interactive games and so on.

Every time I engage with this content, it is a learning experience, and the process of preparing it is even more profound. The person preparing the content tends to remember it more vividly and absorbs a great deal of knowledge in the process.

我希望自己做志愿者的过程中可以去传递正念和正能量，所以在群里和大家分享的精神也是：每个人任何一刻心中产生的正念，其实都在构建着光明，所以每个个体都非常重要，任何一刻升起的正念都是在对世界做贡献，每一位在群里正在不断学习和成长中的朋友们都值得点赞。

所以当自己在不断去传递这些话语的时候，自己也在不断地生起正念和净化着自己，这对自己来说是非常大的机缘和福报。

参与志愿服务，我也收到了一些反馈，虽然目前的群互动还不算特别多，有些伙伴虽然没有当下互动但是有阅读内容，比如有个小伙伴隔了很久和我说之前看我分享的日签视频，很喜欢其中一幅治愈的配图，深得她心，然后截图保存了；有的小伙伴说每天看群感觉被正能量拂尘了；也有反馈说我很擅长带动氛围的，谢谢认可；还有的说每天看群内容学到了很多东西，有很多很棒的小练习；

有的在交流中碰撞出美好的火花。每一个点点滴滴的反馈都像是宇宙带来的回响，在真实的公益实践中感受到了当下的快乐和涟漪的温暖扩散。

目前ASA每个月都有公益课程的发布，这段时间我还没怎么上过公益课，后面也会更多地去参与和学习，同时继续输出好内容、营造积极互动的群氛围，去陪伴更多人的自我觉察、疗愈与成长。

总结一下做公益实践的心得，就是：

做公益实践看似是帮助他人，实则是帮助自己，你会拥有更快速的成长、更多志同道合的朋友、更打开的喉轮、更多相互照见的心灵瞬间。服务让我们的生命感到更有意义，因为我们创造着自己的生命幸福和丰盛时，我们也正在影响着他人的生命，能支持到他人的幸福和快乐是非常喜悦的。

I hope to spread mindfulness and positive energy through my volunteer work. Therefore, the spirit I share with everyone in the group is: Every moment of mindfulness that arises in anyone's heart is actually building light. Thus, every individual is incredibly important.

Every instance of mindfulness is a contribution to the world, and every precious member in the group who is constantly learning and growing deserves recognition and praise. As I continue to share these messages, I am also constantly cultivating mindfulness and purifying my own mind.

This has been an extraordinary opportunity and blessing for me.

Through participating in volunteer service, I have also received feedback. Although group interactions are not particularly frequent at the moment, some members do read the content even if they do not engage in real-time conversations.

For example, one member approached me after some time and said she loved a healing image in a daily quote video I had shared. It had resonated with her so deeply that she saved a screenshot of it. Others have mentioned that checking the group every day feels like being refreshed by positive energy.

Some have complimented my ability to foster a lively atmosphere, and I am very grateful for that. Others said they learn a lot from the daily group content and appreciate the small exercises. Beautiful sparks of inspiration often emerge during our exchanges.

Every bit of feedback feels like an echo from the universe, allowing me to experience genuine joy in charitable practice and the warm ripple effect it creates.

Currently, ASA releases public-interest courses every month. I have not attended many of these courses yet, but I plan to participate and learn more in the future.

Meanwhile, I will continue to create quality content, foster a positive and interactive group atmosphere, and accompany more people on their journey of self-awareness, healing, and growth.

To summarize my insights from charitable practice:

Engaging in public-interest practice may seem like helping others, but in reality, we are also helping ourselves. You may experience faster personal growth, meet more like-minded friends, find your voice more freely, and share more moments of mutual inspiration.

Service gives our lives a greater sense of purpose: when we create happiness and abundance in our own lives, we also positively influence the lives of others. Being able to support the happiness and joy of others is an incredibly fulfilling experience.

作者信息 / Author Information

作者：九宝
作者简介：正念实践者

Author: Jiubao
Author Bio: Mindfulness practitioner

PART 5:
ASA in Action

栏目五 | 协会纪事

ASA in Action

在茧房与旷野之间：跨文化时代女性的情绪流动与心灵隐喻

Between Cocoon and Wilderness: Emotional Flow and Inner Metaphors of Women in a Cross-Cultural Era

导语

本文以《茧房与旷野》艺术展为观察现场，讨论跨文化时代女性如何在图像、象征与空间中安放情绪。文章也进一步思考艺术如何成为心理支持、社区共鸣与文化表达之间的桥梁。

Lead

Taking Cocoon and Wilderness as its field of observation, this article explores how women in a cross-cultural era place their emotions within images, symbols, and space. It also considers how art can become a bridge between psychological support, community resonance, and cultural expression.

一、当代女性在艺术前落泪：一个时代情绪的显影

展览开幕那天，一个女孩独自站在《界限之外》前。她静静地抬起下颚，闭上眼睛，让蓝紫色的光影在皮肤上沉沉浮动。那一刻，她并非在“观展”，而是在与自己深深处某个被忽略许久的回声重逢。后来我们逐渐意识到，这并非一个孤立的瞬间，而是一个时代女性情绪结构的缩影。

在《茧房与旷野》展期三个月内，超过两万名观众走入这个由蝴蝶、根系、海潮与象征构成的空间。更值得关注的是，83% 的女性在参展前主动做过准备：阅读展览主题、选择与展览色调相呼应的服饰、在社交平台上记录参展后的种种情绪体验。这表明，她们并非只为“视觉觉体验”而来，而是在寻找一个能够承载情绪、理解自我我、并对其生命经验给予回应的场所。

这些女性来自不同的社会位置：学生、内容创作者、创业者、母亲、程序员，也包括离开家乡、迁徙至新城市的“移居者”。她们用极快的速度将情绪投射在作品中，，用极慢的方式试图与生活的伤口和解。正如心理学研究所指出：当社会结构发生剧烈变化时，情绪常常先于语言发生迁移；而艺术恰恰是最能承接这种“迁移性情绪绪”的媒介。

I. When Contemporary Women Weep Before Art:

An Emotional Portrait of Our Time

On the opening day of the exhibition, a young woman stood alone before the painting Beyond the Boundary. She lifted her chin gently, closed her eyes, and allowed the violet-blue light to ripple across her skin like a soft tide.

In that moment, she was not merely “viewing art”—she was meeting a long-forgotten echo within herself. Only later did we realize that this was not an isolated response, but a symbolic reflection of the emotional architecture shared by women of our era.

Over the three-month duration of Cocoon and Wilderness, more than 20,000 visitors stepped into this space woven with butterflies, roots, oceanic rhythms, and psychological symbolism.

Remarkably, 83% of the women reported preparing for their visit: reading about the exhibition themes, choosing outfits that resonated with the color palette, and documenting their feelings on social media.

This behavior tells us that they were not simply seeking a visual experience—they were seeking a place where their stories could be held, where their emotional truth could be received without resistance.

Among these visitors were students, influencers, entrepreneurs, mothers, programmers, and many who had migrated from one city—or one culture—to another.

Their emotions projected onto the artworks instantly, yet their attempts to reconcile with the wounds of daily life unfolded slowly, delicately, and with great care. As psychological research suggests: when a social structure undergoes sudden shifts, emotions migrate faster than language;

and art becomes the vessel most capable of holding those migrating feelings.

尤其是东亚背景的女性，她们长期处于双重文化的挤压：在中国传统家庭中，她们被期待懂事、付出、贤惠；在外部职场中，她们又被鼓励表达、竞争、自信。两套价值体系之间的缝隙，让她们变成一束被拉扯的潮汐，既承受传统的重量，又背负自我实现的渴望。在这种张力之下，艺术展成为一种罕见的容器——无需翻译、无需辩解、无需压抑，情绪就能在图像与光影中完成一次温和的解冻。

正是这种“允许情绪自然发生”的状态，使《茧房与旷野野》不仅成为艺术事件，更成为一个时代女性情绪的显影仪。

二、蝴蝶语言与女性成长：从创伤、关系到自我修复

艺术家 June 的作品中，蝴蝶从不是一个静态的象征。它它是一种流动的生命语言：既来自伤口，也来自愿望；既是破裂的一刻，也是复原的一刻；既代表脆弱的身体，也代表自由的灵魂。它的翅膀并不完美，它从根须、裂缝、深海与光脉中生长出来——像每一个在时代中前行的女性。

在作品《原生》中，纠缠的根系与扭动的蝴蝶形体共同呈现了女性成长中最深层的矛盾：依恋与挣脱、期待与反抗、爱与困惑。许多观众在作品前留下这样的文字：“‘我终于理解了我和母亲的关系。”这恰恰呼应了依恋理理论中的核心观点：成长并非切断关系，而是在不断回望中，找到自我分化与边界的位置。

而在《放手》中，蝴蝶成为爱与自由之间细致而复杂的隐喻。作品下方的互动墙上，观众贴满了关于亲密关系的片段：

“我放手不是因为不爱，而是因为终于懂了爱。”

“愿你自由，也愿我自由。”

This is particularly true for women of East Asian backgrounds, who often live under the weight of dual cultural expectations. In the traditional Chinese family model, women are expected to be considerate, self-sacrificing, and dutiful;

in external workplaces, they are encouraged to be articulate, competitive, and confident. Between these two value systems lies a tense and often painful gap, pulling them like opposing tides—anchored by tradition, yet propelled by a longing for self-actualization.

Within such tension, an art exhibition becomes rare emotional territory—a container where nothing needs to be translated, explained, or softened. Feelings are allowed to thaw in the presence of images and light.

It is this permission for emotion to simply be that transforms Cocoon and Wilderness from an art event into an emotional imaging device for a generation of women.

II. The Language of Butterflies and Women’s Growth:

From Wounds and Relationships to Self-Reconstruction

In June’s artistic universe, the butterfly is never a static symbol. It is a fluid language of becoming—born from wounds and desires, from rupture and restoration. It represents both the fragility of the body and the freedom of the soul.

Its wings are imperfect, growing from roots, fissures, seabeds, and beams of light—much like women navigating the complexities of contemporary life.

In Origin, tangled roots and the twisting butterfly form reveal the central paradox of female development: attachment and separation, expectation and resistance, love and bewilderment. Many visitors wrote beneath this work, “I finally understand my relationship with my mother.”

Their insight echoes a core principle in attachment theory: growth is not achieved through severance, but through finding one’s differentiated self while still acknowledging the past.

In Letting Go, the butterfly becomes a subtle metaphor for love and freedom. Visitors filled the interactive wall with confessions of relational truth:

“I am letting go not because I stopped loving, but because I finally understand what love is.”

“May you be free, and may I be free as well.”

这些文字显示出一种正在发生的情感转向：女性不再以自我牺牲换取关系的稳定，而是以自我完整为前提，重新定义亲密，让爱成为两个主体之间的共振，而非束缚。

蝴蝶是女性生命的缩影：

它不是从完美中诞生，而是从破裂中重生；

不是为展示美丽而存在，而是为证明生长本身就是力量。

June 的作品之所以成为女性情绪的图腾，正因为它们给予观众一种视觉化的心理认知：

原来我可以这样存在，我的生命不必被修正，而可以被书写。

三、艺术作为心理转化机制：ASA 的国际路径与愿愿景

《茧房与旷野》所呈现的情绪能量，早已超出传统艺术展览的边界。它更像是一种“心理流动机制”——作品提提供象征，空间提供安全，他人提供共鸣，而观者在三者之间完成自我整合。这并非心理治疗，却具备心理转化的结构；并非系统课程，却具有集体疗愈的力量。

作为协作机构，ASA 在观展调研中看到了一个重要的趋势：

亚洲女性的情绪需求正在从“压抑式忍耐”转向“意识化表达”，

从“自我指责”转向“自我理解”，

从“孤独奋斗”转向“社区共振”。

这不仅是中国女性的趋势，也是海外亚洲女性共同的心理现实。在澳洲生活的华人女性，同样面临文化差异、价值冲突、迁移压力、语言边界与隐藏创伤。她们在多重身份中不断切换，却难找到可持续的情绪落脚点。正是这一点，使 ASA 清晰地意识到：艺术——尤其是带有心理象征与文化语境的亚洲艺术——将成为跨文化心理支持中不可或缺的一环。

因此，未来 ASA 将致力于：

These messages reveal a shifting emotional consciousness: women are redefining intimacy—not as a sacrifice of self, nor as a site of silent endurance, but as a meeting between two whole beings whose connection depends on resonance, not restraint.

The butterfly is thus a distilled portrait of women’s lives:

It is not born from perfection but from rupture.

Its purpose is not to display beauty but to demonstrate that growth itself is a form of strength.

June’s artworks become emotional totems precisely because they offer a visual form to psychological insight:

I can exist this way. My life does not need correction—it deserves authorship.

III. Art as a Mechanism of Psychological Transformation:

ASA’s International Pathways and Vision

The emotional intensity revealed by Cocoon and Wilderness reaches far beyond the boundaries of conventional art exhibitions.

What emerged was a “psychological flow mechanism”—artworks providing symbols, the space providing safety, and others providing resonance—together enabling viewers to integrate fragmented parts of themselves. This is not psychotherapy, yet it bears the structure of psychological transformation;

it is not a group intervention, yet it carries the power of collective healing.

Through visitor studies, ASA observed a profound shift:

Asian women’s emotional needs are evolving— from suppressed endurance to conscious expression, from self-blame to self-understanding, from solitary survival to community resonance.

This trend is not limited to women in China; it is echoed among Asian women living abroad. Chinese and other Asian women in Australia, for example, face culture shock, shifting values, migration fatigue, language barriers, and hidden trauma.

They move between multiple identities yet struggle to find a lasting emotional anchor. Precisely because of this, ASA recognizes the vital role that art—particularly art grounded in Asian symbolism and cultural nuance—can play in cross-cultural psychological support.

• 在澳洲推动更多亚洲艺术家与心理学家的跨界合作展览；

• 将艺术符号发展为“跨文化情绪教育”的工具；

• 为亚洲女性建立安全、敏感与深度的情绪社群；

• 通过期刊、论坛与公共空间，建立面向全球的亚洲心理叙事；

• 以艺术为桥梁，让不同文化中的女性在共同象征中找到归属。

我们相信，艺术不是治疗，却能让治疗更容易发生；

文化不是障碍，而是疗愈的资源；

一个女性的情绪，就是一个族群时代的回声。

结语：愿你既有茧房，也是旷野

2025年的展览结束了，但女性的心灵旅程才刚刚开始。

愿你在疲惫时能回到茧房，在勇敢时奔向旷野；

愿你在裂缝中看到光，在光里承认你的黑暗；

愿你在两种文化之间，找到第三种身份——属于你自己的那一种。

而 ASA，将继续在世界的旷野之上，为亚洲女性点灯。

Looking ahead, ASA is committed to:

• Supporting cross-disciplinary collaborations between Asian artists and mental-health practitioners in Australia; • Developing artistic symbols into tools for cross-cultural emotional education; • Creating safe and culturally sensitive emotional communities for Asian women;

• Establishing global Asian psychological narratives through journals, forums, and public programming; • Using art as a bridge that allows women from diverse cultures to find connection and belonging through shared symbolism.

We believe that art is not therapy, yet it makes therapy possible.

Culture is not an obstacle—it is a resource for healing.

And a single woman’s emotion is the echo of an entire generation.

Conclusion:

May You Carry Both the Cocoon and the Wilderness Within You

The 2025 exhibition has ended, but the inner journeys of women have only begun.

May you return to the cocoon when you are tired, and run toward the open field when you are brave.

May you find light in your fractures, and the courage to acknowledge your shadows within that light.

May you discover, between cultures, a third identity—one that belongs wholly to you.

And ASA will continue to stand in the world’s open fields, lighting the way for Asian women everywhere.

作者信息 / Author Information

作者：ASA 国际心理疗愈协会

Author: Association of Soulful Asia (ASA)

为心灵洒下光，让成长被听见：一段由公益联结的疗愈旅程

Sprinkling Light on the Heart and Letting Growth Be Heard: A Healing Journey Connected by Public Welfare

导语

本文回顾 ASA 在心理支持、职场指导、艺术疗愈与特殊群体关怀中的公益实践，梳理这些活动如何从现实需求出发，逐步形成以专业、连接和真实获益为核心的社区服务路径。

Lead

This review looks back on ASA's public-interest work across psychological support, career guidance, art-based healing, and care for special communities. It traces how these activities grew from real needs into a service pathway centred on professionalism, connection, and meaningful benefit.

在社会节奏加快、跨文化交流频繁的背景下，复杂的社会竞争与心理需求同步增长。对海外华人而言，文化差异与职场不确定性容易带来孤独感与迷茫。《2024海外华人生活现状报告》显示，37%的人经历不同程度的孤独与职业困惑；与此同时，42% 的应届生与职场新人存在焦虑情绪，超过六成表示缺乏专业求职指导；

孤独症家庭则普遍面临资源匮乏，78% 呼吁获得可靠的康复知识与同伴支持。

ASA 国际心理疗愈协会立足这些刚性需求，摒弃"形式化化公益"，将"参与者真实获益"作为核心价值标尺。秉持秉持"建立跨文化心理支持网络、开展文化交流与心理活活动、推动公益与教育传播"的初衷，2025年 ASA 累计开计开展心理健康公益活动 20 余场，累计参与人数超过 2000 人次。

协会整合心理学、职场规划等专业力量设计公益沙龙，既提供精准支持，也传递"关爱自我、互助成长"的理念念，构建温暖社群，并获得参与者的持续好评。

我们往期的活动聚焦 "心理支持、职场指导、艺术疗愈、特殊关怀"，采用 "线上 + 线下" 形式，具体如下：
：

一、心理支持 × 职场指导：双重赋能破解困境

面对海外华人与年轻职场人同时面临的心理压力与现实困境，ASA重点打造了

"海外华人心理支持 & 职场干货"、"求职指南 & 亚隆团体隆团体体验" 两大品牌项目。

As social rhythms accelerate and cross-cultural exchange becomes more frequent, social competition and psychological needs are growing at the same time. For overseas Chinese communities, cultural difference and career uncertainty can easily lead to loneliness and confusion.

According to the 2024 Report on the Living Conditions of Overseas Chinese, 37% of respondents experienced varying degrees of loneliness and career confusion; meanwhile, 42% of recent graduates and early-career professionals reported anxiety, and more than 60% said they lacked professional career guidance.

Families of children with autism also commonly face a shortage of resources, with 78% calling for reliable rehabilitation knowledge and peer support.

Responding to these concrete needs, Association of Soulful Asia (ASA) rejects performative charity and takes participants' real benefit as its core standard.

Guided by the aim of building a cross-cultural psychological support network, promoting cultural exchange and mental health activities, and advancing public-interest education, ASA organised more than 20 public mental health activities in 2025, reaching over 2,000 participants.

By integrating professional resources in psychology and career planning, ASA designed public-interest salons that offered targeted support, communicated the idea of "caring for oneself and growing together," built a warm community, and received sustained positive feedback from participants.

Past activities have focused on psychological support, career guidance, art healing, and care for special groups, using both online and offline formats.

I. Psychological Support × Career Guidance: Dual Empowerment to Break Through Difficulties

Facing the psychological pressure and real-life challenges experienced by overseas Chinese communities and young professionals, ASA developed two key branded projects: "Psychological Support for Overseas Chinese & Practical Career Guidance" and "Job-Seeking Guide & Yalom Group Experience."

活动邀请心理学专家、资深职场导师深度加入，以“专业讲解 + 真实案例 + 互动答疑”的形式，让参与者同时获得情绪支持与现实技能。

这种“双线并行”的方式打破了“心理支持”和“职场指导”之指导”之间的割裂状态，既能解决实际问题，又能缓和内内在压力，让参与者在“可操作的知识”与“被理解的心”心”之间找到新的平衡。

二、艺术疗愈：用非语言方式释放与觉醒

为了帮助大众在高压生活中恢复身心松弛，我们推出了花艺疗愈、声音疗愈、内在水晶唤醒、情绪解脱法、曼陀罗绘画心理体验五大艺术疗愈项目。

参与者通过“动手创作、听觉放松、能量感知”等非语言言方式，在无需大量表达的前提下，通过创作或感知自然释放情绪，重新感受到内在力量。它为那些“不知道如如何开口”“不善表达”或“处于轻度情绪困扰”的人提供了提供了温柔入口，真正实现“低门槛、高体验”的疗愈效效果。

三、特殊群体关怀：知识普及与互助链接

针对孤独症群体及其家庭的迫切需求，协会联合北京慈善义工联合会心理专业委员会、资深心理咨询师，策划开展孤独症公益专题讲座。

此类活动不仅填补了部分地区孤独症知识普及的空白，更通过 “专业知识 + 同伴互助” 的模式，为特殊家庭搭建搭建了情感支持桥梁，有效减少了他们的孤独感与无助感。

四、每一场活动，都是一颗被埋下的“温暖种子”

往期公益活动的每一场实践，都是ASA 国际心理疗愈协会以“公益传递温暖，以服务助力成长” 的初心践行。我们也始终以 “参与者的真实收获” 为核心衡量标准，希望通过持续优化活动设计与执行，让公益服务 “走得更远、做得更实”。

从海外华人的职场困惑得到解答，到普通大众的情绪压力得以释放，再到孤独症家庭的无助感逐渐消散，参与者的每一句 “有收获”、“有帮助”，都是我们持续前行的行的动力。

作为协会的一员，我们深知公益之路没有终点。未来，我们将继续以 “倾听需求、链接资源、解决问题” 为核心，扩大服务覆盖，让更多人在心理支持中获得勇气，在职场指导中明确方向，在艺术疗愈中找回平静。我们相信，每一场公益活动都是一颗 “温暖的种子”，终会在更多人心中生根发芽，助力大家在成长路上从容前行，也为构建更温暖、更有韧性的社会贡献一份力量。

These activities invited psychology experts and experienced career mentors to participate in depth. Through professional explanations, real case examples, and interactive Q&A sessions, participants were able to receive both emotional support and practical skills.

This “dual-track” approach breaks down the separation between psychological support and career guidance. It helps participants address real problems while also easing internal pressure, allowing them to find a new balance between practical knowledge and the feeling of being understood.

II. Art Healing: Release and Awakening Through Non-Verbal Expression

To help the public recover physical and emotional relaxation under the pressure of modern life, we launched five art healing projects: floral healing, sound healing, inner crystal awakening, emotional freedom techniques, and mandala drawing-based psychological experience.

Through non-verbal methods such as hands-on creation, auditory relaxation, and sensory or energetic awareness, participants were able to release emotions naturally and reconnect with their inner strength without needing to express themselves extensively through words.

These activities provided a gentle entry point for people who “do not know how to begin speaking,” are not good at verbal expression, or are experiencing mild emotional distress.

They were especially suitable for those who find it difficult to express themselves directly, achieving a healing effect that was both accessible and deeply experiential.

III. Support for Special Groups: Knowledge Sharing and Mutual Connection

In response to the urgent needs of children with autism and their families, the association collaborated with the Psychological Professional Committee of the Beijing Charity Volunteers Federation and experienced psychological counsellors to organise public lectures on autism.

These activities not only helped fill gaps in autism-related public education in some areas, but also created an emotional support bridge for families through a model combining professional knowledge and peer mutual support. This effectively reduced their sense of loneliness and helplessness.

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IV. Every Event Is a Warm Seed Planted

Every past public-interest activity has been a practice of Association of Soulful Asia (ASA)'s original mission: to transmit warmth through public good and support growth through service.

We have always taken participants' real gains as the core standard for evaluating our work. Through continuous improvement in event design and implementation, we hope to make our public services go further and become more grounded.

From helping overseas Chinese participants find answers to career confusion, to supporting the public in releasing emotional stress, and to reducing the helplessness felt by families of children with autism, every participant's words—"I gained something" and "this was helpful"—are the driving force that keeps us moving forward.

As members of the association, we deeply understand that the path of public good has no final destination. In the future, we will continue to focus on listening to needs, connecting resources, and solving problems.

We will expand our service coverage so that more people can gain courage through psychological support, find direction through career guidance, and recover calm through art healing.

We believe that every public-interest activity is a warm seed. In time, these seeds will take root and grow in more people's hearts, supporting them to move forward with greater ease on their path of growth, while also contributing to a warmer and more resilient society.

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作者信息 / Author Information

作者：Dione
作者简介：ASA协会运营总监，心理学爱好者

Author: Dione
Author Bio: ASA Operations Director; psychology enthusiast

在语言与文化之间，心理支持如何被真正听见

Between Language and Culture: How Can Psychological Support Truly Be Heard?

导语

本文通过多位 ASA 成员的访谈，回到协会形成的真实脉络：语言如何影响求助，文化如何改变表达，心理支持又如何在跨文化处境中被真正听见、理解并持续实践。

Lead

Through interviews with ASA members, this article returns to the lived context from which the association emerged: how language shapes help-seeking, how culture changes expression, and how psychological support can be heard, understood, and sustained across cultures.

01 | 为什么跨文化心理支持需要被真正听见

在跨文化迁移和生活节奏不断加快的今天，心理健康逐渐从私人议题走向公共讨论。可对许多身处海外或跨文化处境中的华人来说，心理困扰往往不是由某一件大事突然引发的，而是在语言切换、文化期待、家庭责任和自我定位的拉扯中，一点点积累起来。

很多时候，人们并不会直接说“我很难受”，而是先表现现为失眠、焦虑、躯体不适，或者一种说不清的疲惫和内耗。现有心理支持体系虽然越来越成熟，但在面对这些和语言、文化、现实处境紧密相关的经验时，仍然不一定总能贴得很近。

ASA 国际心理疗愈协会，正是在这样的背景下慢慢形成。它的出现，不只是因为大家觉得资源不够，更是因为很多人在自己的经历里都感受到：有时候，不是不想求助，而是不知道该怎么说，也不知道说了以后会不会被真正听懂。

从创办者、疗愈实践者、心理工作者，到后来加入的志愿者和不同背景的成员，ASA 聚集了许多不同路径的人。但大家反复提到的，其实是同一个问题：在跨文化处境中，能不能有一种更容易靠近、也更容易被理解的支持方式？

02 | TA们如何走到一起?

回看 ASA 的形成，很难说它是从某一个明确时刻开始的。

01 | Why Cross-Cultural Psychological Support Needs to Be Heard

As cross-cultural migration and daily life both accelerate, mental health is gradually moving from private concern into public discussion. Distress among many Chinese people overseas or in cross-cultural settings is rarely caused by one dramatic event.

It often builds through language switching, cultural expectations, family responsibility, and the search for one's place.

People may not say, "I am struggling." Distress may first appear as insomnia, anxiety, physical discomfort, or a vague exhaustion. Although support systems are becoming more mature, they do not always sit close enough to experiences shaped by language, culture, and real-life circumstances.

Association of Soulful Asia (ASA) gradually formed in this context. It emerged not only because resources felt insufficient, but because many people recognised the same difficulty: sometimes they want help, but do not know how to say what is happening, or whether they will be truly understood.

From founders, healing practitioners, and mental health workers to volunteers and members from different backgrounds, ASA brought together people from many paths. The question they kept naming was the same: in cross-cultural life, can support become easier to approach and easier to understand?

02 | How Did They Come Together?

Looking back, it is hard to say that ASA began at one exact moment.

For Elena, the first motivation was simple: she wanted to provide Chinese people living abroad with a space where psychological support felt easier to reach and where people could feel a stronger sense of belonging.

对 Elena 来说，最初的动力很简单：她希望为身处异国的华人，提供一个更容易接触心理支持、也更有归属感的空间。几位核心成员在交流中慢慢发现，彼此的价值判断很接近，而每个人又都带着不同的经验和能力。“各有所长、一拍即合”，成了 ASA 最早的基础。

作为创始人，June 更早感受到其中的现实问题。她提到，尽管澳洲已有面向多元文化社群的心理健康资源，但对于许多亚洲背景群体来说，语言、文化理解和实际可及性之间仍然存在落差。正是初到澳洲时经历过语言焦虑和身份迷茫，她才越来越意识到，这不是某一个人的困境，而是一类真实存在的需要。

Stella 回忆，自己最初是通过参与 June 的线上曼陀罗分享课程，慢慢走近 ASA 的。她不是以“被帮助者”的身份份加入，而是在看见这件事的公益价值后，决定把自己的经验投入进来。在她看来，这是一件值得长期做下去的事。

Ligsley 对 ASA 的印象，则更像一颗正在发芽的种子。她她记得自己在参与过程中，看见一些疗愈师从“紧张到发发抖”，到后来慢慢稳定下来，终于敢站出来表达。也因因此，她反复提到“真诚”——无论是做事的初衷，还是是彼此合作时的尊重，都很重要。

予昕则是在偶然看到协会介绍后，被“面向全球华人的非非营利心理疗愈组织”这一定位吸引的。她想到自己和身身边朋友在留学时期经历过的跨文化适应、语言隔阂和社会压力：很多时候只能自己扛着，却缺少一个真正能被理解的出口。

Caroline 从自身焦虑躯体化的经历出发，被 ASA 提供的的无偿、开放式公益课程所打动。阿King 则从医疗与康复实践的角度，更关注陪伴、支撑与规范化，希望疗愈实践能够更科学、更系统。

ASA 不是按照某一条清晰规划诞生的。它更像是一些人在不同人生阶段，因为相似的体会而慢慢走到了一起。

03 | 被反复提及的“空白”：在经验之间浮现的共同问题

当不同成员回看 ASA 的成立时，大家反复提到的，其实都是一些很具体的“空白”。

As several core members talked, they found that their values were close, while each person brought different experience and ability. This became ASA's earliest foundation.

As the founder, June had felt this need earlier. She noted that Australia already has mental health resources for multicultural communities, yet many Asian-background groups still face gaps in language, cultural understanding, and practical access.

Her own early experience of language anxiety and identity confusion in Australia helped her see that this was not one person's difficulty, but a real and recurring need.

Stella first came closer to ASA through June's online mandala sharing course. She did not join as someone being helped; after seeing the public value of the work, she decided to contribute her own experience. Ligsley saw ASA as a seed beginning to sprout.

She remembered seeing practitioners move from trembling with nervousness to becoming steadier and able to speak, which is why she often returned to the word "sincerity. "

Yuxin was drawn in by ASA's positioning as a non-profit psychological healing organisation for Chinese communities around the world. It reminded her of the cross-cultural adjustment, language barriers, and social pressure she and her friends had experienced while studying abroad.

Caroline was moved by ASA's free and open public courses. Ah King, from medical and rehabilitation practice, cared about companionship, support, and structure, hoping that healing practice could become more scientific and systematic.

ASA was not born from a neat plan. It was a gradual gathering of people who recognised something familiar in one another's experience.

03 | The Repeatedly Mentioned "Gap"

When members looked back on ASA's founding, they repeatedly mentioned concrete gaps.

First is the gap between language and emotional expression. Elena felt that even in one's first language, it can be difficult to describe feelings accurately; in a second-language setting, it is even harder. The question is not only "Can I say it?" but "Will someone truly understand after I say it?"

Second is the misunderstanding created by cultural difference. Yuxin described friends adapting to Western standards of competition while also carrying Chinese family expectations around responsibility. This long-term tension can turn emotion into physical discomfort before it is spoken.

首先，是语言和情绪表达之间的空白。Elena 觉得，即使在母语环境中，人们有时都很难准确说出自己的感受，更不用说在非母语语境中讨论心理困扰了。很多时候，问题不只是“能不能说”，而是“说出来以后，会不会有人真正听懂”。

其次，是文化差异带来的理解偏差。予昕提到，她看到过身边的朋友一边努力适应西方社会的竞争标准，一边又在家庭中承担华人文化期待的责任。这样的长期拉扯，会让很多情绪先变成身体的不舒服，却很难被直接谈出来。Stella 也提到，海内外华人、国际学生和新移民面面对的问题往往更复杂，因此也更需要贴近处境的支持方式。

还有一个现实问题，是很多人并不容易及时接触到心理支持。Caroline 注意到，对不少人来说，相关知识、服务和求助路径仍然有门槛。而 ASA 提供的无偿、开放式课程，至少让更多人有机会先走近这件事，先开始了解，再决定是否继续往下走。

阿King 更提醒大家，“治疗”和“疗愈”并不是完全一样的样的事情。疗愈更强调陪伴、支撑和过程，因此也需要更稳定的交流和更基本的规范。毛燕则从咨询和团队管理的角度补充说，心理健康不只是专业人士的事情，它也需要更多人的参与和投入。

ASA 所回应的，并不是一个单一问题，而是一种在很多人经验里都真实存在的距离：想说，却不容易说；想求助，却不一定找得到合适的方式。

04 | 当经验难以被翻译：跨文化处境中的真实时刻

谈到跨文化处境对心理状态的影响时，多位成员都提到了类似的感受：这些困境往往不是一下子出现的，而是在长期适应、迁移和自我调整的过程中，一点点累积起来的。

很多时候，它们并不会直接表现为清晰的情绪语言，而是先变成失眠、焦虑、躯体不适，或者一种持续的疲惫感。跨文化生活本身就伴随着误解和张力，而当这种张力再叠加工作压力、生活压力和身份变化时，心理困扰很容易变成一种“明明存在，却很少被认真谈起”的状态态。

Stella also noted that overseas Chinese communities, international students, and new migrants often face more complex situations and need support close to their actual context.

There is also the practical problem of access. Caroline noticed that knowledge, services, and help-seeking pathways still have thresholds for many people. ASA's free and open courses at least allow more people to come closer, begin to understand, and then decide whether to continue.

Ah King reminded everyone that "treatment" and "healing" are not exactly the same. Healing places more emphasis on companionship, support, and process, and therefore needs stable communication and basic structure.

From counselling and team management, Mao Yan added that mental health is not only the work of professionals and also needs broader participation.

ASA is responding not to one single problem, but to a distance found in many lives: wanting to speak, but finding it hard to speak; wanting help, but not always knowing where to find a suitable path.

04 | When Experience Is Difficult to Translate

When discussing cross-cultural life and mental health, several members described a similar feeling: these difficulties rarely appear all at once. They accumulate slowly through adaptation, migration, and self-adjustment.

They often do not first appear as clear emotional language. They become insomnia, anxiety, physical discomfort, or ongoing fatigue. When cultural tension is layered with work pressure, life pressure, and identity changes, distress can become something that clearly exists but is rarely discussed seriously.

Elena said that even in one's first language, people can misunderstand one another, let alone when moving between languages and cultures. What matters is not only professional knowledge, but also the patience to understand another person's situation.

This "hard to explain" state is especially visible among international students and new migrants. Yuxin saw friends adapting to Western competition while also carrying Chinese cultural expectations around responsibility and family roles.

Elena 提到，即使在母语环境里，人和人之间也会彼此误解，更不用说在不同语言和文化之间来回切换时。她觉得，真正重要的，不只是专业知识，而是一种愿意花时间去理解对方处境的耐心。

这种“很难说清楚”的状态，在留学生和新移民群体中尤尤其明显。予昕回忆，自己曾看到身边的朋友一边适应西方社会的竞争逻辑，一边又在家庭中承接着华人文化对责任与角色的期待。这样的双重要求，让很多情绪最后只能通过“睡不着了”“头疼了”这样的方式表达出来。来。

Stella 也意识到，这种迷茫并不是某一个人的特殊问题，，而是很多人在快速变化的社会节奏中都会经历的心理现实。阿King 则观察到，相比于更外显地表达情绪，很多中国人更习惯把感受往内收、往内消化，这也使得他们的心理需求更容易被忽略。

ASA 的意义，也正是在这些具体、零散，却真实的经验里慢慢显现出来。它并不能解决所有问题，但它至少尝试提供一个空间，让这些本来不容易被说出的感受，有机会被说出来，也被认真地听见。

05 | 共同愿景：当未来不再只是口号

在谈到 ASA 的未来时，成员们说得最多的，其实不是多宏大的目标，而是一些很具体的期待。

有人希望它能成为一座桥，让语言和文化不再成为人们求助时最先碰到的障碍；也有人希望它能把原本分散的人和经验慢慢连接起来，让那些原本不好开口的处境，有地方被听见。

Caroline 关心的是，心理支持能不能离普通人的生活更近一点。阿King 在意的是，这件事如果要长期做下去，就不能只靠热情，还需要方法、规范和跨领域合作。毛燕更关心的是，怎样把事情真正做下去，而不是停留在想法上。

这些想法放在一起，构成的并不是一句口号，而是一种很朴素的愿望：希望在现有支持之外，再多一个真实、稳定、有人在认真维护的空间。

也许 ASA 还在生长，也还有很多事情需要慢慢去做。但对很多人来说，能够知道有这样一个地方存在，本身就已经很重要。

Under this double demand, many emotions could only be expressed as "I cannot sleep" or "I have a headache. "

Stella realised that this confusion is not one person's special problem, but a psychological reality many people face in a fast-changing society. Ah King observed that many Chinese people are used to turning feelings inward and digesting them privately, which makes their needs easier to overlook.

ASA's meaning gradually appears through these concrete, scattered, real experiences. It cannot solve every problem, but it offers a space where feelings that are difficult to express can be spoken and carefully heard.

05 | A Shared Vision

When members spoke about ASA's future, they mentioned concrete hopes more than grand goals.

Some hope it can become a bridge, so that language and culture are no longer the first barriers to seeking help. Others hope it can connect scattered people and experiences, giving difficult situations a place to be heard.

Caroline cares whether psychological support can move closer to ordinary life. Ah King believes long-term work needs more than enthusiasm: it also needs methods, structure, and cross-disciplinary collaboration. Mao Yan cares about how to keep the work going in practice, rather than leaving it as an idea.

Together, these thoughts are not a slogan, but a simple wish: beyond existing forms of support, there can be one more space that is real, stable, and carefully maintained.

ASA is still growing, and many things need to be done slowly. But for many people, knowing that such a place exists already matters.

作者信息 / Author Information

作者：周润
作者简介：ASA编辑部志愿者

Author: Zhou Run
Author Bio: ASA Editorial Department volunteer

ASSOCIATION OF
SOULFUL ASIA

Association of Soulful Asia (ASA) is a Sydney-based not-for-profit organisation supporting East Asian and multicultural communities through mental health education, art-based healing, and cross-cultural exchange.

Contact: op@soulfulasia.org
website: soulfulasia.org

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