



### **Mental Health and Depression in Asian Americans**

- Three decades of research on mental health show that Asian Americans exhibit high numbers of depressive symptoms as well as confounding factors such as war experiences, abuse, and stress.
- Of reported data, Asian American women over the age of 65 have the highest female suicide mortality rate among women across all racial/ethnic groups.<sup>1</sup> Among women aged 15 – 24, Asian American girls have the highest suicide mortality rates across all racial/ethnic groups.<sup>2</sup>
- Asian American adolescent girls have the highest rates of depressive symptoms of all racial/ethnic and gender groups.<sup>3</sup>
- Asian American college students report higher levels of depressive symptoms than white students.<sup>4</sup>
- Asian American adolescent boys are twice as likely as whites to have been physically abused, and three times as likely to report sexual abuse.<sup>5</sup>
- Asian Americans have the lowest utilization for mental health services and are more likely to have psychotic diagnoses in inpatient and outpatient settings. Studies further show that Asian Americans have greater disturbance levels than do non-Asian clients.<sup>6</sup>

### **Mental Health and Depression in Asian Americans– Specific Subgroups**

- Chinese, Filipino, Japanese, and Korean immigrants consistently report higher numbers of depressive symptoms than whites.<sup>7</sup>
- Studies show that Chinese Americans have a lifetime prevalence rate of major depression as high as 17%, with 10% reporting a major depression within the past year.<sup>8</sup>
- 71% of Southeast Asians meet the criteria for a major affective disorder (which includes depression), with Hmong (85%) and Cambodians (81%) showing the highest rates.<sup>9</sup> Moreover, 70% of Southeast Asian refugees are found to have post-traumatic stress disorder.<sup>10</sup>

### **General Facts about Depression**

- Major depression refers to a group of symptoms that can be debilitating. It is diagnosed by the presence of several symptoms such as depressed mood, lack of interest in activities, significant weight loss or gain, thoughts of worthlessness or guilt, or thoughts of death or suicide.
- By the year 2020, depression will be the second largest disease burden in the world.<sup>11</sup> It currently ranks third in mortality and lost workdays.<sup>12</sup>
- Approximately 17% of adults report having a major depressive episode at least once in their lifetime. Ten percent of Americans currently suffer from depression.<sup>13</sup>

### **Asian American and Pacific Islander Demographics**

- The numbers of Asian Americans and Pacific Islanders in the United States grew to more than 10.6 million in 2000, comprising approximately 3.7% of the total United States population.<sup>14</sup>
- Nearly 2/3 of the Asian American and Pacific Islander population is foreign-born. Individuals in this population represent over 50 national and ethnic origins.<sup>15</sup>

- Approximately 14% of the Asian American and Pacific Islander population lived in poverty in 1989, but the rates vary according to ethnic group, from 65% of Hmong living in poverty to less than 10% of Japanese Americans.<sup>16</sup>
- Of Asian American and Pacific Islander women, 15.7% lack any type of health care plan.<sup>17</sup>

### **Barriers to Mental Health Education and Services**

- Asian Americans suffer from the widespread misperception that they are a “model,” healthy minority. This stereotype presents a false picture of their mental and physical health, thereby limiting education, prevention, and treatment efforts for depression to this community.
- As a largely immigrant and refugee population, Asian Americans face economic and language barriers that prevent them from accessing health care, making them more vulnerable to advanced depression and other mental health disorders. The presence of stress for Asian Americans related to immigration and acculturation may also be a factor in developing depression. For example, suicide rates are higher for foreign-born Asian Americans than for American-born Asian Americans.<sup>18</sup>
- Cultural values regarding health care, disease, and family honor place psychological constraints on Asian Americans from accessing mental health services. Mental health and depression are often stigmatized by families or communities, preventing Asian Americans from seeking care.

<sup>1</sup> Centers for Disease Control and Prevention, National Center for Health Statistics, *Health, United States 2001*. Hyattsville, MD: US Public Health Service, 2001.

<sup>2</sup> Centers for Disease Control and Prevention, National Center for Health Statistics, *Health, United States 2001*. Hyattsville, MD: US Public Health Service, 2001.

<sup>3</sup> Schoen C, et al. *The Commonwealth Fund Survey of the Health of Adolescent Girls*. Louis Harris and Associates, Inc. New York, NY, 1997.

<sup>4</sup> Liu W, Yu EH, Chang C, Fernandez M. “The mental health of Asian American teenagers: A research challenge.” In Stiffman AR, Davis LE (Eds.), *Ethnic Issues in Adolescent Mental Health* (pp. 92-112).

<sup>5</sup> Schoen C, et al. *The Health of Adolescent Boys: Commonwealth Fund Survey Findings*. Louis Harris and Associates, Inc. New York, NY, 1998.

<sup>6</sup> Sue, S. “Mental Health.” In *Confronting Critical Health Issues of Asian and Pacific Islander Americans*, ed. Zane, N Takeuchi, D Young, K. Los Angeles, CA: 1994.

<sup>7</sup> Hurh WM, Kim KC. “Uprooting and Adjustment: A Sociological Study of Korean Immigrants’ Mental Health.” Macomb, IL: Western Illinois University, 1988.

<sup>8</sup> Kessler RC, McGonagle KA, Zhao S, Nelson CB, Hughes M, Eshleman S, Wittchen H, Kendler KS. “Lifetime and 12-month prevalence of DSM-III-R psychiatric disorders in the United States.” *Archives of General Psychiatry*, 1994;51:8-19.

<sup>9</sup> Sue DW, Frank A. “A typological approach to the psychosocial study of Chinese and Japanese American college males.” *Journal of Social Issues*, 1973, 20:142-148.

<sup>10</sup> Kinzie, JD, et al. “The Prevalence of Posttraumatic Stress Disorder and its Clinical Significance Among Southeast Asian Refugees.” *American Journal of Psychiatry* 147, no.7 (1990): 913-7.

<sup>11</sup> World Health Organization. *Global Burden of Disease*. Boston: World Health Organization, 1996.

<sup>12</sup> Ibid.

<sup>13</sup> Kessler RC, 1994.

<sup>14</sup> United States Census Bureau. 2000 Census, 2001.

<sup>15</sup> United States Census Bureau. 1990 Census, 1998.

<sup>16</sup> Ong, P. *The State of Asian American America: Economic Diversity, Issues, and Policies*. Los Angeles: LEAP, 1994.

<sup>17</sup> Centers for Disease Control and Prevention. *Chronic Disease in Minority Populations*. Atlanta: Centers for Disease Control and Prevention, 1992.

<sup>18</sup> Schoen C, et al. 1998.