



## Washington State Commission on Asian Pacific American Affairs

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Let's talk about Asian American and Pacific Islander mental health

By Michael Itti and Diane Narasaki

One in five adults in America experiences depression, bipolar disorder, anxiety, or some other form of mental illness in the course of a year. Whether it is a friend, a colleague, or a family member, someone you know is experiencing a mental health disorder.

The Commission on Asian Pacific American Affairs (CAPAA) and Asian Counseling and Referral Service (ACRS) have teamed up during Minority Mental Health Awareness Month in Washington State to get our communities talking about mental health and well-being.

CAPAA convened a recent public meeting in Bremerton to have a conversation with practitioners and community members about providing culturally competent mental health care to Asian Pacific Islanders (APIs) and recent immigrants and refugees. Stories emerged about military families dealing with post-traumatic stress disorder; new immigrants experiencing depression due to isolation; and school staff expressing the urgency for behavioral health support for students.

Talking about mental health is important. People with serious mental health problems die an average of 25 years earlier than the general population due to related health conditions. APIs are less likely to seek treatment for mental health services than all other ethnic groups according to a 2011 report by the National Alliance on Mental Illness (NAMI). Due to social stigmas, cultural and language barriers, and lack of access to health care, mental illnesses among APIs remain highly undiagnosed, untreated, and undiscussed.

The NAMI report shows troubling consequences nationally for APIs: Suicide remains one of the top five leading causes of death for APIs. Among women over age 65, Asian American women have the highest suicide rate. According to the National Asian American Pacific Islander Mental Health Association (NAAPIMHA), young Asian American women have the highest rates of depressive symptoms and suicide ideation for their age group. Native Hawaiians and Pacific Islanders had proportionally the most suicides in Honolulu. Due to war time trauma, cultural dislocation, racism, poverty and other environmental reasons, nearly three-quarters of Southeast Asians reportedly meet the criteria for an affective disorder, which includes depression, anxiety, and post-traumatic stress disorder, with high percentages among Cambodians and Vietnamese.

In Washington alone, there are over 670,000 APIs. A close examination of this population reveals the diverse makeup of this number: many are refugees, many are first generation immigrants, many speak a language other than English as their primary language, and many have multi-generational roots as Asian-Americans. And while APIs celebrate our diversity, these differences mean that there are complexities when it comes to providing appropriate behavioral health services.

ACRS is a nationally recognized nonprofit organization offering a broad array of culturally and linguistically competent behavioral health and human services to APIs in King County. ACRS's publicly supported and holistic behavioral health program at its Seattle facility incorporates Eastern and Western approaches and helps over 2,000 APIs of all ages in over 18 languages and dialects a year to live meaningful lives in spite of mental illness. Services are provided by bilingual/bicultural case managers, counselors, psychiatrists, psychologists, nurse practitioners, wellness, supported employment and housing staff, as well as through an onsite acupuncture clinic in partnership with Seattle Institute of Oriental Medicine, primary care services in partnership with International Community Health Services, and dental services through Medical Team International's mobile van. Wellness groups include tai chi, yoga, Zumba dance, gardening, walking, dance and healthy cooking, among others. Services are also provided at schools, nursing homes, and other sites. Additionally, ACRS has a program in Bellevue, ACRS Therapy Associates, which offers services in five languages for clients who have insurance coverage or wish to cover their own services.

While organizations like ACRS demonstrate the effectiveness of culturally competent and linguistically accessible mental health, integrated care, and wraparound services, disparities in best practices and mental health services continue to persist on a broad scale. Existing data on mental health often fails to capture the differences among sub-ethnic groups due to lack of data disaggregation, many populations are underreported, and the importance of cultural competency in data collection and mental health diagnoses and treatment is often discounted. At the institutional level, it is imperative that health officials recognize the importance of addressing these discrepancies in order to improve the current behavioral health care landscape.

Along with physical health, mental health contributes to the overall functioning of daily activities such as socializing, learning, and working. As the federal Substance Abuse Mental Health Services Administration says, behavioral health is essential to health, prevention works, treatment is effective, and people recover. As we move forward with the month of July, let's consider the importance of mental well-being for everyone in the community.

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For more information and resources:

Asian Counseling and Referral Service [www.acrs.org](http://www.acrs.org)

Commission on Asian Pacific American Affairs: [www.capaa.wa.gov](http://www.capaa.wa.gov)

National Alliance on Mental Illness: [www.nami.org](http://www.nami.org)

National Asian American Pacific Islander Mental Health Association: [www.naapimha.org](http://www.naapimha.org)

Governor's Interagency Council on Health Disparities: [www.healthequity.wa.gov](http://www.healthequity.wa.gov)