

Breaking Silences in the Model Minority: A national intervention to increase mental health awareness and decrease stigma in Asian immigrant families

Cohort:
2020-2023

Team Members:
(Lily) Jian Chen, RN, MA, CNE
Juliana Chen, MD
Justin Chen, MD, MPH
Weiyang Xie, PhD, HSPP

Location:
Washington D.C.

Focus Areas:
Behavioral and Mental Health
Immigrants & Refugees



**CLINICAL
SCHOLARS**

Short Project Summary

Our project tackles the problem of mental health and suicide in Chinese immigrant families. Although Asian American youth are often stereotyped as a uniformly well-educated and successful “model minority,” they are at high risk of depression and suicide. Parents often want to help, but face barriers including communication and language challenges, lack of awareness, and stigma of mental health issues and treatment. Our team will develop and disseminate culturally tailored, evidence-informed, and scalable programs and tools focused on mental health awareness, stigma reduction, and help-seeking that decrease suicide risk and directly empower Asian immigrant families to live their healthiest lives. Strategies at the individual level will focus on destigmatization and education. Strategies at the family level will focus on improving parenting skills and practices, including parent-child communication. Community-level strategies will focus on building national networks and resources, including a national provider directory, in partnership with school districts and community organizations throughout the country. While the primary focus of the

current project is Chinese immigrant families, we anticipate that the programs, tools, and models developed can be adapted for other Asian and minority communities.

Wicked Problem Description

The so-called “model minority” is suffering - and dying - in silence. Despite being stereotyped as uniformly well-educated and successful, Asian American youths actually have higher rates of suicidal thoughts and attempts compared to most other racial/ethnic groups. They also have more internalizing symptoms, more peer victimization, and lower self-esteem compared to their White counterparts.

Yet Asian Americans are among the least likely of all racial groups to utilize mental health services. When they do seek counseling, they are more likely to perceive the treatment they receive as unhelpful and to experience less improvement than Whites. This is in part due to deeply rooted stigma against talking about mental health problems. Many Asian American students are raised in cultures that emphasize emotion inhibition and “saving face,” and downplay suffering from negative emotions. Asian immigrant parents similarly report lacking the skills and tools to communicate well with their American-born children. As a result, students are often left to struggle on their own, sometimes with tragic consequences.

Our Wicked Problem reveals that young Asian Americans are suffering from mental health problems in silence due to unique familial, cultural, and societal challenges. This calls for an urgent need to create and disseminate culturally informed programs to raise awareness and knowledge of mental health and improve access to culturally appropriate resources for Asian American students from immigrant families.

Proposed Project Plan

We propose to tackle this wicked problem by developing and disseminating culturally tailored, evidence-informed, and scalable programs and tools focused on mental health awareness, stigma reduction, and help-seeking that directly empower Asian immigrant families to live their healthiest lives. This project primarily focuses on Chinese immigrant families, but the results can likely be adapted to impact other Asian and minority communities.

1. Individual level: Destigmatize and educate about mental health problems
 - a. Create accessible, high-quality, culturally tailored, fact sheets about common mental health topics affecting the Asian American community
 - b. Create a website to serve as a central hub to coordinate resources and efforts, including a new national provider database
2. Familial level: Improve parenting practices, effective communication skills, and ability to address mental health topics
 - a. Create/disseminate a culturally informed bilingual parenting education program

- b. Create/disseminate a video-based intervention and toolkit to improve effective communication skills, empathy, and knowledge of identity development and mental health
3. Community level: Connect key stakeholders, target geographically distributed areas with large populations of Chinese immigrant families, and create a national infrastructure to coordinate efforts and ensure sustainability
 - a. Collaborate with local school districts and community organizations to develop and disseminate best practices
 - b. Develop youth and parent leadership councils
 - c. Implement in-person interactive conversations and conferences with families
 - d. Launch a mental health-focused social media effort

Anticipated Outcomes

Short-term outcomes: See specific objectives below. Short-term outcomes will focus on successful completion of key deliverables during the fellowship period, including:

- multilingual fact sheets
- youth leadership council/youth ambassador group
- parenting leadership council/parent ambassador group
- video-based skills-focused toolkits Asian immigrant parents focused on improving parent-child communication and knowledge of emotional support
- national database of clinicians skilled in cross-cultural treatment
- 2 conferences with families throughout the country
- mental health-focused social media effort

Long-term outcomes: We hope that our interventions will result in the following long-term outcomes:

- Increased mental health awareness/knowledge
- Increased access to culturally sensitive mental health services
- Increased empowerment/skills of families and communities
- Increased positive parent-child communication/interaction

Timeline

Timeline	Goals/Outcomes	Objectives
Year 1	Goal 1: Increased mental health awareness/knowledge	Create multilingual fact sheets about mental health issues including suicide prevention
	Goal 3: Increased empowerment/skills of families and communities	1: Develop a youth leadership council/youth ambassador group 2: Develop a parenting leadership council/parent ambassador group
Year 2	Goal 3: Increased empowerment/skills of families and communities	Develop and disseminate best practices and toolkits for supporting Asian American students with one local school district
	Goal 2: Increased access to culturally sensitive mental health services	Create a national database of licensed clinicians interested and skilled in cross-cultural mental health treatment
	Goal 4: Increased positive parent-child communication/interaction	Create a culturally informed bilingual parenting education program using educational webinars
Year 3	Goal 1: Increased mental health awareness/knowledge	Create a video-based skills-focused intervention and toolkit that can be delivered nationwide
During the award period	Goal 3: Increased empowerment/skills of families and communities	1: Hold in-person interactive conversations/conferences with parents and families throughout the country 2: Launch a mental health-focused social media effort

Partnerships

We have formed robust partnerships with community organizations around the country, including: NYU Silver School of Social Work's PEARL Institute, UCA Illinois Chapter, UCA Washington Chapter/Bellevue School District, UCA Nevada Chapter, UCA Wisconsin Chapter, UCA San Francisco, Brookline Community Foundation (MA), Lexington Youth and Family Services (MA), and other community partners and organizations in Ohio, St. Louis, and New Jersey.

Evaluation Strategies

We plan to evaluate changes in knowledge, skills, and attitudes attributed to the project. On the knowledge level, we plan to assess changes in parenting styles, changes in scores on pre-post surveys measuring awareness and confidence. On the skills level, we plan to engage in observed interaction, self-report of confidence/likelihood to have conversations about difficult topics. On the attitudes level, we plan to conduct pre-post surveys regarding beliefs about the importance of emotional wellness, identity development, and communication. We will also engage in procedural measures assessing the number of people and cities reached using each intervention, the number of webinars or in-person group outreach opportunities, and web analytics of engagement.

Contact Person Information

Name: (Lily) Jian Chen, RN, MA, CNE
Title: Senior Advisor
Dept/Unit/Office:
Organization: United Chinese Americans (UCA)
Email: lily.chen@ucausa.org