



APAOC's Efforts in Promoting Youth Mental Health in Asian American, Native Hawaiian, and Pacific Islander (AANHPI or AAPI) Populations



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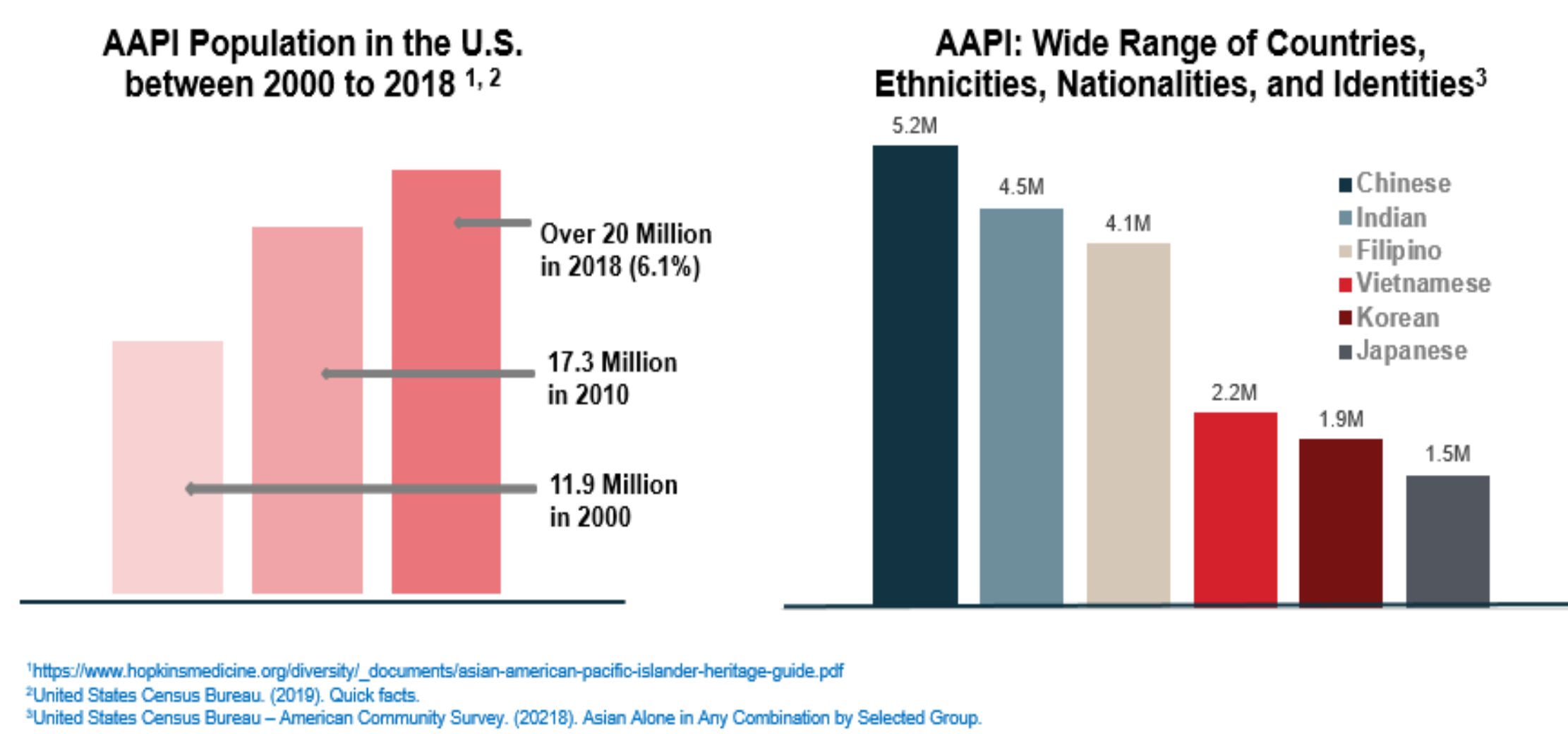
Background

There has been a significant increase in mental health disorders in youth compared to any other age group, including depression, anxiety, and suicidal ideation. In 2020, out of 1.5 million people who took a survey and accessed resources through the Mental Health America Online Screening Program, over half of 11 to 17-year-olds reported having thoughts of suicide or self-harm more than half or nearly every day in a span of two weeks. Suicide is the leading cause of death in youth among AANHPI in U.S. To tackle this public health crisis, the Surgeon General (SG) issued the 2021 Advisory on Protecting Youth Mental Health. Given the complexity and urgency of the situation, particularly in minorities, healthcare collaboration is imperative. The Asian Pacific American Officers Committee (APAOC) has taken steps to build "the village" of federal, community, and advocacy resources for our youth.

Introduction

According to the U.S. Census, the AANHPI population in the U.S. is the fastest growing race group and is comprised of wide range of countries, ethnicities, nationalities, and identities.¹ In 2018, over 20 million people living in the United States identify as AANHPI, representing 6.1% of the total U.S. population.²

AAPI Demographics in the U.S.



The Asian Pacific American Officers Committee (APAOC) was established in 1990 and chartered in 1993. APAOC is a diverse Asian Pacific American group, representing ancestral roots from many countries in Asia and Pacific Islands. APAOC's mission is to provide advice and consultation to the Office of the Surgeon General (OSG) on issues of interest and concerns of APAOC officers and the AANHPI community. In addition, APAOC provides support for OSG's initiatives, opportunities for professional development and community outreach, and a network of support for APAOC members.

Mental Health Impact in AANHPI Community

In more recent years, the rate of Asian Americans developing mental illness and other mental health issues has been steadily on the rise. According to a 2018 National survey from the Substance Abuse and Mental Health Services Administration:⁴

- Serious mental illness rose from 2.9% (47K) to 5.6% (136K) in AANHPI population ages 18 to 25 between 2008 and 2018
- Major depressive episodes increased from 3.2% (224K) to 5.0% (388K) in AANHPI population ages 26 to 49 between 2015 and 2018
- Major depressive episodes with severe impairment rose from 6.1% (81K) to 9.4% (140K) in AANHPI population ages 12 to 17 between 2015 and 2018
- Serious suicidal thoughts, plans, and attempts have also risen among AANHPI young adults (18 to 25) between 2008 and 2018

It's a concerning reality that suicide is the first/second leading cause of death among AANHPI youth, comparing to being second/third cause of death for American youth.⁵

Leading Causes of Death, United States - 2020, Both Sexes

Age Group	All Races				AANHPI			
	10-14	15-19	20-24	25-34	10-14	15-19	20-24	25-34
1	Unintentional Injury 38.2%	Unintentional Injury 45.3%	Unintentional Injury 53.6%	Unintentional Injury 57.5%	Suicide 30.7%	Suicide 42.6%	Unintentional Injury 44.7%	Unintentional Injury 41.7%
2	Suicide 25.2%	Homicide 25.0%	Homicide 19.9%	Suicide 15.5%	Unintentional Injury 25.3**	Unintentional Injury 36.1%	Suicide 32.7%	Suicide 25.3%
3	Malignant Neoplasms 17.8%	Suicide 21.5%	Suicide 19.7%	Homicide 13.1%	Malignant Neoplasms 24.0**	Malignant Neoplasms 11.5%	Homicide 8.4%	Malignant Neoplasms 14.0%

CDC WISQARS™ - Web-based Injury Statistics Query and Reporting System. Retrieved on Dec 14, 2022. https://www.cdc.gov/injury/wisqars/

Mental Health Disparities in AANHPI Community

Impacts of social determinants of health on mental health disparities in AANHPI community

- **Healthcare Access and Quality**
 - 7.4 % of Asian Americans and 9.4 % of Pacific Islanders do not have health insurance⁶
- **Education Access and Quality**
 - Language barriers
 - 30.9 % of Asian American do not speak English fluently⁷
- **Social and Community Context**
 - Lack of awareness of resources, services, and stigma⁸

Mental Health Disparities in AANHPI Community⁹

- Compared to those of other racial/ethnic background, lowest rate for seeking mental health services
- Only 20.8% of Asian adults with mental illness received treatment
- **Systemic Barriers to Mental Health Care**
 - Language barriers
 - Immigration status
 - Stigma and shame
 - Faith and spirituality
 - Model minority myth
 - Alternatives to treatment
 - Insufficient health insurance coverage
 - Challenges in research

The U.S. Surgeon General's Advisory

In 2021, Surgeon General's Advisory on Protecting Youth Mental Health¹⁰ was published, a public statement that calls for action to address the urgent issues of youth mental health and offers recommendations for how to support the MH of children, adolescents, and young adults.

Key takeaways from the Surgeon General's Advisory:

Mental health is an essential part of overall health

Mental health conditions are real, common, and treatable. People experiencing mental health challenges deserve support, compassion, and care — not stigma and shame.

COVID-19 added to pre-existing challenges that youth faced

Since the pandemic began, rates of psychological distress among young people have increased. The pandemic is most heavily affecting those who were already vulnerable. This includes youth with disabilities, racial and ethnic minorities, LBGTQ+ youth, and other marginalized communities.

Mental health is shaped by a combination of factors

Mental health conditions can be shaped by biological factors, including genes and brain chemistry and environmental factors, including life experiences.

Focusing on youth mental health now is critical

We all have a role to play in supporting the mental health of children and youth. Find actionable steps and resources on our priority webpage: <https://hhs.gov/surgeongeneral/priorities/youth-mental-health/>

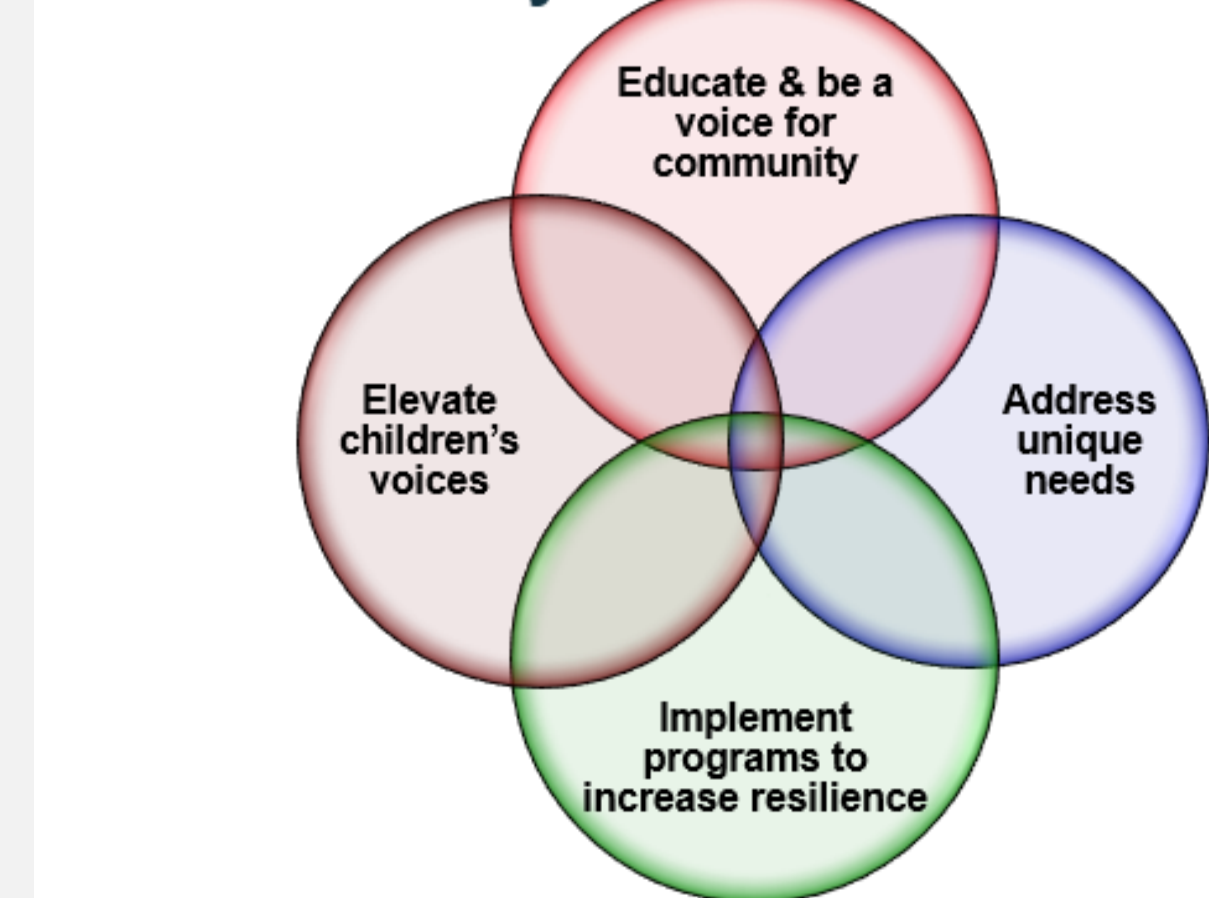
Best practices for the treatment and prevention of mental health challenges targeting different levels:

Individual Youth, Community, Health Professionals, and Local, State, and Federal Government

1. Best Practices: Individual Youth



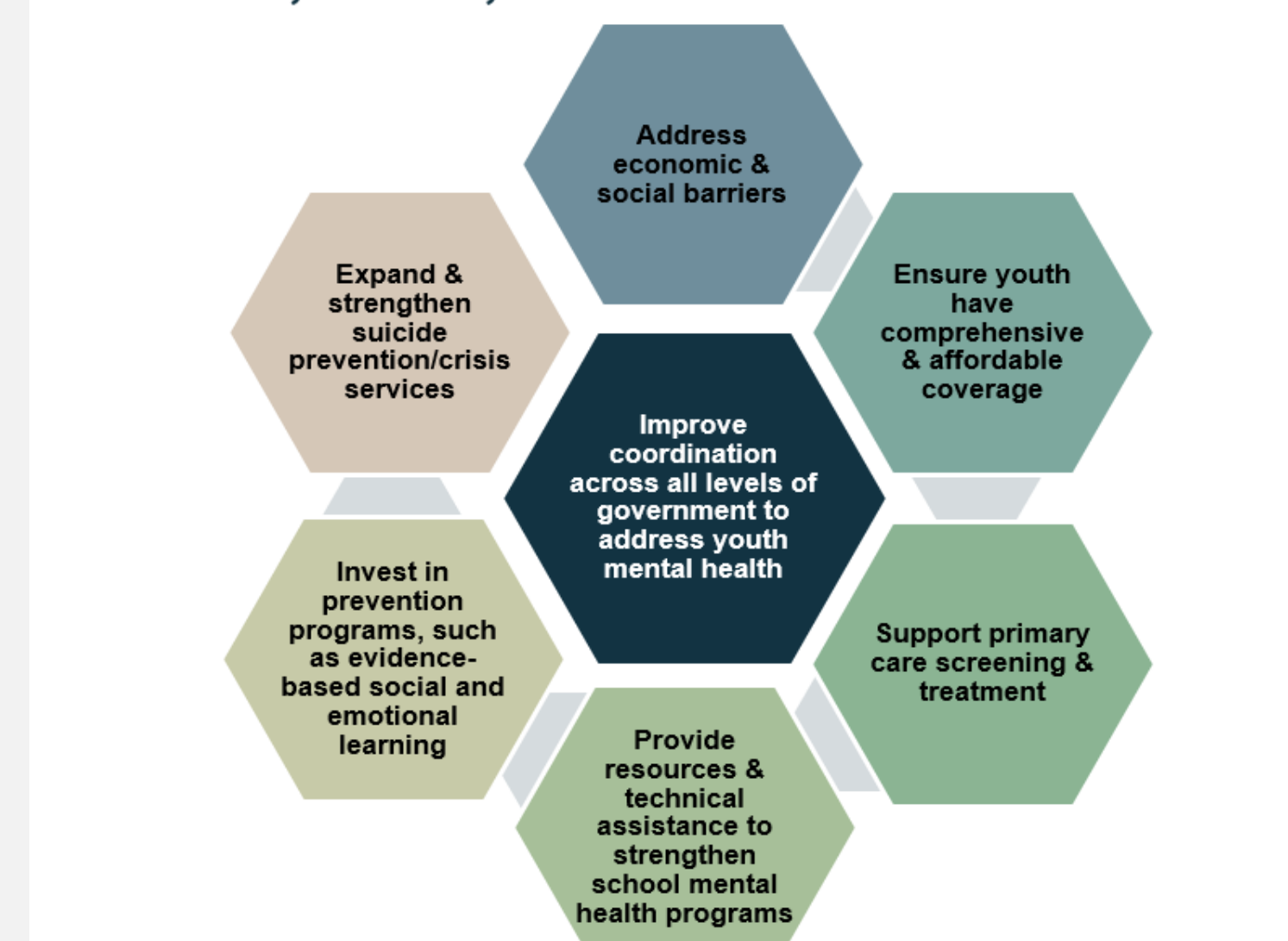
2. Community



3. Health Professionals



4. Local, State, and Federal Government



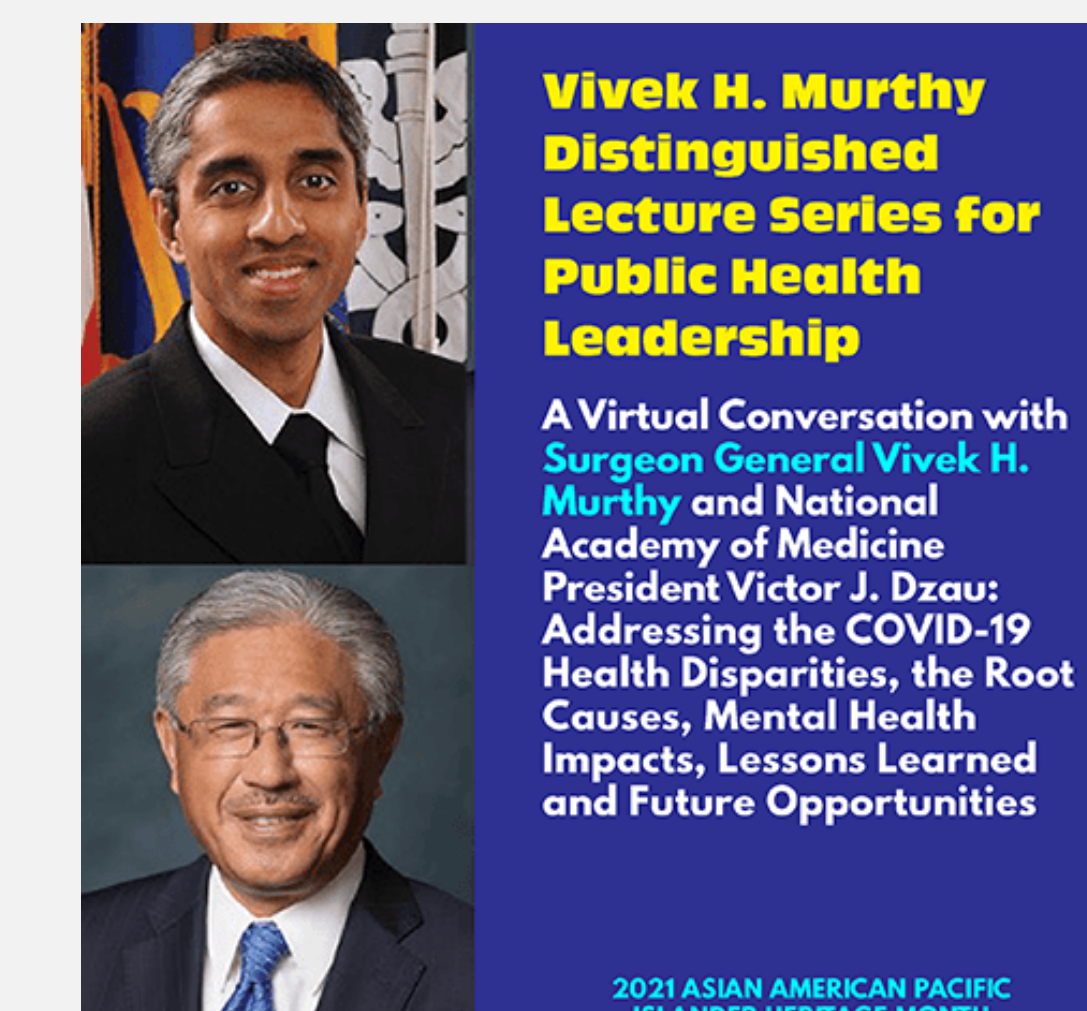
APAOC's Efforts in Addressing Mental Health Disparities

The Healthy Mind Initiative (HMI): Launched January 2018 to increase mental health awareness and promote suicide prevention in adolescents in AANHPI community.

- **Accomplishments:**
 - Hosted 9 training events on mental health education to 104 USPHS officers
 - Mobilized 80 USPHS officers to lead 30 community engagement events in 2018
 - Published 8 articles on various newsletters to promote national awareness
 - Developed the HMI Lesson Plan for the implementation in the broader general population
- **Impacts:**
 - Over 2,000 individuals in AANHPI communities nationwide benefited from improved awareness with tools and through open discussion on youth mental health and challenges to help children with stress, academic pressure, trauma, and other factors that can lead to suicide
 - The HMI presentation and articles reached 8 USPHS Categories and AANHPI communities in seven HHS agencies
 - Former Principal Deputy Assistant Secretary, RADM Trent-Adams, advocated senior PHS leadership to apply the HMI model in community engagement programs across the country
 - The Office of Surgeon General approved the HMI Lesson Plan in 2022 for its nationwide implementation through Prevention through Active Community Engagement (PACE)

APAOC's Successful Partnerships in Raising Mental Health Awareness

- **National Essay Contests Inspired by APAOC's HMI**
 - **"Speaking up About Mental Health! This Is My Story"**¹¹ – sponsored by National Institute of Mental Health in 2019 and 2022
 - Reduce the stigma surrounding mental health and social barriers that adolescents may encounter
 - 200+ USPHS Officers evaluating over 500 essays to select 27 students as awardees nationwide in two contests
 - **Project Bridge**¹² – sponsored by Federal Asian Pacific American Council (FAPAC) and the Civic Leadership USA in 2022
 - Connect and empower teens to participate in productive mental health discussions
 - APAOC officers mentored the organizers through FAPAC to initiate the project
- **988 Suicide & Crisis Lifeline**
 - Collaborated with SAMHSA, Asian American Health Initiative of DHHS in Montgomery County MD, and PACE-DC
 - Conducted 6 virtual and in-person community events in September and October 2022
 - 600+ individuals attended from Chinese, Korean, Filipino and other AANHPI communities
- Informed the AANHPI community on mental health through the **Vivek H. Murthy Distinguished Lecture Series for Public Health Leadership** – with FAPAC



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Disclaimer

All authors are members of the U.S. Public Health Service Commissioned Corps APAOC. The findings and conclusions in this report are those of the authors in their roles with APAOC and do not necessarily represent the views of their respective agencies where they work or the Commissioned Corps.