Understanding and Treating Psychosis and Other Mental Illnesses in the Context of Asian Cultures and Anti-Asian Racism

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May 19, 2021







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This work is supported by grant 1H79SM081775 from the DHHS, SAMHSA.

Disclosures

Dr. Fan has received research grants from Janssen, Alkermes, Otsuka, Lundbeck, Boehringer-Ingelheim, and Roche.

The MHTTC Network uses affirming, respectful and recovery-oriented language in all activities. That language is:

STRENGTHS-BASED AND HOPEFUL

INCLUSIVE AND
ACCEPTING OF
DIVERSE CULTURES,
GENDERS,
PERSPECTIVES,
AND EXPERIENCES

HEALING-CENTERED/ TRAUMA-RESPONSIVE Inviting to individuals PARTICIPATING IN THEIR OWN JOURNEYS

PERSON-FIRST AND FREE OF LABELS

NON-JUDGMENTAL AND AVOIDING ASSUMPTIONS

RESPECTFUL, CLEAR AND UNDERSTANDABLE

CONSISTENT WITH OUR ACTIONS, POLICIES, AND PRODUCTS

Adapted from: https://mhcc.org.au/wp-content/uploads/2019/08/Recovery-Oriented-Language-Guide_2019ed_v1_20190809-Web.pdf

Asian Americans (AAs)

- The fastest growing minority group in the US
- 23 millions, 7% of the US population
- At least 43 ethnic subgroups, over 100 languages and dialects
- Family roots: more than 20 countries in East and Southeast Asia and the Indian subcontinent
- Chinese Americans: oldest, largest, fastest growing subgroup (25% of Asian Americans)

Source: Pew Research Center, https://pewresearch.org

The term "Asian American"

"Are Asian Americans one or many?



(by Hanifa Abdul Hameed)

Outline

- Asian cultures: in relation to the cause, clinical manifestation and treatment of mental illness
- The "model minority" myth and mental health
- Anti-Asian racism and mental health
- Disparity in mental health care for Asian Americans
- Addressing the challenges: a clinically oriented discussion

Mental illness: explanatory models

- Explanatory models: causal attributions of a specific illness that are held by patients, their families or health care providers
- Predominantly culturally shaped
- Project personal and social meaning on the illness experience
- Affect coping, treatment preferences, compliance, therapeutic relationship, and treatment satisfaction

Ghane et al., Social Psychiatry & Psychiatric Epidemiology, 2010

The roots of Asian cultures

- Asian cultures: heavily influenced by religious and philosophical traditions
 - Hinduism
 - Buddhism
 - Confucianism
 - Taoism

Hinduism and mental illness (1)

- Hinduism: one of the most ancient religions, predating 3,000 BC
- Beliefs
 - Illness: caused by violation of religious doctrines
 - Ayurveda: a medical system originated from Hinduism emphasizing the balance of three vital humors in the body

Hinduism and mental illness (2)

Mental illness

- Cause: God's punishment >> shame and guilt
- Clinical manifestation
 - Tendency to report somatic symptoms
 - Psychosis: certain religious beliefs and perceptual experiences considered normal, not clinically defined delusions or hallucinations

Treatment

- Meditation
- Diet, yoga >> rebalance of humors

Buddhism and mental illness (1)

- Buddhism: founded in India about 2,500 years ago
- Beliefs
 - Human life full of sorrows caused by family's deeds or one's own karma (cause and effect)
 - To free from suffering, give up desires, greed and ambitions >> Nirvana (state of peace and happiness)

Buddhism and mental illness (2)

Mental illness

- <u>Cause</u>: indirect proof of wrongdoing in the past >> shame and guilt
- Clinical manifestation
 - Accept the mental suffering in a fatalistic manner
 - Psychosis: voices from ancestors considered normal
- Treatment
 - Follow Buddha's teachings to cultivate good deeds
 - Meditation, mindfulness practice

Confucianism and mental illness (1)

- Confucianism: originated from the philosopher Confucius (551-479 BC) in China
- Beliefs
 - Maintaining peace and harmony in society and family by practicing and respecting a hierarchical order
 - Collectivism (vs individualism in Western culture)
 - Filial piety, fidelity, and self-development

Confucianism and mental illness (2)

Mental illness

- Cause: a character defect, weakness >> guilt and shame
- Clinical manifestation
 - Negative emotions, disorganized behaviors in public not acceptable
 - Tendency to report somatic symptoms
 - Psychosis: disruption of peace and harmony; losing face

Treatment

- Self-control, "be strong"
- Healthcare provider considered an authority figure

Taoism and mental illness (1)

- Taoism: taught by Lao Zi (6th-4th century BC) and his followers in China
- Beliefs
 - The body is governed by two types of energy: Yin and Yang
 - The Yin-Yang theory: foundation of traditional Chinese medicine
 - Follow the Law of Nature to maintain physical and mental health
 - The mind-body relationship: unity (vs dualism in Western culture)

Taoism and mental illness (2)

- Mental illness
 - <u>Cause</u>: imbalance of Yin and Yang
 - Clinical manifestation
 - Tendency to report somatic symptoms (not because of stigma)
 - Psychosis: biological basis
 - Treatment
 - Tai Chi, and other body movement exercises
 - Acupuncture, massage
 - Herbal medicines

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The "model minority" myth and mental health (1)

 Myth: Asian Americans are uniformly well-adjusted, attaining more socio-economical success than other minority groups

Facts

- The most economically divided racial/ethnic group
- The least likely group to be promoted into management and leadership

The "model minority" myth and mental health (2)

- Negative consequences
 - Create double pressure (social and familial) for Asian Americans
 - Camouflage the disparities and struggles within AAs
 - Generate resentment from other racial groups >>interracial conflict
 - Mental health toll
 - Cause enormous psychological distress
 - Prevent Asian Americans from seeking mental health care

Anti-Asian racism (1)

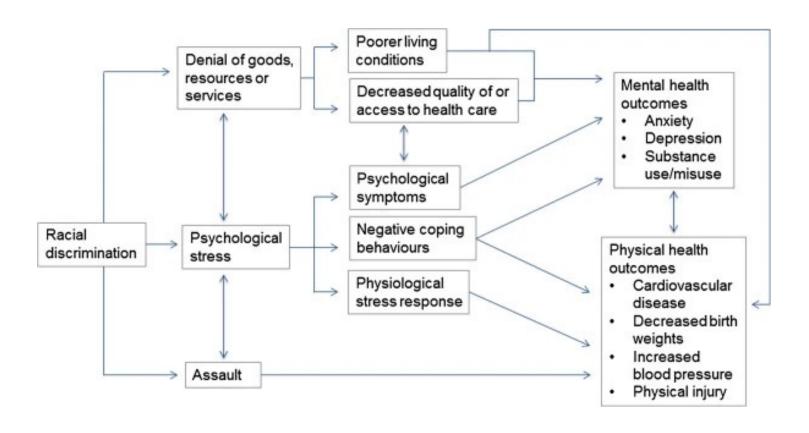
- Anti-Asian racism and discrimination: a long history
 - The Chinese Exclusion Act (1882)
 - WW II: Japanese internment camps
- Overall trend over the past several decades
 - Blatant, direct, intentional >> subtle, indirect, disguised
- Subtle racism/racial microaggression
 - "Carbon monoxide": invisible but harmful
 - So common and innocuous
 - Hard to measure or quantify
 - Easily dismissed by perpetrators

Anti-Asian racism (2)

- Blatant racism
 - Hate incidents or crimes
 - Attacks targeting Asian Americans increased by 150% in 2020
- Racism
 - A driving force of the social determinants of health¹
 - A public health crisis²

- 1. American Public Health Association, https://www.apha.org
- 2. Andrews, The Lancet, 2021

Pathways between racism and health

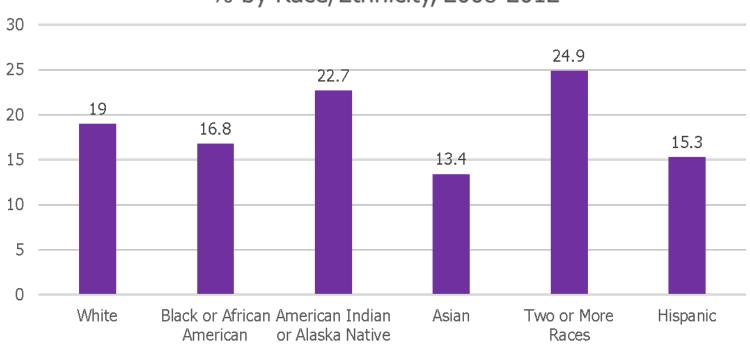


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Mental health disparity

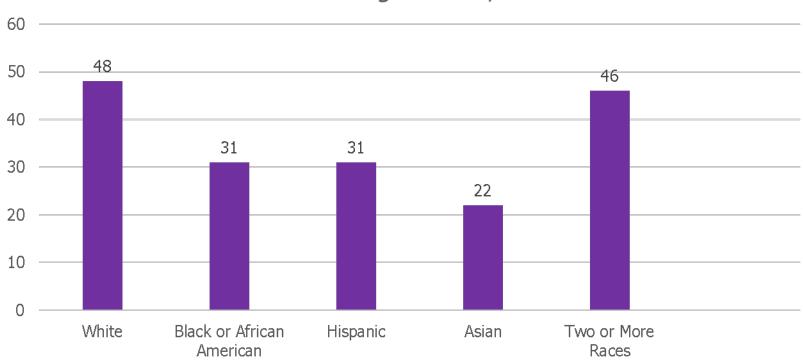
Any Mental Illness in the Past Year Among Adults, % by Race/Ethnicity, 2008-2012



SAMHSA: Racial/ethnic differences in mental health service use among adults, 2015

Mental health disparity

Among People with Any Mental Illness, % Receiving Services, 2015



SAMHSA: National survey on drug use and health, 2008-2015

Work from Dr. Fan's group

Comparing mental disorder diagnosis and treatment between White and Asian patients in a large academic general hospital using patient registry database

Wu et al., Asian Journal of Psychiatry, 2018



https://www.wgbh.org

Methods

- Selection criteria for the study sample
 - Hospital: MGH
 - Time period: 1/1/2009 to 12/31/2009
 - · Races: Whites and Asians
 - Age: > 18 years old

Results

- Rates of mental disorder diagnosis
 - Whites: 18.1% (62,470/345,070)
 - Asians: 9.8% (1,615/16,418)
 - P < 0.0001
- Rates of psychotropic medication treatment among those diagnosed with mental disorders
 - Whites: 15.0% (9,374/62,470)
 - Asians: 8.6% (138/1,615)
 - P < 0.0001

Barriers to mental health care

- Common barriers for all racial/ethnic groups
 - Cost
 - Fragmentation of services
 - Continuity of care (inpatient >> outpatient >>community)
 - Addiction treatment and mental health treatment
 - Primary and behavioral health care integration
 - Lack of availability of services

Barriers to mental health care

- Unique barriers for racial/ethnic minority groups including Asian Americans
 - Cultural explanatory model about the disease
 - Stigma and stereotypes >> denial and neglect
 - Mistrust and fear of treatment
 - Racism and discrimination (personal and structural)
 - Differences in language and communication
 - Cultural competency of health care providers



Address the barriers

To all event participants:

Please share your input!

Let's address the barriers together!

Let's learn from each other!

Address the barriers: understanding mental illness

- Public education/awareness, mental health literacy
 - Distribution of infographics and public messaging through social media channels
 - Reduce stereotypes and stigma
 - Psychosis/schizophrenia: one of the most stigmatized, misdiagnosed, under-diagnosed mental conditions
 - Bio-psycho-social formulation of mental illness

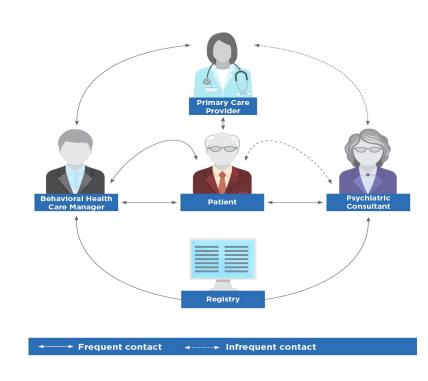
Address the barriers: understanding mental illness

- Public education/awareness, mental health literacy
 - HARMONIOUS: a community-based initiative to provide culturally appropriate mental heath education for the Chinese community
 - "Share your story"; "Your story is powerful"



Address the barriers: access to service

- Collaborative care model
 - Primary care providers, care managers and psychiatric consultants work together
 - Asian patients: tendency to report somatic symptoms of mental illness >> primary care provider as the authority figure
 - For those with more severe mental illness >> refer to psychiatry specialty care



https://www.psychiatry.org

Address the barriers: service delivery (1)

- Develop a culturally competent healthcare system
 - Address organizational or structural racism and discrimination
 - Reduce mistrust and fear for patients
- Cultural competency training for healthcare providers
 - Be willing and able to understand the patient's cultural values, life experiences, and personal goals
 - Promote <u>cultural humility</u> by adopting a culturally humble lens¹
 - Be aware of our own <u>implicit biases</u> ("blind spots")
 - Engage the patient in <u>shared decision-making</u>
 - Be able to provide <u>trauma informed care</u>

Address the barriers: service delivery (2)

- Cultural competency training for healthcare providers
 - Able to provide racially/culturally appropriate "Western medicine" treatment
 - Ethnopharmacology: Asian subgroups "slow metabolizers"¹
 - Medication dosage adjustment
 - Has knowledge about complementary and alternative medicine (CAM)
 - Herbal medicine: efficacy and safety unknown
 - Drug-drug interaction

Address the barriers: service delivery (3)

- Address poor treatment compliance
 - Why
 - Attitudes towards Western medicine: "toxic"
 - Misconception about herbal medicine: "natural" = "non-toxic"
 - How
 - Medication education
 - Start low, go slow
 - Long-acting injectable antipsychotics for psychosis and schizophrenia
- More clinical and patient outcome research needed in Asian patients
 - Asian patients rarely participate in clinical research >> FDA recommended dosage may not be suitable for Asians
 - Patient outcome research: very limited data

Reflection: the importance of mental health for Asian Americans

Mental health

- Wellspring of thinking, communication, learning, resilience and self-esteem
- Basis for successful contributions to family, community, and society
- Fundamental to overall health and productivity
- Critically important for Asian Americans to integrate into mainstream American life

Future Events

MAY L

Enhancing Wellbeing in Health Care Providers: Mindfulness and Acceptance Practices

As part of our series focused on "Addressing Stress-Related Mental Health Consequences of the

JUN 🏰

Spirituality, Faith, and Religion: Creating a Time and Space for Connection, Wellness, and Hope for...

03

People define their spirituality, faith, and religion as being a process involving growth,

07

Virtual 2021 New England School of Addiction and Prevention Studies! - 52nd Annual Summer School - ...

The New England School of Addiction and Prevention Studies, often called Summer School, is a 5-day (

JUN

Self-Care for All: Infuse Wellness into Your Daily Life

16

*/ Join Dana Asby, MA, MEd, New England MHTTC's Education Coordinator, for this interactive webinar.

JUN

Spirituality, Faith, and Religion: Creating a Time and Space for Connection, Wellness, and Hope for...

24

People define their spirituality, faith, and religion as being a process involving growth,

JUL

Spirituality, Faith, and Religion: Creating a Time and Space for Connection, Wellness, and Hope for...

08

People define their spirituality, faith, and religion as being a process involving growth,

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