

MENTAL HEALTH & KOREANS: DEVELOPING COMMUNITY VOICE IN LOS ANGELES AND ORANGE COUNTY

Symposium Report Developed by Korean American Family Service Center and Korean
Community Services.*

OVERVIEW

On March 8, 2010, Korean American Family Service Center (KAFSC) and Korean Community Services (KCS) hosted a mental health symposium titled, “*Mental Health & Koreans: Developing Community Voice in Los Angeles and Orange County.*” Over 160 individuals, including mental health practitioners, faith-based leaders, community advocates and consumers, gathered at Young Nak Presbyterian Church in Los Angeles to discuss the current challenges the Korean American community faces in accessing mental health services and the measures necessary to improve the system of care.

PART I: KEYNOTE ADDRESSES

Keynote addresses by several prominent mental health experts provided an overview of the state of mental health system in Los Angeles and Orange Counties and the current mental health landscape in the Korean American community. This set the stage for a dialogue among participants on how the Korean American community should respond to a wide gap that exists between available resources and unmet mental health needs in light of current developments in public mental health.

Ms. Gladys Lee from the Los Angeles County Department of Mental Health provided a background on the evolution of the public mental health system in California leading up to the 2004 Mental Health Services Act (MHSA), which created an unprecedented opportunity to transform the mental health system towards a culturally competent model that promotes recovery and wellness in partnership with consumers, families, and the community. In the current economic climate and continuing government cutbacks, Gladys emphasized that stakeholder engagement, collaboration, and advocacy will play an important role in preserving MHSA funding for the underserved communities.

Dr. Clayton Chau from the Orange County Health Care Agency, followed up with a presentation on what lies ahead for public mental health services. Dr. Chau recommended specific strategies for ensuring that the mentally ill from underserved communities receive quality health care services, including the integration of social, physical health care, mental health, and drug/alcohol services to provide holistic care for our clients and collaborative partnerships with other agencies and ethnic communities to safeguard MHSA programs and reduce health care disparities for all.

* Special thanks to KAFSC and KCS staff for organizing the event; Young Nak Church and YNOT Foundation for setting up the venue and providing refreshments; Paris Baguette for donating food; our numerous speakers and facilitators; Joanne Jung for translation; and USC School of Social Work for transcribing the notes.

Dr. Susan Chung of Kaiser Permanente Medical Center responded with a community perspective on significant mental health needs among Korean Americans. Dr. Chung discussed how undetected and untreated mental disorders, especially as they intersect with culturally ingrained patterns and immigrant stresses, often lead to behavioral dysfunction that affects entire families, particularly in instances of domestic violence and substance abuse. She stressed how, in this time of limited resources, it will take collaboration among all of us -- service providers, community and faith-based organizations, schools, and government agencies -- to provide appropriate treatment and support for those who are struggling with mental health issues.

PART II: BREAKOUT SESSIONS

During Part II of the event, attendees broke out into five small groups to allow more focused discussion on the state of mental health services for the Korean American community. Each group discussion centered around three questions surrounding the Korean American community:

- What **CHALLENGES** do we face in accessing mental health services?
- What **RESOURCES** do we need to develop?
- What **ACTIONS** must we take to improve the quality of mental health services?

PART III: SHARING & WRAP-UP

After the breakout sessions, attendees reconvened to share key findings and recommendations of each breakout group.

A. Community & Consumers I (Children and Youth)

Facilitator: Dr. Myung Mi Ryu, Family Practitioner

1. Challenges

- High cost of assessment and treatment services
- Lack of information on where to go for services and how to navigate the mental health system
- Poor communication with service providers who lack cultural and linguistic sensitivity, resulting in getting the run around
- Shortage of Korean-speaking, bicultural mental health practitioners
- Lack of culturally and linguistically competent referral and linkage services that can effectively connect people to needed resources

2. Recommended Actions/Resources

- Obtain support from within and outside the community to provide low-cost community-based treatment services
- Develop a Korean-language resource book on mental health that includes guidelines on the signs and early detection of various mental disorders, what steps to take, how to respond to incidents of family violence, and existing resources accessible for Korean-speaking consumers
- Widely distribute information on mental health resources via community directories, newsletters, and websites, as well as schools, pharmacies, and doctor's offices
- Form local mental health support groups like NAMI for Korean consumers and families

- Provide more education and support for parents of children with mental health disorders and related behavioral issues
- KAFSC, KCS, and other community-based agencies need to help bridge the gap between public mental health agencies and community members and between systems
- Need to develop a community infrastructure that can network churches, community service providers, and trained volunteers to ensure comprehensive mental health care and support for consumers

B. Community & Consumers II (Adults and Seniors)

Facilitators: 1) Prof. Mikyong Kim-Goh, CSUF & 2) Sang Jin Lee, Sunny Hills ADHC

1. *Challenges*

- Not enough mental health treatment programs accessible for Koreans
- Shortage of Korean-speaking mental health professionals
- Social service agencies, community service providers and volunteers lack cultural sensitivity and an adequate understanding of mental health issues
- Early detection of mental health disorders such as depression is difficult in light of lack of awareness in the Korean community
- Lack of community interest in mental health needs of older adults

2. *Recommended Actions/Resources*

- Develop and support leadership within the ranks of Korean American mental health professionals who can contribute to policy-making and decision-making in the mental health field
- Raise community awareness of mental health needs through regular mental health columns in newspapers and community workshops
- Advocate for affordable mental health services for the working poor and older adults in the Korean American community and for more Korean-speaking service providers in county-funded clinics
- Promote partnerships among churches and service providers since 80% of Korean Americans are members of faith-based communities
- Recognize connections between spirituality and mental health care and provide appropriate training for the clergy
- Create a pipeline for more bilingual mental health professionals

C. Mental Health Practitioners (Korean speaking)

Facilitators: 1) Dr. Jung Yeol Oh, Psychologist; 2) Grace Chung, KCS

1. *Challenges*

- Culture of shame and stigma as a barrier to early intervention and appropriate treatment
- Lack of recognition of mental health needs among community members
- The high cost of mental health services as a barrier
- Lack of accurate information on existing Korean-language services and resources even among practitioners, hindering effective referral services
- Difficult to access appropriate mental health resources

- Reluctance of clergy to refer congregational members to clinical services

2. Recommended Actions/Resources

- More community education needed on mental health issues to overcome cultural barriers to mental health services via churches, community venues, and Korean-language media
- Develop more culturally responsive mental health programs for Korean immigrants
- Provide training and volunteer opportunities for community members with interest in mental health issues
- Develop a detailed, consumer-friendly bilingual information on accessible resources for Korean-speaking consumers, including services available, areas of specialization, and service fees, both print and online
- Develop a comprehensive directory of Korean American mental health service providers and promote networking among Korean American mental health professionals
- More cooperation needed from the media in publicizing workshops and seminars on mental health in order to raise community awareness on mental health issues and of existing services
- Train church leaders and staff on caring for congregational members with mental health and related problems, including legal/reporting responsibilities

D. Practitioners & Consumers (English speaking)

Facilitators: 1) Stella Kim, YNOT Foundation & 2) Julius Kim, KCS

1. Challenges

- Gaps in mental health services for the working poor who are not Medi-Cal eligible
- Cultural stigma surrounding mental illness and mental health services
- Untreated mental disorders or distress masked by high performance among Korean American students
- Recognizing the value of mental health care as professional services distinct from pastoral or informal counseling
- Existing disconnect between spiritual care and mental health services, and between physical health and mental illness, that forms a barrier to accessing needed mental health care
- The varying needs of diverse cultural groups within the Korean American community that cannot be met with one-fits-all approach
- How to advocate for more services in the face of continuing cutbacks in mental health funding
- Low-Medical enrollment because of ineligibility or fear that enrolling in public assistance will jeopardize their immigration status

2. Recommended Actions/Resources

- Need to educate and engage community leaders, spiritual leaders, and healthcare professionals in order to combat stigma against mental health services and increase referrals for services
- Need community education on the signs and symptoms of mental disorders and the value of mental health services

- Need to use culturally sensitive language and strategic planning in the promotion of mental health services in order to open access to the unfamiliar mental health system and increase service utilization by immigrants as well as second-generation Korean Americans
- Develop consumer-friendly and bilingual materials for mental health education that can reach both generations
- Provide a training opportunity on the integration of spirituality in mental health services
- Increase cross-collaboration between providers, community, and government mental health agencies to meet gaps in services in this time of budget cuts in mental health services

E. Faith-Based Leaders:

Facilitators: 1) Rev. Samuel Lee, Young Nak Church & 2) Rev. Mi Sun Kim, Sarang Church

1. *Challenges*

- Lack of knowledge of mental health issues and resources accessible for Korean-speaking consumers
- Culturally-based reluctance to seek outside intervention
- Unfamiliarity with mental health care and distrust of community services
- Lack of available resources and funding for mental health services
- Lack of collaboration between churches and mental health service providers

2. *Recommended Actions/Resources*

- Provide education on mental health needs and the process of mental health care at churches
- Collaborate with churches to increase access and utilization of mental health services
- Network among faith-based leaders for information-sharing
- Advocate for more Korean-language services at DMH clinics
- Increase collaboration among community agencies to maximize resources available for mental health services
- Provide follow-up opportunities for continuing education on mental health

Ailee Moon, PhD – “*Moving Forward*”

Prof. Ailee Moon noted some of the common themes that emerged from the day’s proceedings and encouraged the participants to be strategic and systematic in how we respond to the critical shortage of services for the underserved Korean American community. This time of shrinking public funding is especially difficult for community programs that serve distinct needs of ethnic-specific populations. She spoke of the task of building a strong case for increased services for Korean American consumers and presented the challenge of securing support, from both community and public sources, to fund a comprehensive community needs assessment that will produce the supportive data for our fair share of the MHSA funding. We will also need to leverage the large size of the underrepresented Korean American population in Southern California and raise our voice if we are to seriously address the wide gap in services that hits our community hard. We must band together to advocate for services that are culturally and linguistically competent and truly accessible for our community members who have suffered silently for far too long with grave consequences.

OVERALL SUMMARY

Some common themes emerged through the presentations and small group discussions:

1. Challenges

- Lack of bilingual and bicultural MH providers
- High-cost of services
- Cultural stigma and lack of awareness towards mental health issues and services
- Lack of collaboration between providers, churches, government, and community
- Disconnect between spirituality and MH and between faith communities and MH services
- Lack of funding for services to Korean Americans

2. Recommended Actions/Resources

- Increased resource-sharing and networking among mental health service providers
- Bilingual print/online resources for Korean American consumers
- More education and outreach on mental health through media, schools, churches, doctor's offices, media, and other venues
- Increased collaboration among community, faith-based organizations, government, and providers to increase awareness, access and utilization of mental health services
- Effective advocacy for increased services that are responsive to serious and unmet mental health needs among Korean immigrants and their children
- Training of community service providers, volunteers, and faith-based leaders to respond to mental health needs and to link individuals to existing services
- Creating a strong, unified voice to advocate for public funding

CONCLUSION

The symposium provided a much-needed opportunity for various stakeholders to meet together to discuss the unmet mental health needs in the Korean American community and brainstorm ways to improve the system of care. With the community facing disproportionately high rates of alcoholism, depression, suicide, domestic violence, child abuse, and a myriad of other problems that stem from mental health issues, such an event was long over due. The strong turnout and overwhelmingly positive feedback shows that the Korean American community is poised to tackle our unmet mental health needs and improve the mental wellness of our community. This Symposium and report signifies the first step towards addressing the distinct mental health needs of the Korean American community. The next step is to follow through with the recommendations set forth in this report and hold future symposiums to assess our progress, identify additional needs, and expand our network of stakeholders.