

# CalMHSA API Campaign Research

---

Solsken PR conducted a research survey with support from the UC Davis Center for Reducing Health Disparities in late 2012 to ascertain mental health stigma and discrimination among Hmong, Laotian and Cambodian communities in Sacramento, Long Beach and Fresno regions. Over the course of several months, a questionnaire/survey was developed that specifically targeted stigma and discrimination, and accounted for cultural and linguistic nuances. The final survey, consisting of 19 questions, was administered to community members through six community-based organizations: Southeast Asian Assistance Center, Wat Lao Phosiesattanack, Fresno Center for New Americans, Fresno Interdenominational Refugee Ministries, The Cambodian Family and United Cambodian Community. The survey was answered by 349 recipients of the target communities. Members of the Solsken team entered the survey data. After data entry, another different member of the team spot checked every entry ensuring 100% accuracy.

## Participants and Method

Within the target age range, 30 and older, the 296 survey respondents comprised of 37.3% men and 62% women between the ages of 30 and 88, (Mean = 52.5, Standard Deviation = 12.2). The survey respondents self-identified as Cambodian (27.8%), Hmong (45.4%), and Laotian (26.8%). The questionnaire consisted of a set of statements and participants were asked to rate their level of agreement using a scale in which 1= *Strongly Disagree*, 2 = *Disagree*, 3 = *Neither Agree nor Disagree*, 4 = *Agree*, 5 = *Strongly Agree*.

While there was a total of 349 survey's collected, we did not report in our results 53 responses due to age and incomplete surveys.

## Results

The following results describe selected themes identified to be relevant to the outreach and education campaign. These three themes, composed of a subset of the original 19 questions, include (1) Beliefs about Mental Illness, (2) Spirituality and Mental Illness, and (3) Beliefs about Treatment.

### BELIEFS ABOUT MENTAL ILLNESS

***“Once a person is mentally ill, he or she will never get better.”***

For this statement, a majority of participants, 41.4%, disagreed or strongly disagreed that mental illness is permanent. 37.6% agreed or strongly agreed.

***“People who suffer from depression only have themselves to blame.”***

Of the participants, 42.3% disagreed or strongly disagreed that people with depression are at fault for mental illness. 36.4% agreed or strongly agreed.

## **SPIRITUALITY AND MENTAL ILLNESS**

***“People who suffer from mental illness deserve it because they must have done something bad in their past life.”***

A majority, 66.1%, disagreed or strongly disagreed that mental illness is related to wrongs committed in past lives. A minority, 19.2% disagreed or strongly disagreed.

***“People who suffer from depression are possessed by evil spirits.”***

A majority, 52.2% disagreed or strongly disagreed that spiritual forces play a role in depression. 28.2% agreed or strongly agreed.

## **BELIEFS ABOUT TREATMENT**

***“People with mental illness can get better if they see a doctor.”***

A majority of participants, 58.6%, agreed or strongly agreed that a physician can play a role in treatment for mental illness. 21.9% disagreed or strongly disagreed.

***“People with mental illness can get better with medication.”***

A majority, 57.3%, agreed or strongly agreed that medication can have a positive treatment effect on mental illness. 21.5% disagreed or strongly disagreed.

Overall, many participants held beliefs about mental illness in the desired direction. However, this preliminary data demonstrates that there is a need for education in these communities, especially for those who agreed with stigmatizing statements and/or who lack understanding (neither agreed nor disagreed). Outreach efforts should focus on informing these communities on what mental illness is, how it occurs, and how it can be treated.