



# **Vietnamese Mental Health Cultural Competency**

# PRE-TEST

Please scan the QR code to complete the pre-test before our presentation.





## Who We Are:

- Boat People SOS - Center for Community Advancement (BPSOS-CCA)
- Have served the Vietnamese community since 2000



**DISCLAIMER!**

# Purpose of this workshop

To better understand the Vietnamese community who have deep-rooted stigma against mental health.

To highlight the importance of being culturally competent when approaching the Vietnamese community about mental health.

How to effectively approach the Vietnamese community.

To create a more culturally and linguistically compatible relationship with the Vietnamese community.

# Why it is important to have Cultural Competency

- Increases rapport, treatment retention and outcomes
- Decreases behavioral health disparity gap on a macro and micro level
- Offers clients a chance to explore the impact of culture (historical and generational events), acculturation, reduces discrimination and bias
- Recognizes the importance of language and the right to language accessibility
- Honors the beliefs that culture is embedded in the clients' language and their implicit and explicit communication styles



# The Continuum of Cultural Competence

## Stage 1: Cultural Destructiveness

- myopic view of "effective" treatment
- projecting superiority by stating with authority and conviction that their approach is the best
- interact through a biased lens without engaging in self-reflection or examination of the impact of their prejudice

## Stage 2: Cultural Incapacity

- ignore the relevance of culture while using the dominant client population and/or culture as the norm for assessment, treatment planning, and determination of services.

## Stage 3: Cultural Blindness

- uphold the belief that there are no essential differences among individuals across cultural groups - that everyone experiences discrimination and is subject to the biases of others

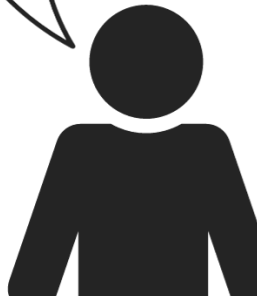
## Stage 4: Cultural Pre-competence

- acknowledge the need to attend more to ethnicity, race, and culture in the provision of services, but they probably lack the information and skills necessary to translate their recognition into behavioral change.
- recognize the importance of developing cultural competence, and have taken small steps to improve

## Stage 5: Cultural Competence & Proficiency

- recognition of the vital need to adopt culturally responsive practices is present
- acknowledge significant differences across and within races, ethnicities, and cultural groups, and know that these differences need to be integrated into assessment, treatment planning, and services.
- committed to an ongoing process of becoming culturally competent.

Where do you stand on the continuum of cultural competence?

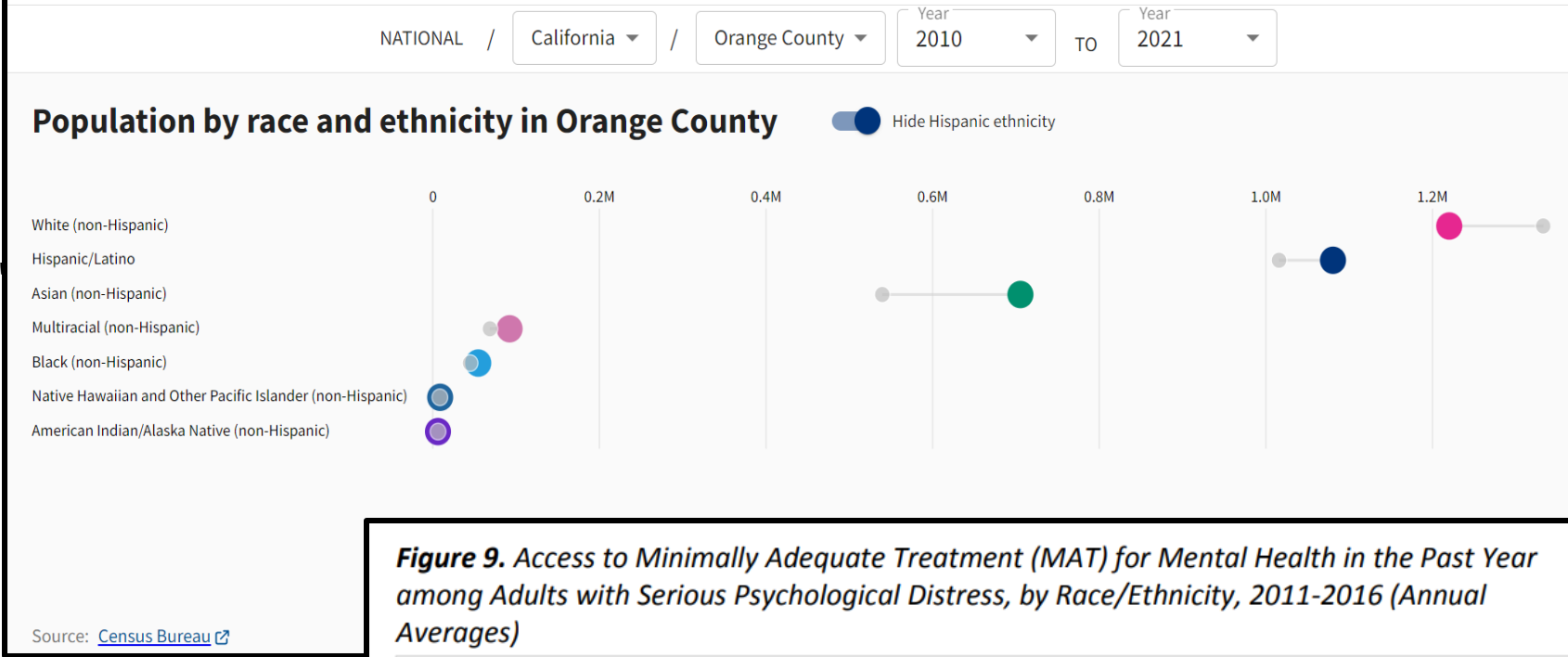


"Between **2010** and **2021**, the **Asian (non-Hispanic)** population had the **most growth increasing by 165,833** from **539,544** in **2010** to **705,377** in **2021**."

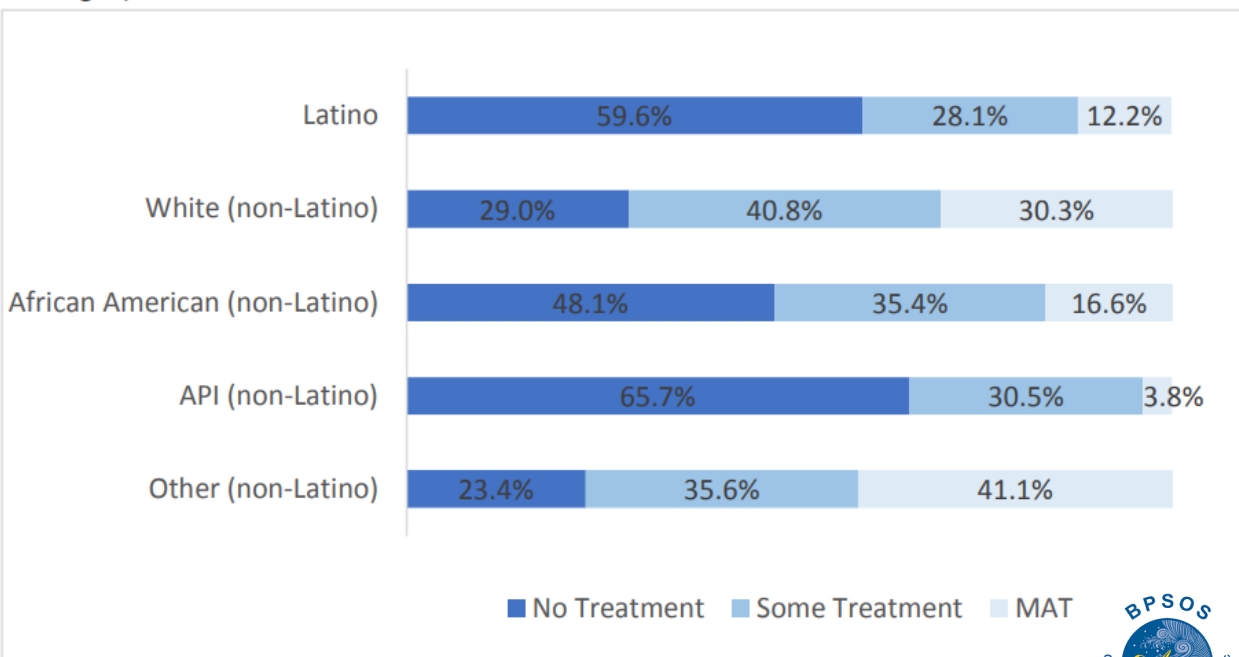
-US Census Bureau

Understanding the Asian Pacific Islander (API) and Vietnamese Community Demographic & Mental Health Needs

"Compared to API community counterparts, API had the **highest number of no treatment** among *adults with serious psychological distress*." -Orange County Needs and Gaps Analysis, Final Report 2019



**Figure 9.** Access to Minimally Adequate Treatment (MAT) for Mental Health in the Past Year among Adults with Serious Psychological Distress, by Race/Ethnicity, 2011-2016 (Annual Averages)







"I see a letter with my name on it in the mail and my entire body start to shake, I start to sweat, and I get so flustered. "

-a community member

## Recent Vietnamese Immigrants in the U.S. (Post-2000)"

- Hosted 2 focus groups in 2022
  - N=21 survey respondents
- **52%** expressed wanting to seek professional help for mental health, but 41 % feels that the language barrier and awareness for culture prevents them from seeking help.

# Cultural Stigma in the Vietnamese Community

- Most Asian Americans focus on the importance of virtue, maturity, and self-control and find full emotional expression indicative of a lack of maturity and self-discipline (Cheung 2009).
- Expressing one's feelings is an admission to weakness
- Shaming related to mental health problems is a cultural norm
- Mental Health is often kept secret from other family members and friends

## Assessing shame in Asian American Clients

- ☐ Extremely concerned about the qualifications
- ☐ Hesitant to involve others in the treatment process
- ☐ Excessively worried about confidentiality
- ☐ Refuses to cover expenses with private insurance
- ☐ Frequently misses or arrives late for treatment
- ☐ Family members refuse to support treatment
- ☐ Insists having a White American counselor to avoid opening up to another Asian
- ☐ Refuses treatment even when severe problems are evident

Source: SAMHSA TIP 59

# Tâm lý vs Tâm thần

Vietnamese

English

tâm lý

mentality

Vietnamese

English

tâm thần

mental

# **Protective/ Positive Factors of Vietnamese Community:**

- The Vietnamese community is a collectivist community.
- Strong family connections and cultural practices that promote balance for better health and wellbeing.
- Possessing strong ethnic identity. The sense of belonging to a group gives a sense of security.

# Barriers within a multi- generational family

- Mixed generation family
- Language Barrier
- Hierarchy within the family-  
Filial Piety

# Activity

Can you help Ms. Ngoc get access to a culturally competent mental health provider?

Question #2 -Name one cultural stigma that Vietnamese Community faces when seeking mental health services


Question #3 -Name one barrier within a multi-generational family.

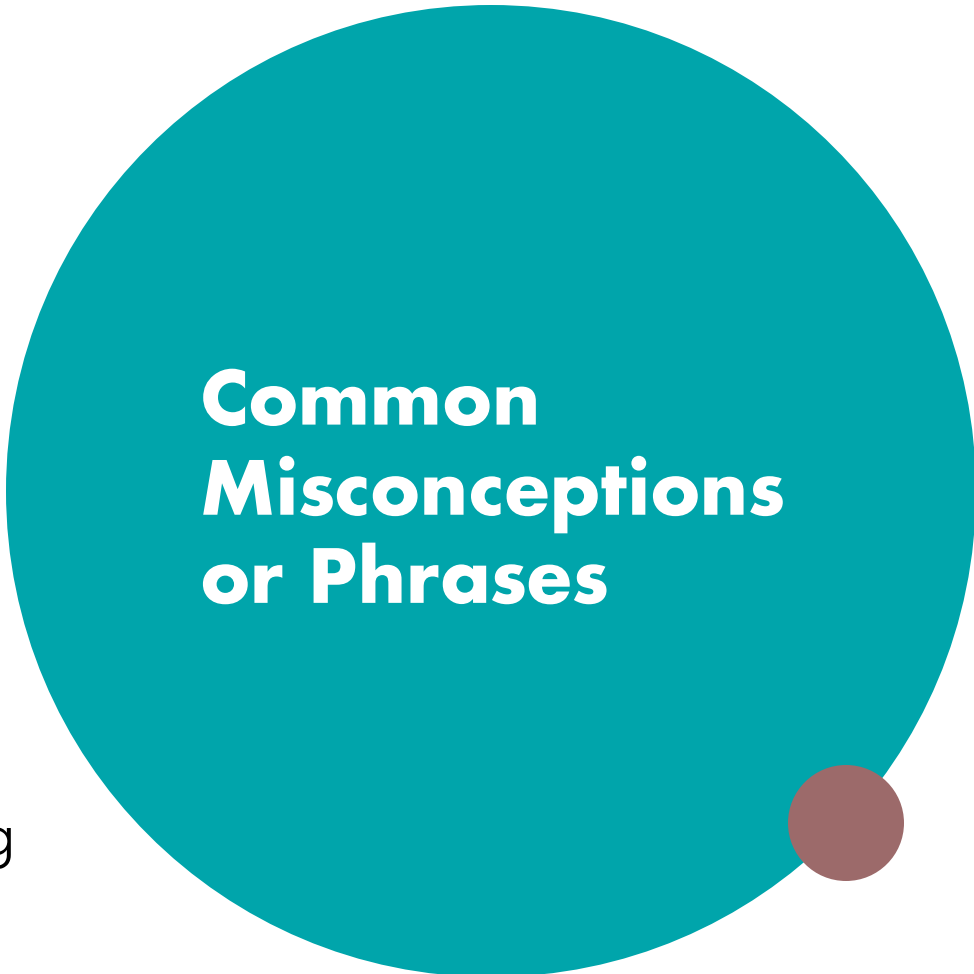
Question #4: -Name one protective factor of the Vietnamese community.



Question #1 -  
What is cultural competency?



- 
- Three unhealthy coping mechanisms:
    - Denial
    - Minimization
    - Emotional suppression
  - Three common phrases:
    - "If you have a mental health disorder you are crazy or insane."
    - "If you are sad, then get over it"
    - "My child is okay, there is nothing wrong with them"



## **Common Misconceptions or Phrases**



# Intergenerational Trauma

- **Asian Diaspora** - the scattering of (Asian) people from their homelands to different parts of the world - and that your Parents/Relatives/Families were/are immigrants
- Their **offspring share very similar experiences**, such as racism, exclusion, and questions of self-identity and belonging





# Cultural Approaches (Communication)



To show respect, address elderly clients and family members with a slight bow of the head.

To foster a personable relationship, ask the client for the correct pronunciation of his or her name.

To confirm understanding, have clients repeat back information in their own words.

To avoid conflict and improve outcomes, learn about verbal and nonverbal communication styles specific to Asian cultural groups.

Clients participate in treatment longer and express greater satisfaction when providers educate clients on their role, the purpose of intervention, and the treatment process.



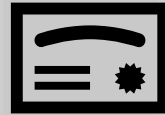
## **Cultural Approaches (Western Society Opinion)**

- Model Minority: Asian Americans have been referred to as the "model minority", this is a myth based on a "positive stereotype".
- The stereotype portrays Asian Americans as being mathematicians, natural prodigies, law abiding, and hardworking immigrants who have achieved the "American dream".

# Cultural Traditions (Decision Making)



Often consult a family member or friend before making any decisions regarding their health, money, etc.



Trust to professionals with titles such as doctor, but more if the doctor is the same ethnicity.



Trust those who uses language that embraces the client's cultural perspective (e.g. an imbalance of in yin and yang).



Prefer a solution-focused approach to treatment that provides them with concrete strategies for addressing specific problems



Expect providers to take an active role in structuring the treatment and provide clear guidelines about that they expect from clients

# Cultural Traditions (Shame and Humiliation)

- The Vietnamese client or a family member will be extremely concerned about the qualifications of the counselor.
- The client is hesitant to involve others in the treatment process.
- The client is excessively worried about confidentiality.
- The client refuses to cover expenses with private insurance.
- Family members prefer not to support such treatments for mental health.
- The client refuses treatment even when severe problems are detrimental.

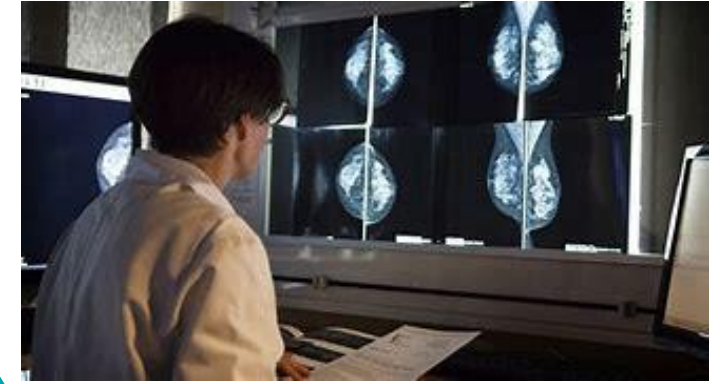




# Body Language



# **WESTERN MEDICINE IN THE VIETNAMESE CULTURE**



# Western Treatments, Medications and Vaccines



# 3 Phases of Vaccine Approval Process



## What steps are taken to ensure that vaccines are safe?

The US Food and Drug Administration (FDA) oversees a careful process to ensure that vaccines are tested thoroughly before being offered to the public, including a three-phase review process for all new vaccines.



### Phase 1

A small group of healthy volunteers receive the vaccine to test for safety and potential side effects.



### Phase 2

Several hundred people representative of the US population receive the vaccine to test how diverse immune systems respond.



### Phase 3

Thousands of people receive the vaccine to test widespread effectiveness, side effects, and safety.

This graphic was adapted from information published in 2018 by the Centers for Disease Control and Prevention.



**U.S. FOOD & DRUG**  
ADMINISTRATION



# **EASTERN MEDICINE/ PRACTICES IN THE VIETNAMESE CULTURE**



# Traditional Vietnamese Healing Practices



# What to expect when working with Vietnamese Clients

*"Compared with the general population, Asian Americans are less likely to have confidence in their medical practitioners, feel respected by their doctors, or believe that they are involved in healthcare decisions."*

-SAMHSA TIP 59

- Indirect Communication
  - Subtle gestures, expressions, or word choices to convey meaning without being openly confrontational
- Omitting Information
  - Income, Immigration status
- Language Barrier
  - Lack of translations
- Preference to avoid authority and showing personal documents

*"Many Asian American immigrants underuse healthcare services due to confusion about eligibility and fears of jeopardizing their residency status."*

-HHS 2001

# Dos and Don'ts

## Do

- Provide a reputable or trained interpreter who is knowledgeable about the Vietnamese culture
- Ask the client how they identify as and what nationality they claim
- Use terminology the client will understand
- Focus on having discussions with clients about their understanding of mental health and the problem at hand

## Don't

- Assume that just because someone appears to be of Asian American descent that they identify as that (E.g., adopted children)
- Generalize all Asian cultures as one. Each culture is distinctly different from one another.
- Shame clients based on their choices or lack of choices. Shame is taken very heavily in Asian cultures.

# Best Outreach Methods

- Traditional media
  - Newspaper
  - Radio
  - Word of mouth
- Social media: Facebook & YouTube
- Healthcare Promoters
  - Have Asian American doctors promote mental healthcare services to their clients
  - Healthcare agencies should be more accessible for the community members
  - Healthcare promoters should go directly into the community to promote their services





# **LANGUAGE ACCESS**

# Plan for Language Services Proactively

Funding allocation



Program materials



Staff composition



Trainings



# Resources





**Questions?**

# Contact Us!



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# POST-TEST

Please scan the QR code to complete the post-test for our presentation

