

DEPRESSION Among Asian American Students



The MGH Center for Cross-Cultural Student Emotional Wellness

Depression is a mood disorder that causes a persistent feeling of sadness and loss of interest. The symptoms of depression can affect how you feel, think, and behave.

Depression affects around 12.8% of adolescents (age 12-17)



(1 in 8 adolescents)

Asian American high school and college students are more likely than White students to experience hopelessness and overwhelming anger. They are also more likely to have felt too depressed to function and to have seriously considered or attempted suicide.

SIGNS of Depression

Emotional Symptoms

- Depressed mood
- Diminished interest or pleasure in activities
- Feelings of worthlessness
- Feelings of excessive or inappropriate guilt
- Trouble thinking or concentrating
- Recurrent thoughts of death or suicide



Physical Symptoms

- Fatigue or lack of energy
- Trouble sleeping or sleeping too much
- Significant weight loss or gain
- Decrease or increase in appetite
- Feeling restless or slowed down



18.9%

of Asian American high school students report considering suicide versus 15.5% of whites

10.8%

of Asian American high school students report having attempted suicide versus 6.2% of whites

Asian Americans may report **more physical symptoms** of depression (changes in appetite, insomnia, fatigue, or pain) in place of emotional ones like sadness or depressed mood.



Because of differences in symptom emphasis, illness beliefs, stigma, and shame, Asian American students are **less likely to be diagnosed with a mental disorder** such as depression and **3 times less likely to seek help than whites**, even though they are more likely to feel hopeless or



Barriers to Treatment for Asian Americans

- Lack of information and education
- Lack of diverse mental health care providers
- Preferring to solve problems on own rather than ask for help
- Belief that depression and anxiety are personal weaknesses rather than illnesses
- Fear of bringing shame to their families (reluctance to talk about private family business to outsiders; trying to maintain a good appearance/"face" in the community)
- Language barriers
- Model minority myth (that Asians are a uniformly successful group and have no problems)

Unlike students from other racial backgrounds, Asian American students with depression **may not have worsened academic performance initially** since academics are so heavily prioritized.



Some Asian **students may "disappear"** (stop going to classes or meetings with advisors, stop responding to friends, etc.) as a first sign of depression.



DID YOU KNOW?

Young (18-24 years old) Asian American women have the second highest suicide rate compared to U.S. women of all racial/ethnic groups in that age group.

CAUSES of Depression

Depression results from a complex interaction between social, psychological, and biological factors.

Stress can cause mental illness in people with biological vulnerabilities (for example, a family history of mental illness), especially those who do not have enough protective factors and social supports. High levels of stress can harm the brain; for example, toxic stress has been shown to shrink the hippocampus, an important area in the brain involved in emotions, memory, and learning.

Biological Factors

- Family history of depression or other mental illness (genetics)
- Temperament (a person's nature)
- Hormonal factors

Physical, Social, and Emotional Stressors

- Traumatic events
- High family expectations
- Ethnic minority status
- Social disadvantage
- Lack of family support
- Misuse of drugs/alcohol
- Bullying/racism

Clinical Depression

Consequences of Depression



Sedentary Lifestyle



Heart Disease



Obesity



Smoking



Diabetes

Treatment Prevention

Depression is treatable, especially if it is detected and addressed early. Good options exist to help people with depression get better. Your diagnosis and treatment are private, and no one can access your medical records without your written consent.



Medication

- Antidepressants target chemicals in the brain to help regulate the brain's activity
- Medications can also help improve symptoms of depression such as difficulty sleeping, anxiety, low appetite, etc.
- Antidepressants are very commonly prescribed, and most are not addictive
- While some medications need to be taken long-term, they can often be discontinued once the depression is better
- Medications are prescribed by psychiatrists, psychiatric nurse practitioners, and primary care doctors



Therapy

- Therapy is a collaborative talking-based treatment that can help improve depression, alone or in combination with medications
- There are many different kinds of individual and group therapies; one of the most common is cognitive behavioral therapy (CBT)
- Therapists can be psychiatrists, psychologists, licensed counselors, or social workers
- Usually, people with depression meet with their therapist for 1 hour every 1-2 weeks



Self-management

Self-management involves forming healthy habits and making positive changes to your daily routine. You can:

- Educate yourself about your diagnosis and treatment plan
- Develop healthy sleeping habits
- Exercise regularly (has been shown to help the brain recover)
- Eat healthy and nutritious foods
- Learn stress management skills
- Set practical and realistic goals
- Seek out firm support systems
- Contemplative practices (journaling, meditation, yoga)



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"Because success is as diverse as we are."

Learn More

Psychology Today

<https://www.psychologytoday.com/topics/depression>

PsychCentral

<https://psychcentral.com/disorders/depression/>

Depression & Bipolar Support Alliance

<https://www.dbsalliance.org>

American Psychiatric Association

<https://www.psychiatry.org/patients-families/depression>

American Psychological Association

<http://www.apa.org/topics/depression/index.aspx>

National Alliance on Mental Illness

<http://www.nami.org/learn-more/mental-health-conditions/depression>

Please visit our website for authors and references.
<https://www.mghstudentwellness.org>