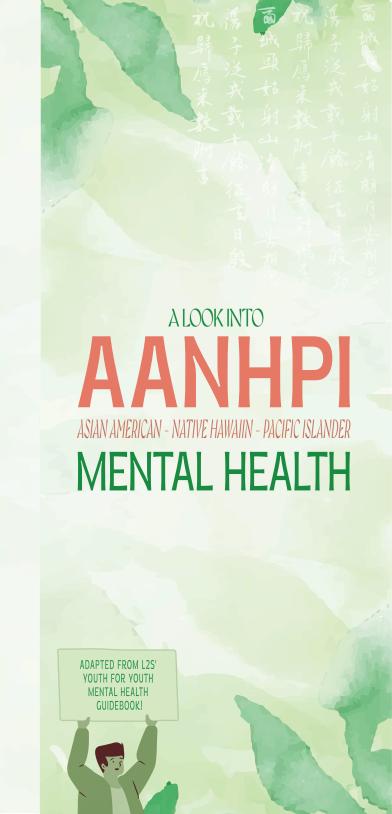
DID YOU KNOW?

17.3% of AAPI experience a diagnosable psychiatric disorder over their lifetime, yet they are still three times less likely than White Americans to seek help.

Surprised? You might be. But this statistic is far from the full story.







Though often grouped together, AANHPI communities encompass diverse cultures and histories shaped by colonization, immigration, displacement, and exclusion. These realities continue to impact AANHPI mental health outcomes through intergenerational trauma, cultural stioma, and systemic neolect.

AANHPI STEREOTYPES:

Many AANHPI individuals face stereotypes, most notably the "model minority" myth, the idea that Asians are universally successful, especially in academics and careers.



AANHPI individuals face layered stereotypes, from fetishes and

emasculating tropes to body image pressures and internalized colorism. often resulting in everyday discrimination.

STEREOTYPES DO NOT DEFINE YOU

THE ROLE OF THE FAMILY:

Pressure to succeed and emotional distance in traditional AANHPI households can leave youth feeling inadequate and disconnected.

AANHPI families may show love indirectly, causing emotional distance and strict discipline rooted in tradition.

Parents' past hardships can cause disconnect, making AANHPI children feel guilt and misunderstanding, often leading to their mental health struggles being invalidated.

YOU CAN UNDERSTAND WITHOUT EXCUSING

AANHPI COMMUNITIES & CULTURES:

Mental illness can feel like a threat to family honor in AANHPI communities.

 Fear of possip and shame often stops AANHPIs from seeking help, prioritizing reputation over well-being.

Western models of care primarily focus on individual needs. which can clash with collectivist AANHPI cultural values and even family dynamics that reflect practices such as filial piety.

COMMUNICATING SUFFERING:

- **AANHPI** may express emotional distress physically, such as through chronic pain or psychosomatic symptoms, due to cultural patterns of somatization.
- Asian mind-body unity supports holistic healing, which can make exploring emotional causes of physical pain more culturally comfortable.

 Western diagnoses often miss cultural expressions like shénjing shuāiruò, which remains valid in many Asian contexts despite being dropped from the Diagnostic & Statistical Manual (DSM).

SEEKING TREATMENT

Many AANHPI communities rely on traditional healing practices, leading to distrust in Western psychiatric treatment, but both can be integrated safely and effectively when informed. Fears around medication, cultural stioma, and immioration-related insurance barriers can all hinder access to care, making it crucial to approach treatment with cultural sensitivity and accurate information.