OHIO SUICIDE PREVENTION FOUNDATION

Suicide Prevention in Ohio's Asian-American Community

The Asian-American community is the fastest growing population in the United States, and currently makes up 3.1 percent of Ohio's total population.¹ To best serve the Asian-American Native Hawaiian Pacific Islander (AANHPI) community, it is critical to understand the diverse and complex experiences of those who may be just arriving in our state, as well as those whose families have been here for generations.

Defining AANHPI in Ohio

The AANHPI community represents 48 different countries, and within those countries there are more than 100 languages and dialects spoken as well as many different religions and cultural factors that may contribute to an AANHPI individual's identity.

In Ohio, Asian-Indian, Chinese, and Filipino communities account for 60 percent of the AANHPI population. But there are also a number of Korean, Vietnamese, Japanese, and – more recently – Nepali and Bhutanese communities. The counties with the top AANHPI populations are Franklin, Cuyahoga, Hamilton, Summit, and Delaware.¹

Suicide Risk in the AANHPI Community

Suicide is the 9th leading cause of death among AANHPI people.² Many who hold refugee or immigrant status experience PTSD from displacement and are at a higher risk for suicide. Low socio-economic status and stressful life events can also increase risk.³ Unfortunately, many of these individuals do not have access to mental health care services, due to language, financial, or insurance barriers, which can further isolate and complicate a person's life.

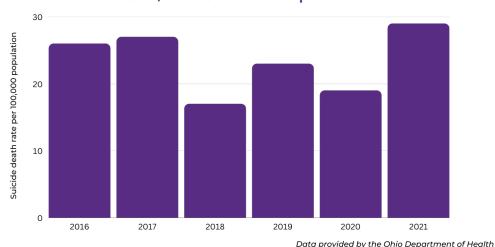
For second and third generation AANHPI, the challenges may not be as visible. Many youth report a lack of understanding of their heritage, and may be unable to speak the language of their parents or grandparents, causing them to feel disconnected. AANHPI youth have a suicide attempt rate of 9.5% compared to 8% of the total youth population.⁴ Stigma is also a major factor that inhibits many from seeking support and many AANHPI communities do not speak about mental illness, seeing it as a weakness or something to be ashamed of. As one participant shared in a study, "Our parents dealt with different kinds of stresses than we do now, and the stress we go through now, they might see as a non-issue."

For all AANHPI, regardless of their nationality, discrimination is a major contributing risk factor. Many AANHPI reported increased incidents of racism, discrimination, and violence due to negative and xenophobic rhetoric surrounding the COVID-19 crisis. In fact, the Federal Bureau of Investigation documented a 77% increase from 2019 to 2020 in violence against Asian people living in the US.⁶

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Number of Suicide Deaths in Ohio's Asian/Pacific Islander Population



According to reports from the Ohio Department of Health, from 2020 to 2021, suicide deaths among Asian/Pacific Islander Ohioans increased by 53%.

Addressing the AANHPI Community in Suicide Prevention

There is no one right answer for how to help AANHPI communities, but there are many areas where we can start. Cultural humility training for mental health professionals is different from cultural competency because competency requires a deeper understanding and expertise than what may be possible for one professional to achieve. With cultural humility training, a professional learns how to ask for more background on a person's experiences to better inform their clinical approach. For example, understanding that sometimes AANHPI individuals do not directly say they have depression or anxiety, but may discuss physical symptoms such as tiredness or loss of appetite, can help professionals best serve those in their care.⁷

Another area for improvement would be allocating increased funding for interpretation services. About 5% of counselors in the US identify as Asian American,⁸ so offering interpretation, although not a perfect solution, is one step toward increasing the accessibility of Ohio's behavioral health care system.

There is also a large disparity in the research surrounding AANHPI mental health. Without collective knowledge in this area, behavioral health professionals are unable to advocate for the training and education required to truly offer culturally responsive care.

Because the population is growing so rapidly, investing in these solutions now can ensure that we are meeting the needs of AANHPI in our behavioral health care system – which will ultimately benefit Ohio's future as a leader in mental health best practices.

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ABOUT OHIO SUICIDE PREVENTION FOUNDATION

OSPF gives hope to those in crisis, strength to those in the struggle, and comfort to those in grief.
OSPF is a non-profit organization that works tirelessly to help all of Ohio's communities reduce the risk of suicide. Our work includes supporting those impacted by suicide, raising awareness of mental health issues, and coordinating community resources and evidence-based prevention strategies across the state.



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