

Research Centre for Sustainable Hong Kong¹ City University of Hong Kong

Policy Paper 17 Strategies and Actions for Promoting the Mental Health of Ethnic Minorities

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Strategies and Actions for Promoting the Mental Health of Ethnic Minorities

Introduction

Racial equality has become a global concern in recent years. As a cosmopolitan city with a mix of Eastern and Western cultures, Hong Kong should prioritize promoting racial equality for all citizens coming from different ethnic backgrounds. More than 92% of the population in Hong Kong is Chinese, a much higher percentage of ethnic Chinese than in other Asian regions such as Singapore and Malaysia. ³ In developing health care policies and service delivery, including allocating resources to address mental health issues in the community, the Hong Kong government and other stakeholders often consider the practices of Chinese culture and the needs of this population group with little attention to the needs and cultural practices of other ethnic minority groups. Adopting the principle of racial equality, ethnic minorities should be

¹ Established in June 2017 by a cross-disciplinary research team, the Research Centre for Sustainable Hong Kong (CSHK) is an Applied Strategic Development Centre of City University of Hong Kong (CityU). CSHK conducts impactful applied research with the mission to facilitate and enhance collaborations among the academic, industrial, and professional service sectors, the community, and the government for sustainable development in Hong Kong and the Region. Linda Chelan Li, Professor of the Department of Public Policy at CityU, is Centre Director. For more information, please visit <u>www.cityu.edu.hk/cshk</u>. Send comments on the paper to <u>sushkhub@cityu.edu.hk</u>.

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given equal opportunity to access mental health services that fit their needs, taking into account their unique cultures and backgrounds.

Mental health issues have been receiving more attention from the public, the government, and various stakeholders in society. However, the unique culture and mental health needs of ethnic minority individuals in Hong Kong are often underacknowledged in mental health promotion and intervention. This paper reports on the service user data of the territory-wide Integrated Community Centres for Mental Wellness (ICCMWs) and examines the accessibility of these services by ethnic minorities. Based on the data, we propose four measures that the government and NGOs can implement to enhance mental services for ethnic minorities in Hong Kong.

Lack of knowledge and limited information, inability to grasp cultural differences, and the current situation

Cultural disparities, such as cultural stigma, discrimination, and lack of understanding of mental health, have been identified as important barriers affecting the utilization of mental health services by ethnic minorities.⁴ *The Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition* (5th ed.; *DSM-5*) explains the relationship between cultural concepts and mental health and recommends that clinicians pay attention to the influence of cultural differences during their diagnosis of cases in the ethnic minority (EM) population.

Little is known about the mental health of ethnic minorities in Hong Kong. According to the *Hong Kong Mental Morbidity Survey 2010–2013*, the prevalence rate of general mental illness is 13.3% among Chinese adults aged 16 to 75. However, the report does not show the data related to ethnic minorities. *The Mental Health Census*, which was recommended by the Advisory Committee on Mental Health and initiated in 2018, is expected to report their findings in 2021-22. At present, without much concrete data, the discussion on the mental health needs of ethnic minorities among the government, academics, social service professionals, and other stakeholders remains empty talk.

⁴ American Psychiatric Association (n.d.) Mental Health Disparities: Diverse Populations. Retrieved from <u>https://www.psychiatry.org/psychiatrists/cultural-competency/education/mental-health-facts</u> and Cultural Concepts in DSM-5. Retrieved from <u>file:///C:/Users/chunglo/Downloads/APA_DSM_Cultural-Concepts-in-DSM-5%20(1).pdf</u>

Understanding the needs of ethnic minorities from community mental health gatekeepers With government subvention, ICCMWs were established by NGOs in 18 districts of Hong Kong in 2010. According to the Social Welfare Department, the purpose of the centres is to "provide one-stop, district-based and accessible community support and social rehabilitation services ranging from early prevention to risk management for people in recovery, persons with suspected mental health problems, their families/carers and residents living in the serving district through a single-entry point." ⁵

To get an in-depth understanding of the mental health needs and service utilization patterns of ethnic minorities, we collaborated with the Network on Services for Persons with Mental Illness of the Hong Kong Council of Social Service, by distributing questionnaires to all ICCMWs to gain understanding about the utilization of corresponding services between 2015 and 2018. We also invited frontline social workers from 11 NGOs to participate in focus groups. After collecting quantitative data from 24 NGOs operating ICCMWs in Hong Kong, we found that ethnic minorities accounted for less than 1% of the total number of people served by the centres (0.49% in 2015–16; 0.58% in 2016–17; 0.68% in 2017–18). Such a low percentage is not comparable to the population ratio of ethnic minorities (8% of the population) in Hong Kong (See Table 1).

In addition, in the focus groups we conducted, frontline ICCMW social workers shared their experiences of assisting ethnic minorities. From their experience and observations, the way ethnic minorities understand mental health is significantly influenced by their own culture. Whether is it attributed to language differences or religious backgrounds, they show certain differences from the mainstream Chinese service users. Moreover, the lack of a friendly environment in which service providers speak their language renders a barrier for the EM population in HK to obtain relevant service information. In addition, the influence of family members and peers reduces their desire to seek help. From the perspective of frontline practitioners, the lack of training in cultural competence and sensitivity of ethnic minorities, the huge workload for Chinese users, and reservations at the managerial level about the development of ethnic minority mental health services have all discouraged them from making time and putting in the extra effort required to serve ethnic minorities.

⁵ Integrated Community Centre for Mental Wellness.

https://www.swd.gov.hk/tc/index/site pubsvc/page rehab/sub listofserv/id supportcom/id iccmw/

District	Proportion of ethnic minority service users (%)			Percentage of
	2015–16	2016–17	2017–18	ethnic minority population (%) ⁶
Central and Western	0.77	0.56	0.61	17.1
Islands	3.59	3.68	4.13	22.1
Eastern District	0.56	0.72	0.76	9.1
Wan Chai	0.55	1.76	2.25	22.1
Wong Tai Sin	0.45	0.48	0.62	3.4
Kwun Tong	0.66	0.61	0.48	3.9
Sai Kung	0.30	0.40	0.39	8.6
Kowloon City	0.69	0.86	0.82	10.1
Yau Tsim Mong	1.10	0.84	0.67	15.6
Sham Shui Po	0.16	0.25	0.63	5.9
Tsuen Wan	0.26	0.25	0.49	6.6
Kwai Tsing & Kwai Chung	0.48	0.92	1.43	4.4
Sha Tin	0.05	0.05	0.09	5.7
Tai Po	0.21	0.20	0.28	6.7
North District	0	0.06	0	3.8
Yuen Long	0.20	0.36	0.79	6.4
Tuen Mun	0.58	0.68	0.61	4.2
Total	0.49	0.58	0.68	

Table 1. Proportion of minority service users in ICCMWs

⁶ Census and Statistics Department of the Government of the Hong Kong Special^[1]_{SFP}Administrative Region (2017). Hong Kong 2016 Population By-census—Thematic Report: Ethnic Minorities. Hong Kong: Author. Retrieved from <u>https://www.censtatd.gov.hk/hkstat/sub/sp459.jsp?productCode=B1120100</u>

Multipronged strategies to respond to the mental health needs of ethnic minorities

Our survey results revealed that the mental health needs of ethnic minorities have not been fully recognized. The management of NGOs and frontline practitioners pay limited attention to the mental health needs of ethnic minorities. Official statistical information on the mental health of this population is not available, and there is no corresponding policy. All these factors hinder ethnic minorities from obtaining appropriate mental health services. To enhance mental health services for ethnic minorities, we propose that the government and mental health service providers adopt the following measures:

- (1) First, we believe that all stakeholders involved in developing future policy and support services should work together through the lens of multicultural perspectives. In addition to strengthening related services, it is necessary to consider the unique needs of ethnic minorities in designing and implementing services, in order to provide appropriate interventions. The Hong Kong SAR government stated that in addition to medical services, community and inter-professional support for mental health services will be included in *The Mental Health Review Report* ⁷, yet the mental health needs of ethnic minorities have not been put on the table for discussion. Therefore, we suggest that service design should consider ethnic minorities' cultural customs, religious backgrounds, and dietary habits, in order to ensure appropriate services can be offered. In addition, the government should collect and regularly publicize the data about ethnic minorities' mental health needs, such as prevalence rate of mental illness, service utilization rates, mental health conditions and that of ethnic Chinese.
- (2) Second, we believe that mental health service providers, including management and frontline practitioners, should adopt a multicultural perspective in service design, promotion and evaluation; for instance, providing comprehensive translation services, cultural appropriateness, and sensitivity training for cross-professional support staff, and setting up peer support job positions for ethnic minorities. Moreover, it is important for the government to provide related resources and take the initiative to improve services, so that ethnic minorities can access relevant service information. To this end, the government should review whether the content of government websites has sufficient

⁷ The Mental Health Review Report.

https://www.fhb.gov.hk/download/press and publications/otherinfo/180500 mhr/e mhr full report.pdf

language options and if the translation of different versions of leaflets and websites is accurate. The three ethnic outreach teams funded by the Social Welfare Department established in March 2020 should also play a supporting role in incorporating service users in need of mainstream services. Only through continuous improvement of services can health care providers offer more appropriate services to ethnic minorities. Besides ICCMWs, some service users of halfway houses (for people in recovery) are also serving ethnic minority users. However, it is questionable whether the support services are adequate and appropriate for them.

- (3) Third, we propose hiring more ethnic minority social workers and peer support workers to improve mental health services. Since all students enrolling in social work courses are required to meet the Chinese language proficiency requirements of social work training institutions, it may be difficult for non-Chinese-speaking students to become social workers. Currently, there are only a handful of social workers in Hong Kong from ethnic minority backgrounds. Only one of them is engaged in mental health services, making it difficult to promote such services among ethnic minorities. However, the entry requirements for social work courses may be hard to alter and it takes years to train professional social workers. To deal with the problem, we suggest that the ICCMWs hire some representatives from ethnic minority groups as peer support workers. The Ethnic Minority Regional Ambassador Pilot Program implemented by the Social Welfare Department may help prepare some ethnic minority ambassadors to become support workers in the ICCMWs.
- (4) Fourth, we propose introducing thematic service indicators for ethnic minority mental health care in the five ICCMWs. We understand that it may not be cost-effective to require every ICCMW in Hong Kong to have sufficient human resources and supporting facilities to provide appropriate services to ethnic minorities. Considering the interests of all parties, it would be more feasible to designate ICCMWs in the five districts (Hong Kong Island, Kowloon East, Kowloon West, New Territories East, and New Territories West) to serve the ethnic minorities in each area. In this way, resources can be concentrated, and relevant service organizations can acquire experience in providing mental health service to ethnic minorities.