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## Top five mental illness myths in Chinese American communities

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*Lee emigrated from Guangzhou to the United States at age 30 with her husband and their 5-year-old son. She is now 60 years old and works as a nursing assistant at a local hospital, and her son — now 35 — is married and living in a different state. Over the past six months, Lee has felt increasingly sad and anxious. She wonders who will take care of her and her husband when they get older. She experiences stress at work due to language difficulties causing conflict with her co-workers. She feels guilty about not making enough money to send home to her family in Guangzhou to help care for her elderly parents. These worries keep her up at night and she only gets three or four hours of sleep, laying awake in bed the rest of the time as her mind races. She has little appetite and lost 10 pounds. She feels tired and sluggish during the day, and cannot concentrate. Sometimes she wonders what the point of living is. However, she never tells anyone other than her husband about these problems, because she believes she needs to address them herself by working harder, and she is afraid that people will say she is crazy.*

Mental health is a taboo topic for many Chinese Americans, in part because psychiatric illness is stigmatized in traditional Chinese culture. Even today in China, accusing someone of having a mental illness is a way of insulting or discrediting them, and having a family member with mental illness can make it harder to have friends or get married. This may be in part due to Chinese culture's strong emphasis on social stability and harmony, which can be threatened by behavior seen as abnormal and unpredictable in the case of severe mental illnesses such as schizophrenia or bipolar disorder. It also relates to traditional Chinese beliefs about the cause of psychiatric symptoms, which sometimes involve possession by evil spirits or punishments for bad actions committed in a previous life.

Unfortunately, as a result of this stigma, many Chinese American families affected by mental illness try to hide this information to save face. They also avoid talking about much more common and less severe psychological problems such as depression and anxiety, out of fear of being labeled as crazy. People with mental distress are often shunned or told to just work harder,

when in fact this type of attitude can make them feel even more alone and hopeless. The consequences of the Chinese community's reluctance to discuss mental health problems include delays in seeking treatment, lower quality of life, problems with work or school, and poor health outcomes, including high blood pressure, diabetes, heart attacks, strokes, and even suicide. East Asian countries such as South Korea and Japan have some of the highest suicide rates in the world. (Official statistics on suicide reported by the Chinese government are lower but have unclear validity.)

This article addresses some common myths about mental illness that exist in the Chinese American community. Decreasing stigma and increasing conversations about these important topics can encourage those who are suffering to get the help they need.

### **Myth 1: Having a mental illness means you are crazy.**

This myth relates in part to terminology; the Chinese phrase “神經病” (literally, “sick nerves”) translates directly to psychosis or craziness. This label then gets wrongly applied to anyone who possesses any mental problems or seeks care from a psychiatrist or psychologist. When most people envision a “crazy” person, they are likely thinking about a severe psychiatric condition called schizophrenia, which exists at a rate of about 1 percent worldwide regardless of culture. Schizophrenia is characterized by psychotic symptoms such as hallucinations (seeing or hearing things that are not there) or delusions (having fixed, false beliefs that cause distress or impaired functioning.) However, the term “mental illness” refers to a broad category of conditions, most of which do not involve psychosis, such as depression, anxiety, eating disorders, obsessive-compulsive disorder (OCD), etc.

### **Myth 2: People with psychiatric illnesses are more violent than other people.**

Numerous studies have shown that the vast majority of people who commit violent acts are not mentally ill. It is possible that the media focuses more on violent acts committed by mentally ill individuals, or that acts of mass violence are wrongly attributed to mental illness, both of which make it seem like a bigger problem than it is.

### **Myth 3: Mental illness is a Western phenomenon.**

It is difficult to accurately study mental illnesses across cultures since there is no physical test for problems like depression or bipolar disorder. However, the best evidence suggests that these illnesses exist at similar rates throughout the world. Recent large studies in China have found that rates of depression are about equal to those in the U.S. Similarly, as described above, severe psychiatric disorders such as schizophrenia appear to affect all cultures at equal rates.

### **Myth 4: People with psychiatric problems just need to work harder, or must have done something wrong in a previous life.**

While the causes of psychiatric illness remain unclear, there appears to be a combination of genetic and environmental risk factors such as stress. These illnesses are not related to how hard a person works. In fact, it is the opposite—mental illnesses such as depression often cause people

to be unable to work. In this way, mental illnesses resemble other physical illnesses such as colds or infections. People cannot simply work harder and get better. They need to rest, improve their self-care (such as diet, sleep, and exercise), and in some cases, get professional help for their problems to have the greatest chance of improvement.

**Myth 5: There are no treatments for mental illness.**

Mental illnesses are extremely treatable. For more serious illnesses like bipolar disorder, schizophrenia, obsessive compulsive disorder, and severe depression, very effective medications exist that can help alleviate symptoms and allow people to live normal lives. For more common problems like mild depression and anxiety, a variety of treatments are available, including self-management (diet, exercise, activity scheduling, mood monitoring, etc.), talk therapy, and medications. The choice of which to use is up to each individual's preferences, but all are better than simply ignoring the problem.

If you know someone who is suffering from psychological distress, encourage them to seek help from a medical provider. They do not have to take medications, but can instead learn more about their symptoms and possible treatments, including simple changes in their life and their thought patterns that can help them feel better.

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