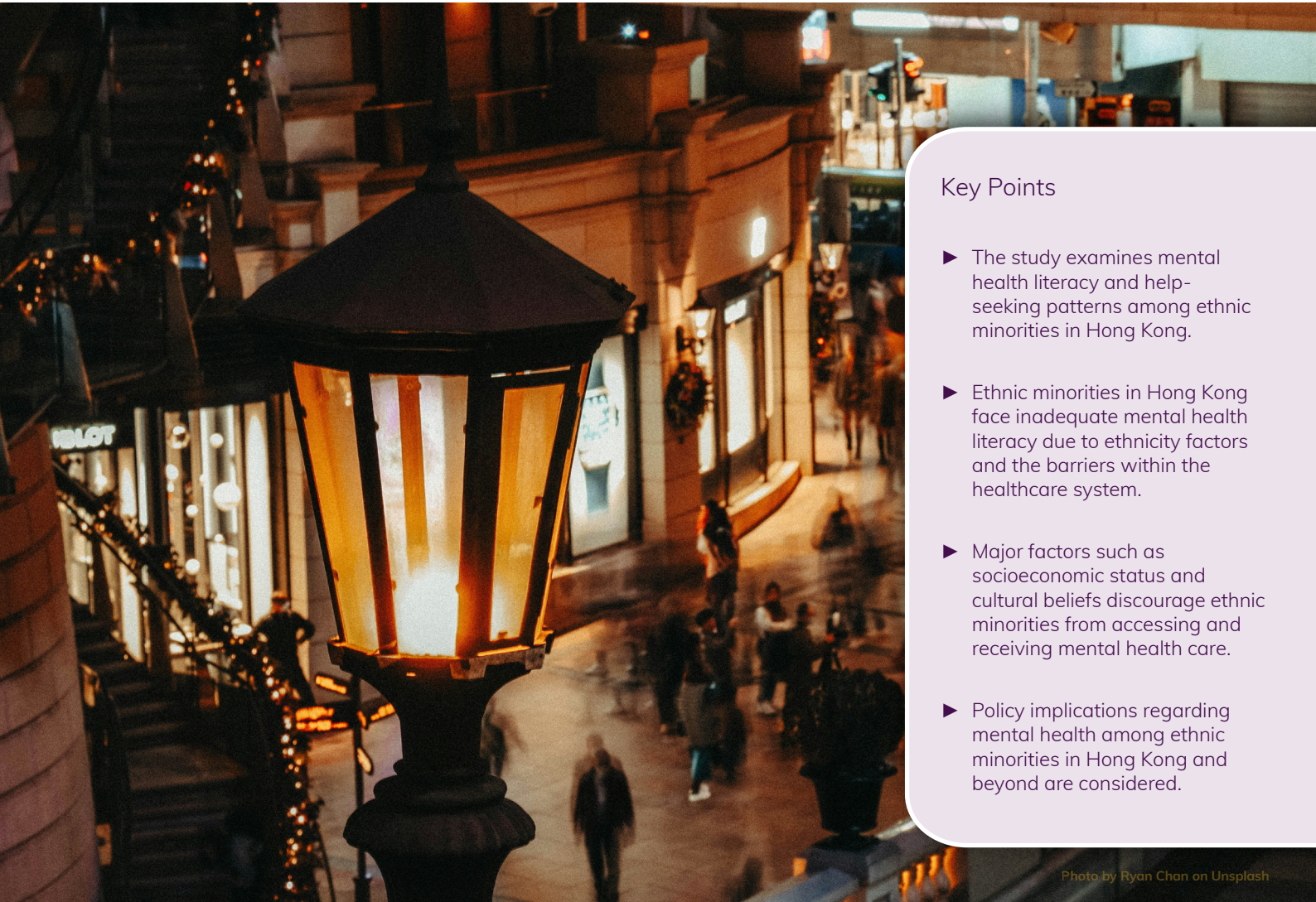


# Promoting Mental Health Equity: Enhancing Ethnic Minority Mental Health Literacy and Help-Seeking in Hong Kong

Naubahar Sharif, Chen Wenjin



## Key Points

- ▶ The study examines mental health literacy and help-seeking patterns among ethnic minorities in Hong Kong.
- ▶ Ethnic minorities in Hong Kong face inadequate mental health literacy due to ethnicity factors and the barriers within the healthcare system.
- ▶ Major factors such as socioeconomic status and cultural beliefs discourage ethnic minorities from accessing and receiving mental health care.
- ▶ Policy implications regarding mental health among ethnic minorities in Hong Kong and beyond are considered.

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## Policy Focus

The growing population of ethnic minorities (EMs) in Hong Kong faces significant mental health risks. Recent data from the Hong Kong Christian Service (2024) reveal that approximately 3 of 10 EM Hong Kong residents are highly vulnerable to mental health problems. Additionally, the population of elderly EM individuals (excluding foreign domestic helpers) has experienced a remarkable 166% increase over the past decade. It is therefore crucial to investigate mental health literacy (MHL) and help-seeking behaviors among EMs in Hong Kong. MHL and help-seeking play a pivotal role in determining

whether individuals can recognize mental health issues, seek appropriate help, and utilize available healthcare resources—actions that should greatly improve their mental health outcomes. While the HKSAR government has attempted to address this issue, there remains a significant knowledge gap regarding MHL and help-seeking behaviors among EMs in Hong Kong. This policy bulletin summarizes a paper by Naubahar et al. (2024) that investigates MHL and help-seeking patterns among certain EMs in Hong Kong. The study sheds light on the following key questions:

- What is the state of MHL among ethnic minorities in Hong Kong?
- What barriers to and facilitators of access to mental health services for ethnic minorities exist?
- What shapes the MHL and help-seeking behavior of ethnic minorities?
- What are the study's policy-making implications?

### Study Methodology

This bulletin summarizes a qualitative study conducted in Hong Kong between December 2023 and March 2024, employing a descriptive–qualitative approach to explore MHL and help-seeking behavior among EM groups based on Laura and Ana's cross-cultural model. Purposive sampling was used to recruit participants from Indian, Nepali, and Pakistani communities in Hong Kong, with a focus on elders—a high-risk population for mental health issues.

Twenty-eight participants sat for in-depth interviews. The participants comprised 23 elderly individuals and 5 caregivers, including 8 elders of Pakistani descent, 8 elders of Indian descent, and 7 elders of Nepalese descent. The semi-structured interviews incorporated concepts from previous studies of MHL. Topics covered included participants' knowledge and beliefs about mental health—risk factors, causes, health-seeking behaviors, access to professional services, and preferred mental health services—as well as their assessments of healthcare systems and policies in Hong Kong.

### Findings and Analysis

The study revealed that cultural beliefs and contextual factors influence ethnic minorities' MHL and help-seeking behaviors. These perceptions are consistently shaped by deficiencies in the public health system. The interplay between ethnicity and the support offered by or barriers to the system shape Hong Kong EMs' MHL and help-seeking behavior.

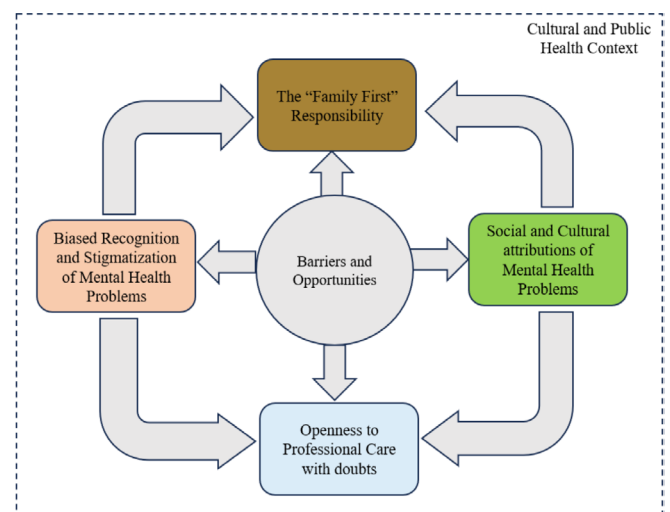
Six themes describe EMs' beliefs and understanding of mental health and help-seeking:

- (1) biased recognition and stigmatization of mental health problems;
- (2) social and cultural attributions associated with mental health problems;

- (3) a “family first” responsibility pattern;
- (4) openness to professional care, with doubts;
- (5) barriers in accessing and receiving services;
- (6) opportunities to promote mental health services.

The findings highlight the relative lack of relevant knowledge among EMs. Additionally, these individuals often lack awareness of available resources. While the participants seemed generally open to formal mental healthcare services, barriers within the public health system discourage them from accessing and utilizing those services.

**Figure 1** Conceptualizing Mental Health Literacy and Help-Seeking of Ethnic Minorities in Hong Kong



#### *Biased Recognition and Stigmatization of Mental Health Problems*

Many participants lacked understanding of mental health problems, considering them less serious than physical conditions and associating them with cognitive dysfunction. Participants believed that mental health issues were rare. Stigma was concerning, discouraging many participants from sharing their struggles with others.

#### *Social and Cultural Attributions of Mental Health Problems*

Participants attributed mental health problems to socioeconomic factors. They also relied on spiritual beliefs to explain symptoms, viewing them as manifestations of God's will or dark magic. Employment disparities and workplace discrimination are also contributing factors, as is inadequate support offered by and cultural insensitivity within public services.

### *The “Family First” Responsibility Pattern*

Participants felt that family members should be consulted first when seeking help. Family relationships were closely tied to mental health and decisions regarding treatment were generally made within family units. Friends and neighbors were seen as having limited capacity to provide support.

### *Openness to Professional Care with Doubts*

Participants expressed a willingness to seek professional mental healthcare services, but doubts and challenges hindered their willingness to access high-quality care. Cultural beliefs and socioeconomic status often lead them to informal or traditional care practices. Some participants were skeptical about professional care while others believe in self-regulation and self-treatment.

### *Barriers in Accessing and Receiving Mental Health Services*

Language differences, insufficient resources, and a lack of culturally sensitive services within the public health system were identified as barriers to accessing mental health services. Participants expressed concern about communication and low service quality in hospitals. Limited awareness of available services and low utilization of community centers further discourage participants from accessing care.

### *Opportunities to Promote Mental Health Services*

Participants recommended increasing awareness of the need for MHL among EMs in Hong Kong by disseminating information more effectively. They suggested providing printed or online materials in their native languages and conducting activities in their communities. Digital platforms like Facebook and YouTube were seen as effective information channels. Participants emphasized the need for enhanced communication, counseling services, and robust provision of government-sponsored mental health services. They also recommended shifting resources from food-based initiatives to consistent healthcare support.

## **Recommendations**

### *Tailored Programs for Enhancing Mental Health Knowledge*

There is an urgent need to expand comprehensive programs designed specifically to enhance mental health knowledge among EMs in Hong Kong. These programs should address the unique needs of these communities and reflect their cultural beliefs and traditions. To ensure effectiveness, a multi-faceted approach encompassing offline and online platforms should be adopted.

### *Strengthening Community Partnerships to Improve Mental Health Literacy*

To enhance MHL among EMs, strong partnerships with community organizations and key stakeholders are crucial. Such partnerships can facilitate the development and implementation of culturally appropriate mental health initiatives. Collaboration with community and religious leaders should be prioritized to promote mental health awareness. Additionally, the establishment of community mental health ambassadors—individuals who are passionate about mental health with strong communication skills—should be considered.

### *Providing Continuing Education and Training for Care Providers*

To ensure the provision of culturally sensitive and effective mental health services for EMs in Hong Kong, it is imperative to prioritize continuous education and training for healthcare and social care providers. Such training should be offered to social workers, mental health professionals, and other caregivers. Cultural competency training must be developed, with a focus on enhancing providers' understanding of cultural beliefs, practices, and language, enabling them to deliver culturally sensitive care.

### *Inclusivity Improvement Plan within the Public Healthcare System*

To address the specific mental health needs of EMs in Hong Kong, an inclusive improvement plan within the public healthcare system must be developed and implemented. Adequate resource allocation will enhance the availability and accessibility of mental health services for EMs. Community outreach efforts should be fostered through partnerships with community centers, religious institutions, and grassroots organizations to establish satellite mental health clinics or dedicated outreach programs within EM communities. Additionally, improving language-support services, through professional interpreters and translators, within healthcare settings is essential for effective communication with EM patients.

## **Main Reference**

Naubahar Sharif, Chen Wenjin\*, and Niu Mengyuan. (2024). “The Intersection of Ethnicity and Public Health System: Shaping Mental Health Literacy and Help-Seeking of Ethnic Minorities in Hong Kong” Working Paper. Available online since 15 May 2024 at <https://emmh.hkust.edu.hk/working-paper>



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