

**Asian Pacific Islander (API) Youth Mental Health Video Contest:  
“Go Beyond Stigma!”**

**PROJECT SUMMARY REPORT**

**I. OBJECTIVE**

The goal of this project, the Asian Pacific Islander (API) Youth Mental Health Video Contest: “Go Beyond Stigma!” was to provide API youth an opportunity to share how mental health issues impact their life, their family, and their community using video. Mental health issues could include a variety of topics including, but not limited to, substance abuse, domestic violence, suicide, bullying, academic pressure, etc. API youth were asked to include how cultural factors have impacted mental health issues in their life (e.g. stigma, acculturation, intergenerational conflicts, etc.), if appropriate. Participating youth had an opportunity to share how they cope with their mental health issues and/or the mental health issues of their loved ones, as well as the impact on their relationships. This project aimed to increase awareness about mental health-related struggles that API youth experience in order to decrease mental health-related stigma and encourage early access of services by youth, families, and the API community at large.

**II. PROGRAM DESCRIPTION**

Go Beyond Stigma was voted by the API Underserved Cultural Communities (UsCC) subcommittee. Rocco Cheng and Associates (RCA) was awarded the contract. The contract was implemented in January 2018.

This project targeted API high school and college-age youth (ages 16-25) across LA County. Youth from all API ethnic communities in LA County were outreached to, including youth who live in areas with high concentrations of API communities including, but not limited to, Service Areas 3, 7 and 8. Additionally, there were targeted efforts to recruit South Asian (Indian, Pakistani, Sri Lankan, etc.) youth and LGBTQ youth. Through collaboration with community agencies, API youth were recruited and educated on mental health issues and resources. API youth were also introduced to the art of storytelling using video and provided training and technical assistance to support the development of his/her own video. Each youth that participated in the program developed a short video (maximum of 3 minutes) on how mental health issues impact his/her life. The videos were submitted as part of a Video Contest and were showcased at an Awards Ceremony.

Quarter 1 (January to May 2018): During this first quarter, consent forms and surveys were developed. Most of the effort was focused on the design of the Go Beyond Stigma website: [www.GoBeyondStigma.Com](http://www.GoBeyondStigma.Com). Once the design of the website was approved, it went public. There were regular visits to the website. By the end of the project (May 2019), there were more than 20,000 visits to the website, which represents a significant impact via digital media to promote mental health awareness, reduce stigma, and share mental health-related information and resources.

Quarter 2 (May to August 2018): This quarter focused on outreach to targeted API youth in several communities. The consultant collaborated with several community agencies and hosted 8 Information Sessions reaching **165** individuals:

- 6/26 Asian Pacific Family Center (APFC) – UC Irvine campus tour (20 attendees)
- 6/29 Tzu Chi Foundation – Suicide prevention workshop (35 attendees)
- 7/13 TzuShao Youth Group (35 attendees)
- 7/15 Samoan Community Church – suicide prevention workshop (34 attendees)
- 7/21 ACI Institute stress management workshop (12 attendees)
- 7/23 Long Beach YMCA summer camp Cambodian youth group (9 attendees)
- 7/24 SAHARA summer program South Asian youth group (12 attendees)
- 7/27 APAIT queer youth group (8 attendees)

After the Information Sessions, 28 youth expressed interest in the project and 20 of them turned in Entry/Consent Forms. By the end of Quarter 2, 17 youth still expressed interest in going through with the training.

Quarter 3 (September to December 2018): This quarter focused on training youth to use their phone or cameras to make videos. Two technical consultants were contracted to teach the youth about video making. Training topics included script writing, creating a story board, and filming the video (lighting, angling, framing etc.). A total of 5 formal training sessions were conducted to help participating youth with the process of making videos. By the end of the quarter, 12 youth remained in the project. They submitted a total of four video entries.

Quarter 4 (January to May 2019): This was the last quarter of the project. Six judges were recruited to score the four final entries. These judges included two expert API filmmakers, two API community members (consumers, queer youth), and two API YouTubers. The consultant worked with a community agency to secure a date for the Awards Ceremony. The Awards Ceremony was hosted on January 20, 2019 from 2pm to 4:30 pm. Over 50 community members participated in the event and enjoyed the videos as well as food and raffle prizes.

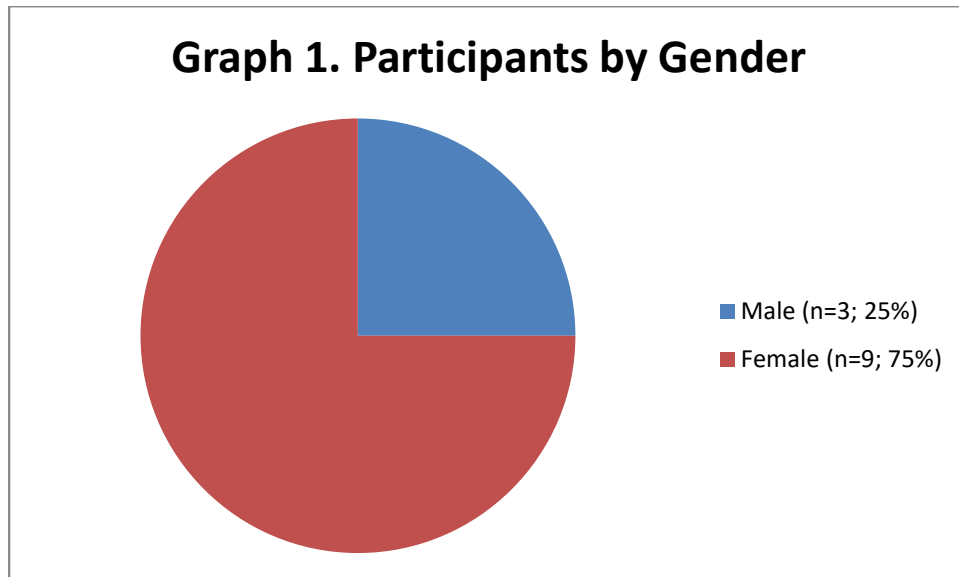
### III. PROJECT OUTCOMES

- A. Demographics of Youth participants: There were 12 youth who participated until the end of the project. From their self-report, there were 3 males and 9 females; 10 identified as straight, one identified as gay, and one refused to disclose. Their age ranged from 14 to 17 years. Table 1 displays the gender and ethnic distribution of the 12 youth participants.

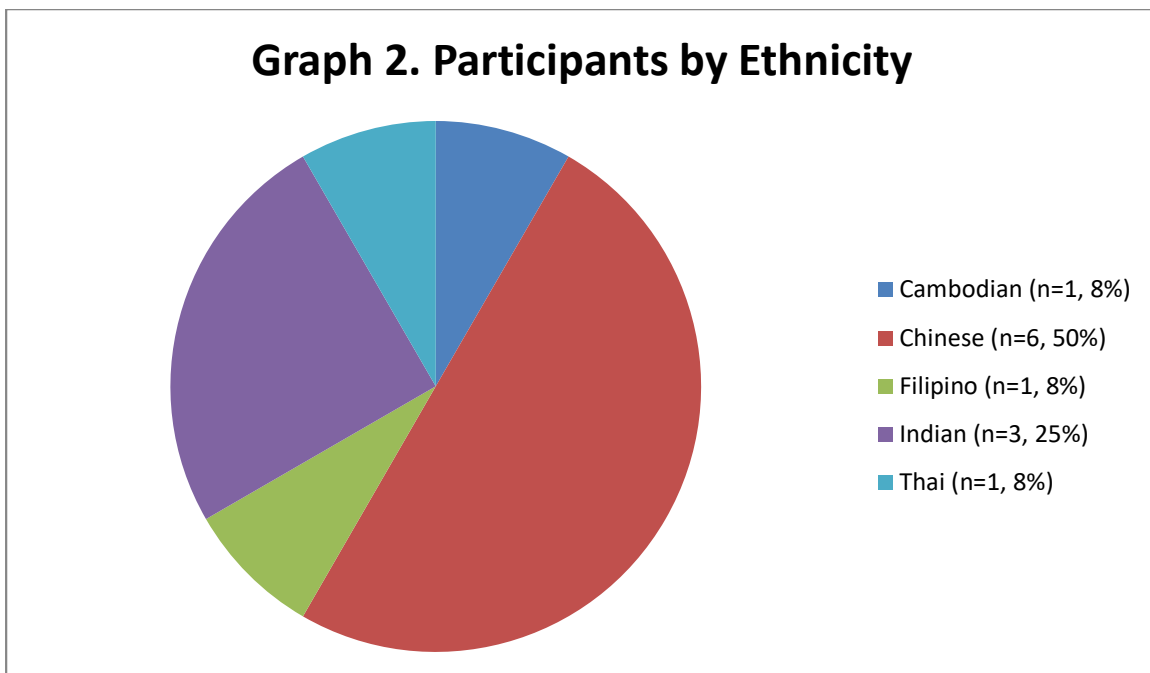
	Cambodian	Chinese	Filipino	Indian	Thai	Subtotal
<b>Male</b>	1	2	-	-	-	3
<b>Female</b>	-	4	1	3	1	9
<b>Total</b>	1	6	1	3	1	12

Table 1. Demographics for 12 youth participants.

Graph 1 below illustrates the gender of the 12 youth participants. There were 3 male (25%) and 9 female (75%) youth participants.



Graph 2 below illustrates the ethnicity of the 12 youth participants. Most of the youth were Chinese (n=6 or 50%) and Indian (n=3 or 25%). There was one youth from each of the following ethnic background: Cambodian, Filipino, and Thai.



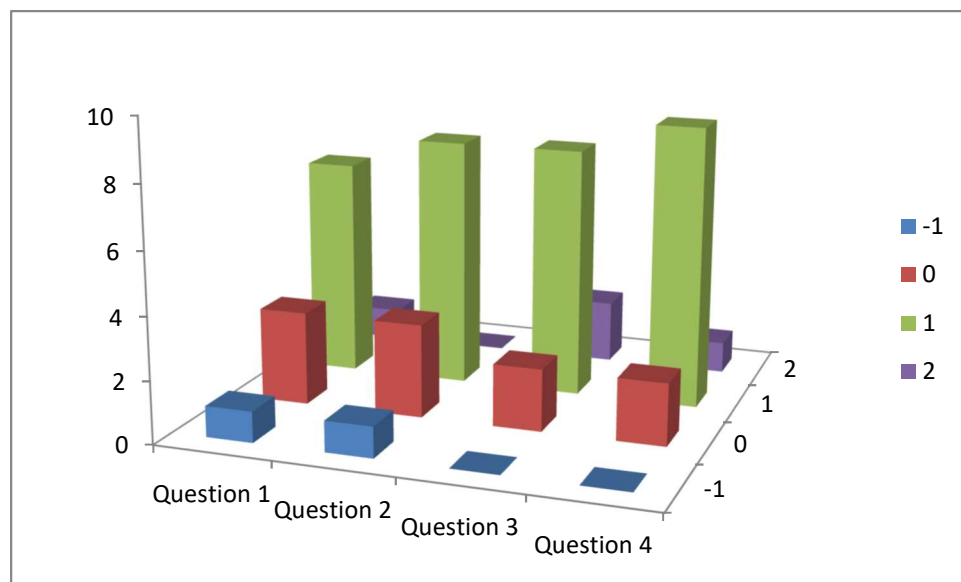
- B. Pre and Post-tests completed by youth participants: Each of the 12 youth participants completed pre- and post-tests (Attachment 1) to measure their change over time with regards to their knowledge and awareness about mental health, using Likert Scales. The results are summarized in Table 2 below.

	Difference Score (Post-Test subtract Pre-Test score)			
	-1	0	+1	+2
1. I am knowledgeable about different types of mental illness	1	3	7	1
2. I know the signs and symptoms of mental illness	1	3	8	0
3. I feel comfortable interacting w/ people who have mental health conditions	0	2	8	2
4. I am aware of mental health resources available in the community	0	2	9	1

Table 2. Change in score in Pre-test and Post-test for participating youth.

### Explanation:

A Difference Score (D-Score) was derived by comparing the difference between the pre-test response and the post-test response to each question. A positive D-Score indicated a change towards a favorable attitude (more understanding or more acceptance) towards people with mental health issues. A “0” represented no change in attitude. A negative D-Score represented one’s response moved towards less favorable direction (less understanding or less acceptance) towards people with mental health issues.



Graph 3. Changes in Knowledge and Awareness Associated with Mental Health Issues

As indicated by the D-Scores from the 4 questions listed above, most youth reported a positive change indicating that they felt more comfortable interacting with people who

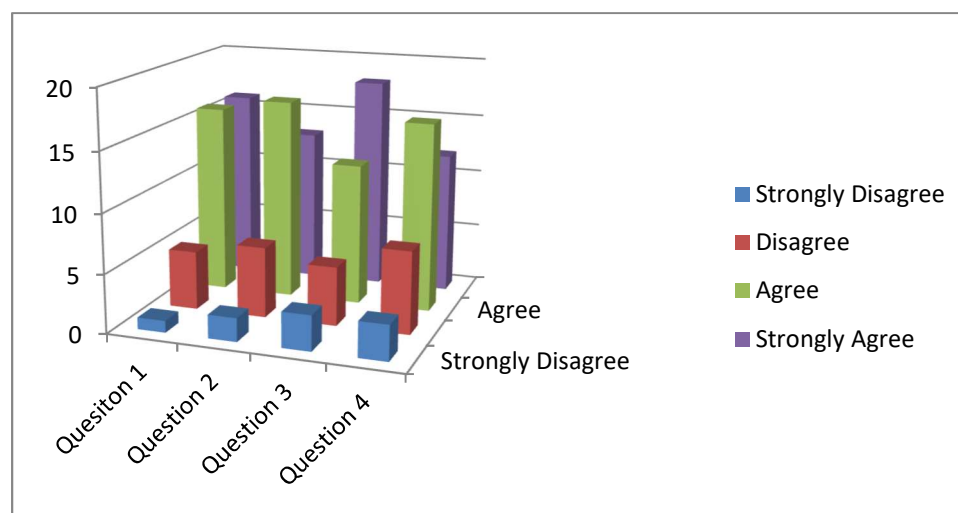
have mental health conditions or they felt they were more knowledgeable about mental illness after the training. This outcome is encouraging as it indicated that these youth have gained more understanding and became more comfortable with mental health issues. It is thus reasonable to assume that stigma and discrimination reported by these youth had decreased.

While the trend of the outcomes indicated a significant positive change in most youth participants, there were two responses indicated a negative change. It represents 5% of the responses (2 out of 48 responses: 4 questions x 12 youth). This finding may be perplexing at first glance; however, it is not unusual as reported by many prevention researchers. Youth participants often under-report unfavorable behaviors (e.g., substance use, prejudice, etc.) in pre-tests due to social desirability or wanting to present a favorable light. Once they establish trusting relationships with the program staff, they are more likely to report the actual condition, which may lead to a negative outcome (e.g., more substance usage, more prejudice etc.). It is likely that the two responses were due to “honest” reporting during the post-test and not due to a negative change in awareness or knowledge.

- C. *Community Survey from Awards Ceremony*: Over 50 people participated in the Award Ceremony at the Tzu Chi San Gabriel Service Center (9296 Flaire Drive, El Monte, CA 91731) on January 20, 2019. A total of 38 attendees (76%) completed a survey (Attachment 2). They responded to 4 questions, which are listed below. The results are listed in Table 3 and illustrated in Graph 4.

	Strongly Disagree	Disagree	Agree	Strongly Agree
1. I am knowledgeable about different types of mental illness	1	5	16	16
2. I know the signs and symptoms of mental illness	2	6	17	13
3. I feel comfortable interacting with people who have mental health conditions	3	5	12	18
4. I am aware of mental health resources available in the community	3	7	16	12

Table 3. Summary of Award Ceremony Attendants Responses of Community Survey.



Graph 4. Responses from Award Ceremony Attendants

Awards Ceremony attendants reported overall agreement with these statements indicating a favorable direction. This meant they were aware of and felt comfortable interacting with individuals who have mental health issues. However, these quantitative results may not fully illustrate the effect of the Award Ceremony event. It is helpful to integrate some of the commentaries that audience members shared during the event to understand the impact of the event. Several people expressed that they learned more about mental health issues and resources, while others mentioned that they were more aware of their own biases and lack of understanding. Overall, the event and the videos helped participants better understand mental health issues and the stigma/discrimination often associated with mental health issues. Participants were very appreciative of this project and the opportunity to raise their awareness.

- D. Testimony of participants about the impact of this project: Many of the testimonies were captured by video and presented at the Awards Ceremony. Some of them are listed below. Overall, the youth were glad that they had the chance to be part of the project and felt proud of their accomplishment. They also reported that they had more awareness of mental health issues and the needs of people who are going through these issues. They reported becoming more open and supportive toward helping others with their mental health issues.

*“I am glad that I can advocate for people from my community. Mental health issues are nothing to be ashamed of it. We need to help people who have these challenges.”* Youth Participant

*“Many of my people have depression and PTSD, I am glad that I can use the video to encourage them to seek help.”* Youth Participant

*“It’s hard for new immigrants to adjust to the new life here, I hope there is less bullying happening on school campuses and we can support new kids in the country.”* Youth Participant

*“People can be cruel to others struggling with mental health issues, I did not like the way people treated me. I hope my video help people understand we need to support each other and share the love.”* Youth Participant

- E. Testimony of attendees from the Award Ceremony: Several people voiced their compliments toward the project and the accomplishments of these youth. Some of the attendee comments are listed below.

*“I was in tears watching the video as it depicted my experience of having to deal with mental health conditions and people’s reaction to it, including bullying and discrimination.”*

*“I can relate to the videos as I went through similar process. One of the videos in particular depicted the internal state very well.”*

*“I am impressed with the technical skills of these youth and their videos. They will be good educational materials for the public to have better understanding of mental health issues and the challenges of it”*

*“We should make these videos available to the public and make them as educational materials to foster better understanding and discussion of mental health issues and how to support people who are struggling with these issues.”*

#### **IV. LESSONS LEARNED**

There were a few major challenges during the project. Three of the major difficulties included collaborating with community agencies with low resources; stigma and discrimination experienced by the LGBTQ group; and limited availability of the youth during school year.

- A. Limited agency capacity: The project required targeted outreach to specific API communities such as South Asian, LGBTQ youth, as well as outreach to specific Service Areas. It was challenging for the consultant to outreach to some areas, such as Service Area 8 (Long Beach area). Many of the organizations contacted were very small agencies. These agencies had very limited staffing and were often unavailable or unresponsive. In reaching out to one particular community, it took the consultant two months to finally receive a confirmation from all four agencies in the community that they did not have the capacity to collaborate on implementing an information event.
- B. Stigma and discrimination experienced by the LGBTQ youth: The project required targeted outreach to API LGBTQ youth. The consultant reached out to several groups, including through social media (e.g., Facebook Groups), and received no interest or response. The event hosted at a community agency that targets LGBTQ youth also had poor attendance. There was one queer youth in the final cohort of youth participants and she was encouraged to submit an additional video from the queer perspective. She was interested to do so, but was discouraged by her parents who cautioned her against coming out in a public forum. She eventually gave up the effort in making an additional video representing the queer perspective.
- C. Limited availability of the youth during school year: As the project moved into the third quarter, school had already been back in session. While youth were interested in the project during the summer, many of them expressed difficulty continuing due to school responsibilities. For those who continued, they also became less responsive. It typically took the consultant multiple attempts at communication (e.g., using e-mails, texting, phone calls, and working with a liaison in collaborating agencies) to get a response.

## **V. RECOMMENDATIONS**

The project explored a new way to outreach to young people regarding mental health awareness. The high school students were very enthusiastic about the idea of advocating for their own community. While they were very excited and interested in the project, the timeline was working against them. The delay was due to the consultant's unexpected personal situation related to family medical issues. If similar projects were to be implemented in the future, it is recommended that the project timeline align with summer vacation schedules, when demands from high school are at their lowest.

While the project was open and promoted to young people up to 25 years old, only high school students signed up for the contest. It is speculated that the lack of interest may be due to the low monetary award for college or post-college youth. While the first prize of \$500 could be a good incentive for high school students, it may not be as attractive for college or post-college youth. It is thus recommended that future projects of a similar nature include a separate category for college or post-college youth and double the prizes.

With regards to collaborating with underserved community agencies, we should consider their capacity. While small agencies may be interested in collaborating, they may not have the required infrastructure to carry out an event that is beyond their regular operation. Thus, it is important to consider the community infrastructure when designing a project.

There is also an issue of stigma and discrimination experienced by the API LGBTQ community. It is challenging for API LGBTQ youth to come out, as it is hard to deal with the stigma and discrimination associated with the LGBTQ identity. Many API LGBTQ youth do not come out to their family or community until they are able to have financial independence. For this reason, one staff from a collaborating agency reported that most of their members were 25 or older and out of the age range of the project. The API LGBTQ youth felt comfortable seeking support from the LGBTQ agency but admitted that it would be much harder for them to "come out" publicly on a project like this. Thus, in order for similar projects in the future to be viable and enticing for API LGBTQ members, we may need to reconsider the age limits, as well as the extent of the project's publicity to ensure that the privacy of API LGBTQ members are protected.



## Attachment 1: Pre-Test

ID number: \_\_\_\_\_

### LACDMHAPI Youth Video Contest 2018: *Go Beyond Stigma!* Pre –Test for Participants

We are glad you have decided to join **Go Beyond Stigma!** We would like to know how much you agree with the following statements. Please circle the responses on the right column according to the following ratings: SD (Strongly Disagree), D (Disagree), A (Agree), SA (Strongly Agree). *We appreciate your willingness to fill out this survey. Your responses are anonymous.*

- |    |  |    |   |   |    |
|----|--|----|---|---|----|
| 1. | I am knowledgeable about different types of mental illness                 | SD | D | A | SA |
| 2. | I know the signs and symptoms of mental illness                            | SD | D | A | SA |
| 3. | I feel comfortable interacting w/ people who have mental health conditions | SD | D | A | SA |
| 4. | I am aware of mental health resources available in the community           | SD | D | A | SA |

**Please provide some information about yourself:**

Age: \_\_\_\_\_

Ethnicity: \_\_\_\_\_

Gender at Birth: ☐ Male ☐ Female ☐ Other (please specify \_\_\_\_\_) ☐ Prefer not to disclose

**Gender Identity** (optional): *Please choose all that apply*

☐ Agender ☐ Androgyne ☐ Demigender ☐ Genderqueer or gender fluid ☐ Man  
☐ Questioning or unsure ☐ Trans man ☐ Trans woman ☐ Woman  
☐ Additional gender category/identity (please specify \_\_\_\_\_) ☐ Prefer not to disclose

**Sexual Orientation**(optional): *Please choose all that apply*

☐ Asexual ☐ Bisexual ☐ Gay ☐ Straight ☐ Lesbian ☐ Pansexual ☐ Queer ☐ Questioning or unsure  
☐ Same-gender loving ☐ An identity not listed: (please specify \_\_\_\_\_) ☐ Prefer not to disclose

Date: \_\_\_\_/\_\_\_\_/2018

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## Attachment 1: Post-Test

ID number: \_\_\_\_\_

### LACDMH API Youth Video Contest 2018: *Go Beyond Stigma!* Post-Test for Participants

Now that you have been completed your participation in the API Youth Video Contest **Go Beyond Stigma!**, we would like to know how much you agree with the following statements. Please circle the responses on the right column according to the following ratings: SD (Strongly Disagree), D (Disagree), A (Agree), SA (Strongly Agree). *We appreciate your willingness to fill out this survey. Your responses are anonymous.*

- |    |  |    |   |   |    |
|----|--|----|---|---|----|
| 1. | I am knowledgeable about different types of mental illness                 | SD | D | A | SA |
| 2. | I know the signs and symptoms of mental illness                            | SD | D | A | SA |
| 3. | I feel comfortable interacting w/ people who have mental health conditions | SD | D | A | SA |
| 4. | I am aware of mental health resources available in the community           | SD | D | A | SA |

Date: \_\_\_\_/\_\_\_\_/2018

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## Attachment 2: Event Survey

### LACDMH API Youth Video Contest 2018: *Go Beyond Stigma!* Survey for Event Participants

Thank you for coming to the API Youth Video Contest *Go Beyond Stigma!* Awards Ceremony and Community event!

We would like to know how much you agree or disagree with the following statements. Please circle the responses on the right column according to the following ratings: SD (Strongly Disagree), D (Disagree), A (Agree), SA (Strongly Agree). *We appreciate your willingness to fill out this survey. Your responses are anonymous.*

- |    |  |    |   |   |    |
|----|--|----|---|---|----|
| 1. | I am knowledgeable about different types of mental illness                 | SD | D | A | SA |
| 2. | I know the signs and symptoms of mental illness                            | SD | D | A | SA |
| 3. | I feel comfortable interacting w/ people who have mental health conditions | SD | D | A | SA |
| 4. | I am aware of mental health resources available in the community           | SD | D | A | SA |

#### Please provide some information about you:

Age: \_\_\_\_ (14 or younger) \_\_\_\_ (15-25) \_\_\_\_ (26-59) \_\_\_\_ (60 or more)

Ethnicity: \_\_\_\_\_

Gender: \_\_\_\_ Male \_\_\_\_ Female \_\_\_\_ Other (please specify \_\_\_\_\_) \_\_\_\_ Prefer not to disclose

City where you live: \_\_\_\_\_ Zip code \_\_\_\_\_

Date: 1/20/2019

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