



STORYTELLING THEATER FOR HEALING AND SOCIAL JUSTICE

Final Summary Report



LOS ANGELES COUNTY
DEPARTMENT OF
MENTAL HEALTH
hope. recovery. wellbeing.



PROGRAM DESCRIPTION

The purpose of the Storytelling Theater for Healing and Social Justice (ST) project is to promote mental health services, increase awareness and education around mental health, and reduce stigma within Asian American communities in Los Angeles County. ST incorporates a theatrical component that provides a platform for Asians and Asian Americans to share their stories, explore their immigrant identities, and discuss their mental health experiences. Through short theater plays and performances, ST addresses and highlights the intersection of Asian immigrant identities and mental health, celebrating their cultural heritage. Additionally, ST aims to educate the Asian American community on the significance of immigration as it relates to cultural identity, rights, and mental health

Objectives

The goal of the ST is to outreach, educate, and increase knowledge pertaining to mental health issues and services by utilizing a non-stigmatizing and empowering method which aims to accomplish the following objectives:

- Increase awareness and knowledge related to mental health illness and combat stigma and discrimination within the Asian American communities.
- Provide resources and information regarding available mental health services in Los Angeles County, especially those services geared towards the Asian American communities.
- Encourage help-seeking behaviors and provide linkage to mental health services, whenever possible, when encountering individuals in need in the community.
- Build and strengthen the confidence of Asian American community members so that they can be better equipped to face the challenges and barriers associated with having a loved one who suffers from a mental health condition.

Implementation Process

- Recruitment of Asian-Americans in Los Angeles County to serve as cast members of a theatrical play.
- Develop a script addressing the intersection of mental health and intergenerational conflict.
- Coordinate rehearsals for the theatrical play.
- Develop the set design, costumes, and stage management.
- Facilitate the coordination and presentations of a minimum of 12-16 community theatrical workshops/performances at a minimum of five (5) different community locations where a high population of Asian Americans reside in Los Angeles County.

THE TEAM

CoffeeWithJR was contracted to implement the full program by 1000 Cranes for Recovery. CoffeeWithJR is an Asian minority owned small business social enterprise.

Team members included:

- **JR Kuo** – Program Lead, Theater Director, and Workshop/Performance Facilitator. Founder of CoffeeWithJR, Mental Health Specialist and Speaker.
- **Megha Nabe** – Playwright and Actor
- **Natalie Lortz** – Project Coordinator and Actor

- **Andrew Nishimoto** – Actor
- **Anya Custodio** – Actor
- **Bryan Ha** – Actor
- **Helen Gu** – Actor
- **Julie Khamvongsa** – Actor
- **Kimberly Lin** – Actor

PROJECT OUTCOMES

Actors and Rehearsals

Seven individuals were recruited and hired as the ST actors. The actors' ethnicity consists of Indian, Japanese, Laotian, Filipina, Taiwanese, and Vietnamese.

The actors' gender consists of:

- Four identified as female
- Two identified as male
- One identified as female transgender

Three major rehearsals took place in-person. Each rehearsal was about six hours long. A dozen more shorter rehearsals were conducted virtually and in-person.

The Script

The script titled “Red Doors” was developed to address the mental health impact of intergenerational conflict within Asian American families and communities. The script was submitted to and approved by LADMH prior to the start of rehearsals.

Performances

Between July and October 2024, a total of thirteen (13) workshops and performances were conducted throughout Los Angeles County, including two virtual sessions and eleven in-person events. All workshops and performances were made possible through partnerships with various community-based organizations. The locations, dates, and partnering organizations are as follows (organized by date).

1. API Recovery Talk (Virtual) on July 31
2. Asian Youth Center on August 15
3. Taiwan Center on August 17
4. Visual Communications on August 17
5. Asian Pacific Family Center on August 20
6. Langley Center on August 21
7. Gardena Buddhist Church on August 24
8. Center for the Pacific Asian Family (Virtual) on September 5
9. Cal State Long Beach on September 26
10. JACL at Japanese American National Museum on September 28
11. Cambodia Town at Greater Long Beach YMCA on September 28
12. The Asian American Drug Abuse Program on October 24
13. UCLA on October 26

Special thanks to Asian Pacific Counseling and Treatment Centers and Pacific Asian Counseling Services.

The Performances covered the service areas 3, 4, 5, and 8

Attendees (self-identification)

Based on the sign-sheets, a total of 253 unique attendees participated in the ST workshops/performances.

Age

Age range	#
Age range: 13 to 24	75
Age range: 25 to 55	63
Age range: 55 to 90	82
No info	33

Ethnicities:

Ethnicities	#	%
Asian	59	23.3%
Chinese	42	16.6%
Filipino	21	8.3%
Indian	3	1.2%
Iraqi	1	0.4%
Japanese	17	6.7%
Khmers	46	18.2%
Koreans	7	2.8%
Non-Asians	21	8.3%
Pakistani	1	0.4%
Persian	1	0.4%
South Asian	1	0.4%
Sri Lankan	1	0.4%
Taiwanese	16	6.3%
Thai	1	0.4%
un-identified	3	1.2%
Vietnamese	12	4.7%

Immigration Generation

- 65% - First generation (foreign-born)
- 27.7% - Second generation (American-born)
- 7.3% - Third generation

Pre- and Post-Survey Analysis

PRE-Surveys Data Breakdown

242 Pre-Surveys were filled out by the participants. The pre-survey questions and results are:

- “I understand what mental health is”
 - Strongly Disagree – 5%
 - Disagree – 2.1%
 - Neutral – 8.3%
 - Agree – 31.4%
 - Strongly Agree – 53.3%

- “I know where I can find more information or resources on mental health.”
 - Strongly Disagree – 5.8%
 - Disagree – 7.4%
 - Neutral – 26.9%
 - Agree – 25.2%
 - Strongly Agree – 34.7%

- “I know when and why it is necessary to seek help for mental health.”
 - Strongly Disagree – 6.6%
 - Disagree – 5%
 - Neutral – 22.3%
 - Agree – 22.3%
 - Strongly Agree – 43.8%

- “Have you used mental health services before?”
 - Yes – 45%
 - No – 47.5%
 - Not sure – 7.4%

- “On a scale of 1 to 5, where 1 represents “Not Comfortable” and 5 represents “Very Comfortable,” how comfortable are you talking about mental health topics? Please circle your choice.”
 - Not comfortable – 7%
 - Uncomfortable – 4.1%
 - Neutral – 24.4%
 - Comfortable – 25.2%
 - Very comfortable – 39.3%

POST-Surveys Data Breakdown

209 post-Surveys were filled out by the participants. The pre-survey questions and results are:

- “I learned something new about mental health.”
 - Strongly Disagree – 2.9%
 - Disagree – 7%
 - Neutral – 8.1%
 - Agree – 27.8%
 - Strongly Agree – 57.9%

- “I know where I can find more information or resources on mental health.”
 - Strongly Disagree – 4.3%
 - Disagree – 1.9%
 - Neutral – 12.9%
 - Agree – 31.1%
 - Strongly Agree – 49.8%

We see a decrease of “strong disagree and disagree” from 12.2% to 6.2% and a 14% decrease from “neutral.” The “agree and strongly agree” hover around the same level.

- “I know when and why it is necessary to seek help for mental health.”
 - Strongly Disagree – 4.8%
 - Disagree – 2.9%
 - Neutral – 5.7%
 - Agree – 18.7%
 - Strongly Agree – 67.9%

- “After taking the workshop, I feel more inspired to talk and fight against the mental health stigma.”
 - Yes – 86.6%
 - No – 5.3%
 - Not sure – 8.1%

- “On a scale of 1 to 5, where 1 represents “Not Comfortable” and 5 represents “Very Comfortable,” how comfortable are you talking about mental health topics? Please circle your choice.”
 - Not comfortable – 4.8%
 - Uncomfortable – 1.4%
 - Neutral – 10%
 - Comfortable – 26.8%
 - Very comfortable – 56.9%

The Analysis

First Set of Questions: For the questions “I learned something new about mental health,” the statistical change was minimal.

Second Set of Questions: In response to “I know where I can find more information or resources on mental health,” there was a notable decrease in responses of “strongly disagree” and “disagree,” dropping from 12.2% to 6.2%, along with a 14% decrease in “neutral” responses. Although the levels of “agree” and “strongly agree” remained relatively steady, these shifts indicate that about 22% of attendees improved their knowledge of where to find mental health resources.

Third Set of Questions: For the statement “I know when and why it is necessary to seek help for mental health,” the “agree” and “strongly agree” responses rose by 19.5%, while “neutral” responses declined by 16.6%. This suggests that nearly 20% of attendees are more open to seeking mental health support.

Fourth Set of Questions: Responses to “Have you used mental health services before?” and “After taking the workshop, I feel more inspired to talk and fight against the mental health stigma” also showed significant change. Almost half (47%) of attendees had never used mental health services, but post-workshop, 86.6% reported feeling inspired to discuss mental health and combat stigma. Only 5.4% responded “no,” indicating that the workshop motivated about 41% of attendees to feel more comfortable with discussing and seeking mental health support.

Fifth Set of Questions: For the question “On a scale of 1 to 5, where 1 represents ‘Not Comfortable’ and 5 represents ‘Very Comfortable,’ how comfortable are you talking about mental health topics?” there was a roughly 50% decrease in “Not Comfortable,” “Uncomfortable,” and “Neutral” responses, alongside a 28% increase in “Very Comfortable.” This suggests that close to 30% of attendees felt more comfortable discussing mental health after attending the workshop.

LESSON LEARNED

Challenges

Actor Recruitment

Recruiting actors proved challenging, as the recruitment period (December to February) coincided with the holiday season, making it difficult to schedule interviews and auditions. Additionally, the concept of using theater as a tool to address mental health in the Asian community was so novel that many potential candidates were hesitant to commit. Finally, due to the stigma surrounding mental health, many prospective actors were reluctant to discuss the topic publicly and ultimately chose to opt out or decline the opportunity.

Collaboration

For the best results, Storytelling Theater workshops and performances were designed to be held within the community. Connecting and collaborating with community-based organizations was therefore essential. However, due to mental health stigma and the unconventional approach of using live theater to address this topic, gaining support and buy-in from various community organizations proved challenging.

Scheduling

As with any event planning, scheduling the workshops and performances was challenging. In addition to determining ideal dates and times for the host organizations, we also had to coordinate with the actors' availability.

Successes

Actors

Despite the tight timeline, we successfully recruited eight incredible Asian American actors. Out of the eight, only two had any formal acting training, while the rest had never performed in front of an audience before. Each actor brought their heart and soul to the rehearsals and every workshop and performance.

Organizational supports

Despite dozens of pushbacks and rejections, thirteen organizations came through and hosted Storytelling Theater. Two additional organizations provided interpretation and logistical supports.

Workshop/Performance Engagement

The Storytelling Theater workshops and performances featured many interactive exercises and group discussions, and the level of audience engagement far exceeded our expectations. Due to the stigma surrounding mental health, we hadn't anticipated participants openly sharing their thoughts and experiences, particularly within Asian communities. Yet, what we witnessed was the exact opposite.

For example, one of the workshops was held at a mental health clinic serving Asian families and immigrants. About a third of the participants were newly arrived immigrants still in ESL classes, another third had been in the U.S. for five to ten years with intermediate English skills, and the remaining group was fluent in English. We provided an interpreter to translate from English to Mandarin Chinese. After the live-theater play, to our surprise, several participants from the ESL and intermediate groups openly shared their thoughts and experiences.

It was both eye-opening and heartwarming to see their courage in stepping outside their comfort zones. We often asked the audience what it felt like to discuss their mental health experiences openly or even just with the person sitting beside them. Many responded with statements like, "It was a relief," or "It was scary at first, but it felt good afterward."

RECOMMENDATIONS

Asian cultures have a long tradition of using arts and non-clinical methods for social healing and mental health improvement, such as tai chi, traditional calligraphy painting, kit-making, and community theater. However, the implementation of these practices is often overshadowed by high-demand lifestyles and cultural stigma. Despite this, there is an inherent need and high demand for non-clinical, culturally appropriate forms of social healing. Arts and theater are not luxuries; they are necessities for everyone's mental health. By incorporating more arts and culture into its programming, LACDMH could effectively improve outreach and engagement within the community.

After every Storytelling Theater workshop/performance, at least a handful of audience members asked if there are additional opportunities to attend future workshops or performances. Additionally, feedback from the host organizations indicates that many staff members have expressed strong interest in continuing to collaborate with Storytelling Theater. This reinforces the need and demand for using arts and theater as part of mental health advocacy.

In conclusion, based on the survey results, audience feedback, and input from staff at the host organizations, we have witnessed the power and effectiveness of using storytelling and theater to engage Asian and Asian American communities in conversations about mental health. Therefore, we highly recommend that LACDMH continue to support and fund projects like Storytelling Theater to reach Asian communities and enhance their access to mental health services and support.