

Midwest Filipino American Students and their Perceptions on Depression

Submitted by

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requirement to graduate from

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Abstract

The purpose of this thesis is to determine the prevalence of depression in the Filipino American student community within the Midwest. According to Jung et al. (2020), Asian Americans generally attach stigmas to mental illness and show disapproval towards seeking treatment. This statement highlights Asian American's unawareness towards the significance of mental illness. This thesis will delve into the views of Filipino American students on the topic of depression in their personal lives. Surveys will be distributed electronically to members of the Midwest Association of Filipino Americans (MAFA). Through this survey, participants' responses were analyzed to determine whether they agree or disagree that depression is a prominent issue in their culture, and verify if depression is a problem within the Filipino American student community. The acquired data showed a significant prevalence of depression within this community and can further help improve patient education, assist nurses in providing optimal care for Filipino American students, and aid in addressing the significance of depression and its detrimental effects to psychological health.

Current Research

With the emerging era of technology and social media, depression is a common health problem that has evolved over the past two decades (Lim et al., 2018). Depression is a debilitating disease presenting with various signs and symptoms and affecting individuals of all cultural and economic backgrounds. As a disease that presents in varying different ways, it is much more difficult to catch and diagnose, especially within cultures that attach a stigma to the mental illness (Castelao, 2016). The current research in this field of interest is very broad; many recent studies have been conducted regarding the prevalence of depression in America. Within the United States alone, the prevalence of depression has significantly increased from 2005 to 2015 with the greatest rate of increase seen among the younger demographic (Weinberger, Gbedemah, Martinez, Nash, Galea, & Goodwin, 2018).

Literature Review

In a cross-national study comparing rates of depression in college students from both China and America, it was found that “students in America had higher scores on depression and stress than students in China” (Zhao & Zhang, 2018). While Zhao and Zhang (2018) found that American college students present with higher rates of depression compared to the Chinese college population, their use of American subjects is very broad and does not specify towards specific ethnic backgrounds.

In another study, rates of depression among older American adults were compared based on varying race and ethnicity. Results concluded that the odds of screening positively for depression were higher among Filipino and other Asian Americans compared to non-hispanic whites (Hooker et al., 2019). Although Hooker et al. (2019) discovered that Asian Americans are

more likely to screen positively for depression, the subject sample was limited to older American adults ages 65 and older.

In a study conducted in 2010, Asian American and Caucasian undergraduate students at the University of California San Diego completed the nine item Patient Health Questionnaire to detect levels of depression. It was found that compared to Caucasians, Asian-Americans presented significantly increased levels of depression (Young, Fang, & Zisook, 2010). While Young et al., (2010) found that Asian American college students were significantly more depressed than their Caucasian counterparts, the subjects studied were limited to the University of California San Diego student population and subjects were not further categorized by ethnicities.

The research regarding the prevalence of depression has largely been generalized to Americans, older adults, and small participant pools. The purpose of this thesis is to address the gap in not only the population's ethnicity, but also their age by investigating the prevalence of depression in the Filipino American student community within midwest America.

Aims and Objectives

The following aims and objectives focus on discovering what Filipino American students in the Midwest believe to be signs and symptoms of depression and to detect whether or not this specific community is misinformed toward the significance of this debilitating mental illness. By investigating whether their ethnicity and culture alone may have any influence on how Filipino American students perceive the diagnosis of depression, this thesis will strive to discover how this specific demographic may be or may not be an under-diagnosed population.

Aims

1. To investigate the prevalence of depression within the Filipino American student population.
2. To understand what role Filipino culture and traditions may play in the environmental etiology of depression.
3. To discover the mental illness education, if any, that was priorly given to this specific population.
4. To determine Filipino American students' willingness to consult support services when dealing with depressive thoughts or ideas.

Objectives

1. Understanding whether depression is a growing issue among Filipino American students can spark initiative for better quality care for this population. If it is found that Filipino American students are presenting with signs and symptoms of depression, more research can be done to help health professionals educate this population more thoroughly and prevent an under-diagnosed ethnic community.
2. In order to fully understand the population's perceptions towards the disease, it must first be known how culture and environmental factors affect both the etiology and opinion of Filipino American students towards depression. Once known, more meaningful research can be conducted into both treatment and education geared specifically toward this demographic.
3. By evaluating whether Filipino American students have prior knowledge about depression can help health professionals detect the myths attached to depression and provide patient-centered education and care.

4. Determining this population's willingness to consult support services can help identify the need for education about the disease and its treatment. By starting to teach the younger generations to view depression like any other medical illness, it creates an opportunity for those who may go undiagnosed.

Methodology

I first started by conducting my own analysis of relevant research regarding the Filipino culture and its traditions that may have an underlying effect on the diagnosis of depression. I also researched if there has been any special education from health professionals geared towards this population and the prevention of depression. Following this research, I compiled what I have learned to draw my own perceptions and conclusions regarding the Filipino American culture to formulate a survey catered towards this specific population within the Midwest.

The Midwest American Filipino Association (MAFA) is a collection of Philippine Student Associations (PSAs) within the Midwest. I implemented my survey by posting the link onto their facebook group page where participants were able to access my formulated quantitative questionnaire with ease. The questionnaire included aspects from my thesis' aims in order to gather quantitative data regarding Filipino American students' perceptions on depression. I then took the data gathered from all the questionnaires, translated it into relevant information, and recorded my findings within my thesis. By implementing my questionnaire and documenting its results and findings, I can hopefully contribute new knowledge and information geared towards my plausible outcomes.

Overview

An online survey (Appendix A) was distributed to Filipino college students over the age of 17 who were recruited using Facebook distribution from August 11th, 2020 to September 27th, 2020.

Participants

The sample was made up of 182 male and female Filipino college students over the age of 18: recruited online using Facebook. Interested participants were considered eligible if they identified as Filipino, were an enrolled college student, and were 18 years or older. This population was chosen because their perceptions are important to fully understand so as to emphasize if there is a need for mental health education towards those who fit the above criteria. Educating younger generations of Filipinos about mental health may be part of the answer to improving mental health outcomes.

Survey

This purpose of this survey was to fill the gap of knowledge that is present in regards to the Filipino student population and their perceptions of depression as well as the prevalence of depression in their community. All participants responded to an online survey created using Qualtrics. The survey was sent to members of Filipino Facebook groups. A copy of these questions can be found in Appendix A.

Demographics and Eligibility

The start of the survey asked participants questions about their age, if they are enrolled in college, their ethnicity and whether or not they choose to participate. Inclusion criteria for participation in my research study consisted of the following: being over the age of 18, identifying as being of Filipino ethnicity, and being enrolled college student in one of the twelve

Midwest American states (Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Missouri, Nebraska, North Dakota, Ohio, South Dakota, and Wisconsin). The goal was to get an accurate depiction of Filipino-American college students within the Midwest and their perceptions on depression as well as exclude those who do not fit the above criteria.

Prevalence

To assess the prevalence of depression among this population, participants were asked to indicate how strongly they agree or disagree with the following statement on a seven point Likert scale: “I feel depressed and/or have depressive thoughts and symptoms.” Participants were also asked to indicate how often they experience the following: “I experience symptoms of depression...” on a five-point scale.

Mental Illness Education

To assess the level of education received by this population regarding depression, participants were asked to indicate how strongly they agree or disagree with the following statement on a seven-point scale: “I have been exposed to mental illness education and know the symptoms, treatments, and prevention of depression.” Participants were also asked to do the same for the following statement to evaluate their family’s level of education on the topic of depression: “My family has been exposed to mental illness education and know the symptoms, treatments, and prevention of depression.

Willingness to Consult for Help

To assess the population’s willingness to seek mental health support and services, participants were asked to indicate how strongly they agree or disagree with the following statement on a seven point scale: “If I were to show depressive symptoms, I would seek help.” Participants were also asked to do the same for the following statement to evaluate their family’s

willingness to urge the participant to seek help if they were to show depressive symptoms: “If I were to show depressive symptoms, my family would urge me to seek help.”

Additional Information

To gather qualitative data, participants were asked if there was any additional information they would like to share regarding their perceptions of depression, and if so, were prompted to leave the information in a text box.

Procedure

After obtaining ethical approval from the Institutional Review Board of Oakland University, the study was advertised via Facebook with a title of “Midwest Filipino American Students and their Perceptions on Depression”. Participant consent was obtained at the beginning of the survey (Appendix A), reminding participants that their identity would be left anonymous and that they could withdraw from taking the survey at any time. This consent explained that participant information and their opinions would be kept confidential and that they could terminate the survey at any time. The distribution of this survey was shared through family and friends of the principal investigator, members of Filipino Facebook groups, and other individuals that were interested in the study.

Results

Demographics

A total of 182 responses were initially collected. 103 of the respondents were collected outside of the Midwest. According to the Census Bureau’s definition, the Midwest includes the 12 following states: Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Missouri, Nebraska, North Dakota, Ohio, South Dakota, and Wisconsin (Augustyn, 1998). These responses collected outside of the Midwest were invalidated to allow accurate depiction of the prevalence and

perceptions of Midwest Filipino students. The distribution of the participant’s resident is listed below (Figure 1) as well as a summary of the study’s results (Table 1).

Table 1

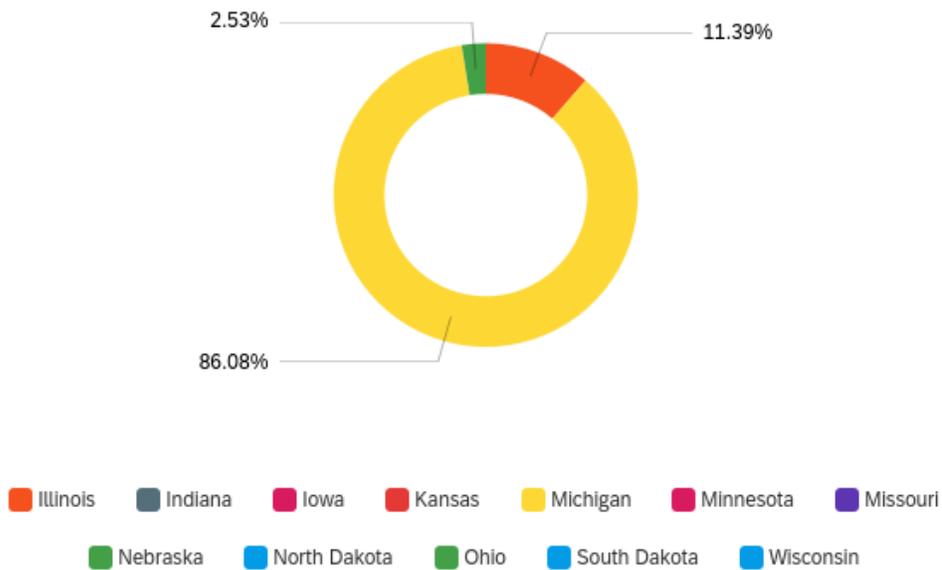
Summary of the results

Question	Strongly Agree	Agree	Somewhat Agree	Neither Agree nor Disagree	Somewhat Disagree	Disagree	Strongly Disagree
I feel depressed and/or have depressive thoughts and symptoms	9	16	29	6	5	9	5
My heritage/culture plays a role in my depressive thoughts/symptoms	5	16	23	9	8	11	7
I have been exposed to mental illness education and know the symptoms, treatments, and prevention of depression	22	23	22	4	3	3	1
My family has been exposed to mental illness education and know the symptoms, treatments, and prevention of depression	-	-	-	-	1	-	-
If I were to show depressive symptoms, I would seek help	-	-	1	-	-	-	-
If I were to show depressive symptoms, my family would urge me to seek help	-	-	-	-	-	1	-
To me, depression is as important as other diseases such as Diabetes, Hypertension, Cardiovascular	-	-	1	-	-	-	-

disease, Cancer, COPD, etc.							
To my family, depression is as important as other diseases such as Diabetes, Hypertension, Cardiovascular disease, Cancer, COPD, etc.	-	-	-	-	-	1	-
Question	Always	Most of the time	About half the time	Sometimes	Never		
I experience symptoms of depression...	1	8	15	49	5	-	-

Figure 1

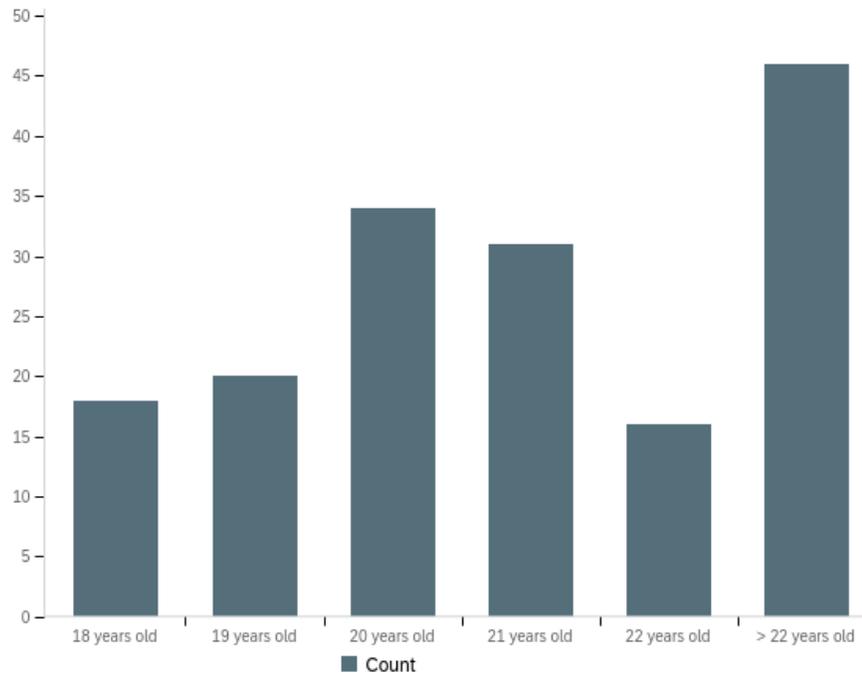
Participant's residential demographics



The distribution of the remaining 79 responses displayed in Figure 2 included 18 (10.00%) were 18 years old, 20 (11.11%) were 19 years old, 34 (18.89%) were 20 years old, 31 (17.22%) were 21 years old, 16 (8.89%) were 22 years old, and 46 (25.56%) were over 22 years old.

Figure 2

Age of participants



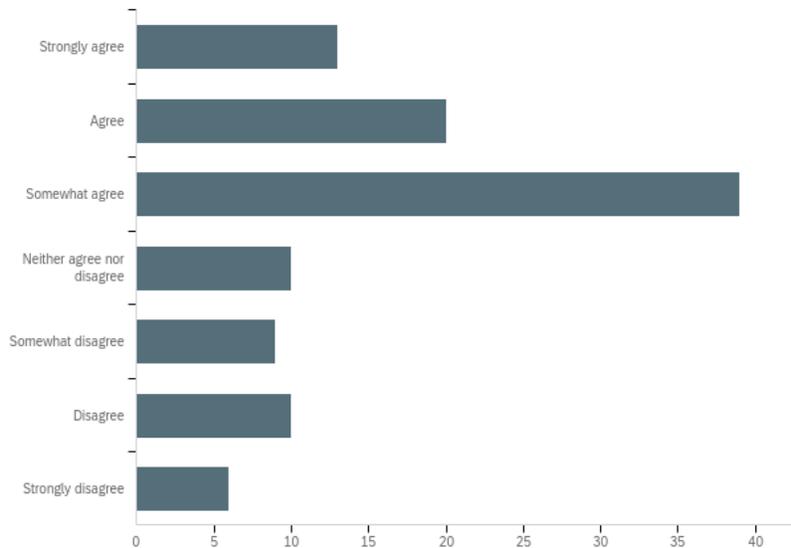
Prevalence of Depression

Participants were asked whether or not they feel depressed or experience depressive symptoms. As seen in Figure 3, results indicated that 13 (12.15%) strongly agree, 20 (18.69%) agree, 39 (36.45%) somewhat agree, 10 (9.35%) neither agree nor disagree, 9 (8.41%) somewhat disagree, 10 (9.35%) disagree, and 6 (5.61%) strongly disagree.

Participants were also asked how often they experience symptoms of depression. Results indicated that 1 (1.28%) always, 8 (10.26%) most of the time, 15 (19.23%) about half the time, 49 (62.82%) sometimes, and 5 (6.41%) never.

Figure 3

Prevalence of depressive symptoms

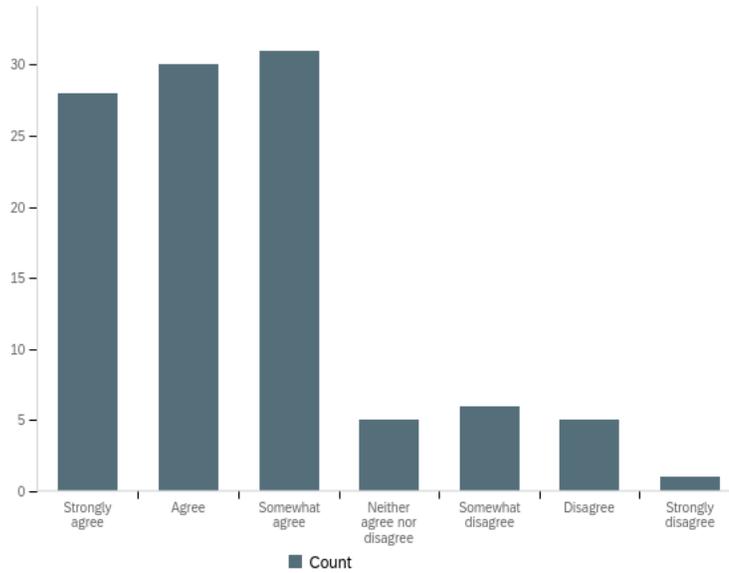


Perceptions of Depression and Mental Illness Education

The next topics of the survey discussed perceptions of depression and the extent of which they received knowledge regarding mental illness education. The first questions asked if they have been exposed to mental illness education and know the symptoms, treatments, and prevention of depression. Results in Figure 4 indicated that 28 (26.42%) strongly agree, 30 (28.30%) agree, 31 (29.25%) somewhat agree, 5 (4.72%) neither agree nor disagree, 6 (5.66%) somewhat disagree, 5 (4.72%) disagree, and 1 (0.94%) strongly disagree.

Figure 4

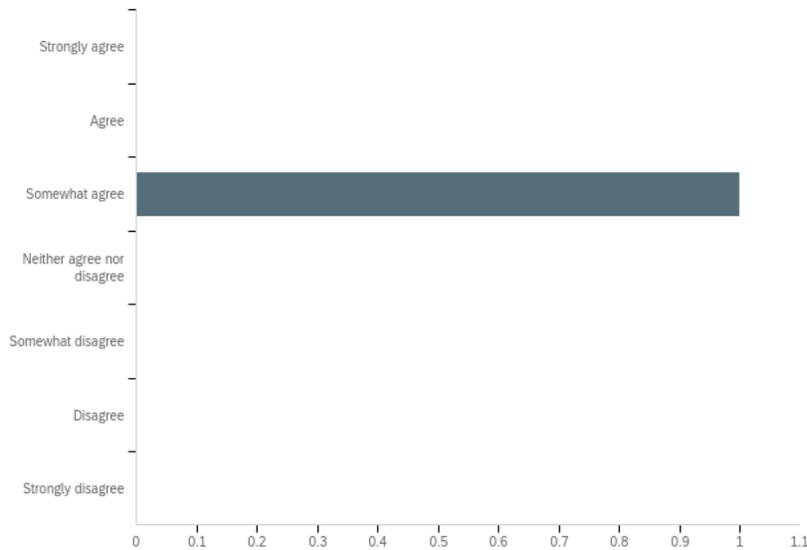
Participant’s perceptions on their exposure to mental illness education



In regards to mental illness education, participants were asked if they would seek help if they were to show depressive symptoms. In Figure 5, results indicated that 0 (0.00%) strongly agree, 0 (0.00%) agree, 1 (100%) somewhat agree, 0 (0.00%) neither agree nor disagree, 0 (0.00%) somewhat disagree, 0 (0.00%) disagree, and 0 (0.00%) strongly disagree.

Figure 5

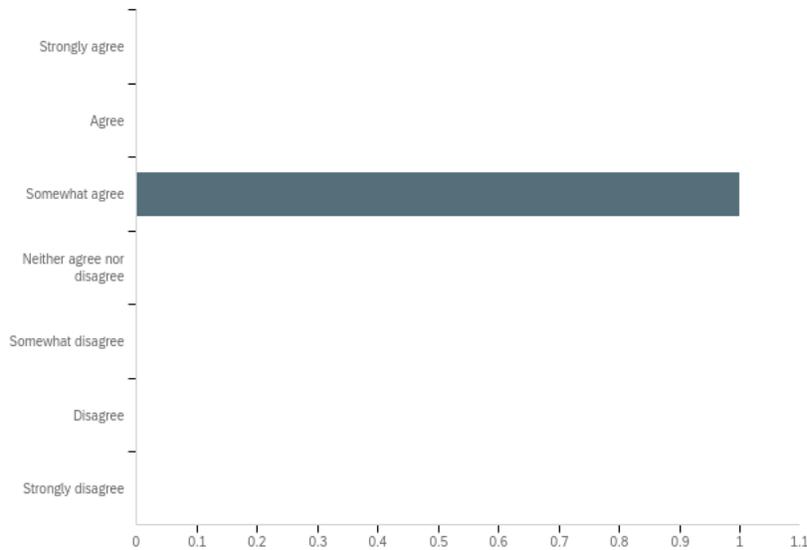
Participant’s willingness to seek help if they were to show depressive symptoms



Participant’s were also asked to indicate whether they agree or disagree with the following statement, “To me, depression is as important as other diseases such as Diabetes, Hypertension, Cardiovascular disease, Cancer, COPD, etc.” In Figure 6, results indicated that 100% somewhat agree with the above statement.

Figure 6

Participant’s perceptions on whether depression is as important as other physiologic diseases

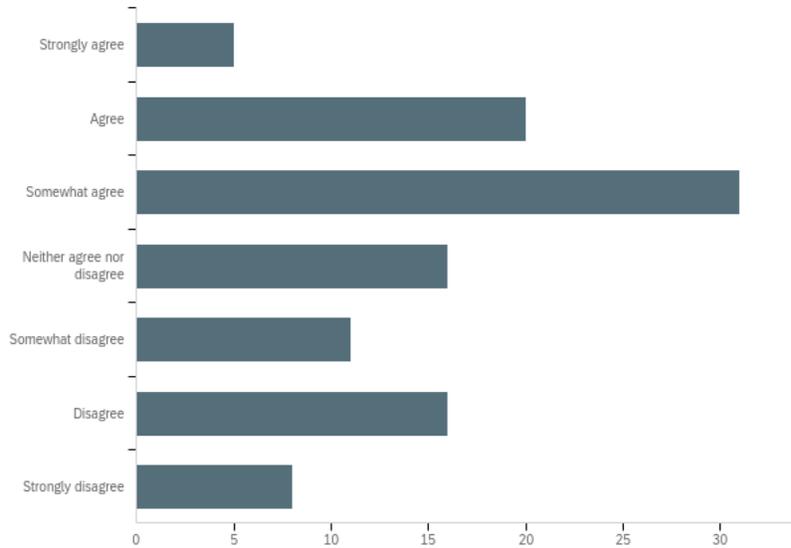


Cultural and Family Influence

Participants were asked whether their heritage or culture plays a role in their depressive thoughts or symptoms. In Figure 7, results indicated that 5 (4.67%) strongly agree, 20 (18.69%) agree, 31 (28.97%) somewhat agree, 16 (14.95%) neither agree nor disagree, 11 (10.28%) somewhat disagree, 16 (14.95 %) disagree, and 8 (7.48%) strongly disagree.

Figure 7

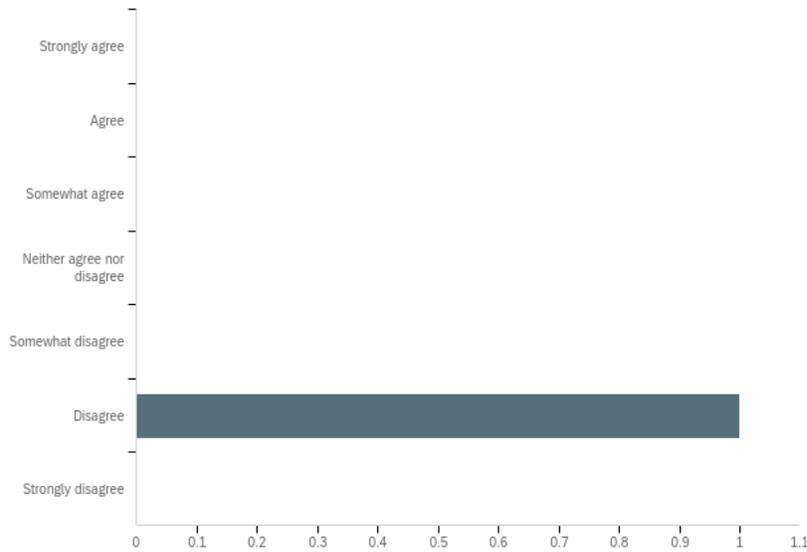
Cultural Influence on Depressive Thoughts and Symptoms



In regards to Filipino family influence, participants were asked to indicate how strongly they agree or disagree with the following statement:- “If I were to show depressive symptoms, my family would urge me to seek help”. In Figure 8, results indicated that 100% disagreed with the above statement.

Figure 8

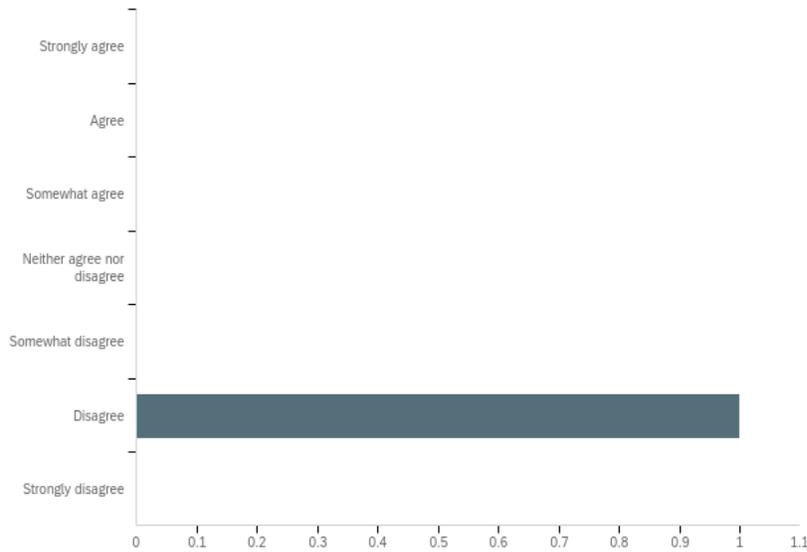
Participant’s perceptions regarding their family’s willingness to urge their family member to seek help



Participants were also asked to indicate how strongly they agree or disagree with the following statement: “To my family, depression is as important as other diseases such as Diabetes, Hypertension, Cardiovascular disease, Cancer, COPD, etc.” In Figure 9, results indicated that 100% disagreed with the above statement.

Figure 9

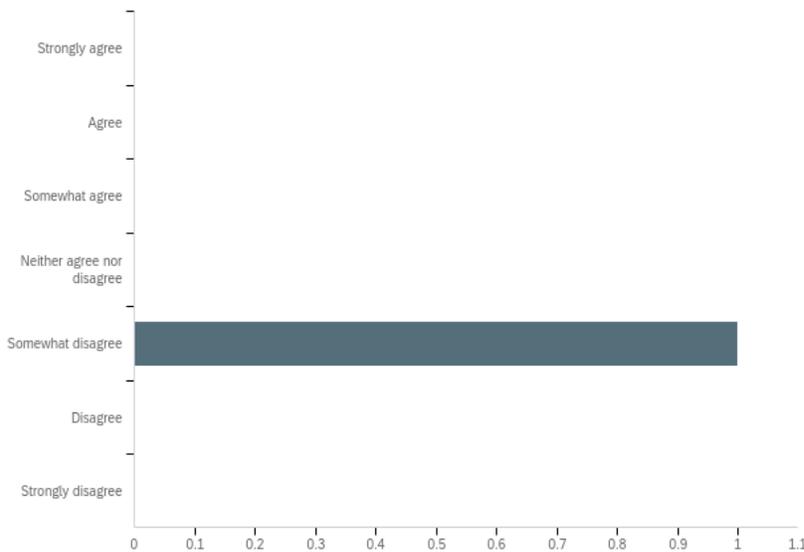
Participant’s perceptions regarding their family’s thoughts on the importance of depression when compared to other physiologic diseases



Participants were also asked whether their families have been exposed to mental illness education and know the symptoms, treatments, and prevention of depression. In Figure10, results indicated that 100% somewhat disagreed.

Figure 10

Participant’s perceptions regarding their family’s awareness on mental illness education, symptoms, treatments, and prevention of depression



Additional Information

At the end of the survey, participants were asked if they would like to add any additional information regarding the topic in an open-answer box located at the bottom. A participant stated that other factors can cause the onset of depression besides the influence of their Filipino culture. Another participant reported that their Filipino elders don’t see the significance behind mental illness nor do they see the important need for treatment, such as taking medications. A participant also mentioned that sometimes their Filipino mother will force religion as the only answer to their depressive thoughts and symptoms and dismiss seeking any actual mental health support. The entirety of these sentiments can be found in Appendix B.

Limitations

One of the main strengths of this study include the high participant turnout from residents of Michigan and other Midwest states. Another strength includes the phrasing of the survey

questions using a 7-point scale to allow for accurate depiction as well as the addition to leave additional sentiments at the end of the survey.

Some limitations of the survey are that many participants were collected from Filipino Facebook groups which have members from all across the world rather than just the Midwest United States alone. Another limitation is that this survey was offered mainly through social media and does not include the input from Midwest Filipino students who do not partake in social media platforms. I would also add that it was a convenience sample via social media.

Discussion

The study gave insight into the thoughts of Filipino students within the Midwest, especially Illinois and Michigan. 103 of the respondents were collected outside of the Midwest. These responses collected outside of the Midwest were invalidated to allow accurate depiction of the prevalence and perceptions of Midwest Filipino students. One of the main strengths of this study include the high participant turnout from residents of Michigan and other Midwest states. Another strength includes the phrasing of the survey questions using a 7-point scale to allow for accurate depiction as well as the addition to leave additional sentiments at the end of the survey. The sample overwhelmingly either strongly agreed, agreed, or somewhat agreed that they feel depressed and/or have depressive thoughts and symptoms. The sample also showed that most participants experience symptoms of depression sometimes. This shows that a majority, to some extent, feel as they are depressed. Similar to the UCLA study done in 2010, this shows how Asian Americans, more specifically Filipino Americans, have a high prevalence of depression when compared to their Caucasian counterparts (Young, Fang, & Zisook, 2010).

This study also showed that although many participants have been exposed to mental illness education and somewhat agreed to seeking help if depressed, their family and culture

have not been as exposed to mental illness education and are less likely to urge them to seek help. It was also found that over half of participants agree to some extent that their heritage and culture play a role in their depressive thoughts and symptoms.

This study also revealed that depression is seen as not as important as other physiologic disease like diabetes or COPD and that education may be lacking regarding depression and other mental illnesses. Although past literature touches on the increasing rates of depression among the Asian demographic, this study helps highlight the importance Filipino Americans put on mental illness when compared to other physical diseases.

Nurses can learn from this study that the prevalence of depression among Filipino students is enough to cause concern and spark innovation in nursing practice and education. From this study, nurses can improve patient education, assist other nurses in providing optimal care for Filipino American students, and address the significance and stigmatized myths of depression and its detrimental effects to psychological health.

Conclusion

This study highlights the perceptions of Midwest Filipino college students and the prevalence of depression in their population. Data acquired from the survey indicates that most participants experience depressive thoughts and symptoms at least some of the time and that their family and culture play a role in these symptoms of depression. This study also reveals the level of education received by both participants and their families and how information regarding depression is lacking in their community. Through this research, leaders in healthcare can innovate the way mental illness is detected, treated, taught, and prevented in order to rid the stigmatization of depression within the Filipino community and ultimately provide the best standard of care for those individuals.

Biographical Note

My name is Reyanna Fermin and I am pursuing a career in nursing at Oakland University. I am currently working toward a BSN and my goal after graduation is to work in a medical surgical unit or intensive care unit at Beaumont. After a few years of gaining experience as a new registered nurse, my future academic and professional goals consist of applying to and attending graduate school in order to become a certified registered national nurse anesthetist or a nurse practitioner. This thesis project ties into my goals because not only does it prepare me to conduct my own research which is typically a requirement in graduate school, but it will also help me become familiar with evidence-based practice which is a foundation in the field of nursing. Depression is often seen as an insignificant disease process compared with other diseases such as cancer and diabetes mellitus. By conducting this study, I can show other health care professionals and the general public the importance of depression screening and how education about the illness can aid in prevention of depressive symptoms.

References

- Augustyn, A. (1998). Midwest. Retrieved December 14, 2020, from <https://www.britannica.com/place/Middle-West>
- Castelão, C. D. (2016, September 24). The Difficulty of Diagnosing Depression: Sapien Labs: Neuroscience: Human Brain Diversity Project. Retrieved from <https://sapienlabs.org/the-difficulty-of-diagnosing-depression/>
- Hooker, Karen, Phibbs, Sandi, Irvin, Veronica L, M.-L., ... Turner. (2018, December 17). Depression Among Older Adults in the United States by Disaggregated Race and Ethnicity.
- Jung, H., Cho, Y.J., Rhee, M. et al. Stigmatizing Beliefs About Depression in Diverse Ethnic Groups of Asian Americans. *Community Ment Health J* 56, 79–87 (2020)
doi:10.1007/s10597-019-00481-x
- Lim, G. Y., Tam, W. W., Lu, Y., Ho, C. S., Zhang, M. W., & Ho, R. C. (2018, February 12). Prevalence of Depression in the Community from 30 Countries between 1994 and 2014. Retrieved from https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5809481/#__ffn_sectitle
- Weinberger, A., Gbedemah, M., Martinez, A., Nash, D., Galea, S., & Goodwin, R. (2018). Trends in depression prevalence in the USA from 2005 to 2015: Widening disparities in vulnerable groups. *Psychological Medicine*, 48(8), 1308-1315.
doi:10.1017/S0033291717002781
- Young, C. B., Fang, D. Z., & Zisook, S. (2010, March 19). Depression in Asian–American and Caucasian undergraduate students. Retrieved from <https://www.sciencedirect.com/science/article/pii/S0165032710002612?via=ihub>

Zhao, S., Zhang, J. The Association Between Depression, Suicidal Ideation and Psychological Strains in College Students: A Cross-National Study. *Cult Med Psychiatry* 42, 914–928 (2018). <https://doi.org/10.1007/s11013-018-9591-x>

*This thesis proposal is formatted in APA format

Appendix A

The purpose of this research study is to assess the prevalence and perception of depression in the Filipino American student community within the Midwest. Please answer the following to questions to determine if you meet the study inclusion criteria.

What is your age?

- < 18 years old
- 18 years old
- 19 years old
- 20 years old
- 21 years old
- 22 years old
- > 22 years old

Are you currently enrolled in college?

- Yes
- No

What is your Ethnicity? (Please select all that apply)

- White
- Black or African American
- American Indian or Alaska Native
- Asian Indian
- Chinese
- Filipino
- Japanese
- Korean
- Vietnamese
- Native Hawaiian
- Guamanian or Chamorro
- Samoan
- Other Asian (Hmong, Thai, Pakistani, Cambodian, etc.)

EXEMPT RESEARCH INFORMATION SHEET

Information Sheet for an Exempt Research

Midwest Filipino American Students and their Perceptions on Depression

Introduction

You are being asked to be in a research study that is being done by Reyanna Fermin, Stephanie Vallie, MSN, RN and Dr. Joanna Hernandez, DNP, RN, AGACNP-BC from Oakland University School of Nursing.

Your decision to participate in this study is voluntary. You can choose to stop your participation at any time or skip any part of the study if you are not comfortable. Your decision will not affect your present or future relationship with Oakland University, the researchers, or the Oakland University School of Nursing. If you are a student or employee at Oakland University, your decision about participation will not affect your grades or employment status.

What is the purpose of this study?

The purpose of this research study is to assess the prevalence and perception of depression in the Filipino American student community within the Midwest.

Who can participate in this study?

You are being asked to participate in the study because you are a college student. You must be 18 years of age or older to participate.

What do I have to do?

If you are in this research study you will be asked to fill out one 10 minute online survey. This survey will ask you to provide demographic data as well as perspectives regarding depression.

Are there any risks to me?

For this study, the potential risks are

Emotional (e.g., feelings of sadness, anxiety): This is minimal and may be due to worrying about the extra time it will take to complete the online questions or how your answers may cause participants to experience concern about their own mental health.

This is unlikely to occur. However, if it does occur, please contact Reyanna

Fermin, reyannafermin@oakland.edu, Stephanie Vallie, vallie@oakland.edu, or Dr. Joanna Hernandez, jhernandez@oakland.edu.

Identification of a participant through deductive disclosure: This is minimal risk.

With many research studies, there is a risk of breach of confidentiality. A breach of confidentiality means that it is possible that someone who is not part of this research may accidentally see your personal information. I will try to make sure that this does not happen by keeping your research records as confidential as possible. However, no researcher can guarantee complete confidentiality.

Are there any benefits to me?

Although there may be no direct benefits to the participants, the results of this study may benefit others in the future.

Will I receive anything for participating?

There is no incentive offered for your participation in this survey.

What if I want to stop participating in this study?

If you wish to stop participating, close your browser prior to clicking 'submit'. If you click 'submit', it may not be possible to stop participating. The researcher may stop your participation in this study at any time without your consent.

Who do I contact if I have questions about this study or my rights as a research participant?

For questions about the study you may contact: Reyanna Fermin, reyannafermin@oakland.edu, Stephanie Vallie, vallie@oakland.edu, or Dr. Joanna Hernandez, jhernandez@oakland.edu

For questions regarding your rights as a participant in human subject research, you may contact the Oakland University Institutional Review Board, [248-370-4898](tel:248-370-4898).

Do you agree to participate?

- Yes
- No

What is your gender?

- Male
- Female
- Prefer not to answer

In which state do you currently reside?

I feel depressed and/or have depressive thoughts and symptoms

- Strongly disagree
- Disagree
- Somewhat Disagree
- Neutral
- Somewhat Agree
- Agree
- Strongly Agree

I experience symptoms of depression...

- Always
- Most of the time
- About half the time
- Sometimes
- Never

My heritage/culture plays a role in my depressive thoughts/symptoms

- Strongly disagree
- Disagree
- Somewhat Disagree
- Neutral
- Somewhat Agree
- Agree
- Strongly Agree

I have been exposed to mental illness education and know the symptoms, treatment, and prevention of depression

- Strongly disagree
- Disagree
- Somewhat Disagree
- Neutral
- Somewhat Agree
- Agree
- Strongly Agree

My family has been exposed to mental illness education and know the symptoms, treatments, and prevention of depression

- Strongly disagree
- Disagree
- Somewhat Disagree
- Neutral
- Somewhat Agree
- Agree
- Strongly Agree

If I were to show depressive symptoms, **I would** seek help

- Strongly disagree
- Disagree
- Somewhat Disagree
- Neutral
- Somewhat Agree
- Agree
- Strongly Agree

If I were to show depressive symptoms, **my parents and family** would urge me to seek help

- Strongly disagree
- Disagree
- Somewhat Disagree
- Neutral
- Somewhat Agree
- Agree
- Strongly Agree

To me, depression is not as important as other diseases such as Diabetes, Hypertension, Cardiovascular disease, cancer, COPD, etc.

- Strongly disagree
- Disagree
- Somewhat Disagree
- Neutral
- Somewhat Agree
- Agree
- Strongly Agree

To my parents and family, depression is not as important as other diseases such as Diabetes, hypertension, cardiovascular disease, cancer COPD, etc.

- Strongly disagree
- Disagree
- Somewhat Disagree
- Neutral
- Somewhat Agree
- Agree

- Strongly Agree

Is there any additional information you would like to share regarding your perception of depression?

- Yes

- No

What additional information would you like to share regarding your perception of depression?

Appendix B

Have been taking anti-depressants for about 2 years now. My mom often asks me “when can you stop?” Or “do you still need them?”

As someone growing up in a Asian American household, my parents never really talked about mental illness as a serious issue that many people face. As I grew older and started experiencing depression first hand, I realized mental health is just as important as physical illnesses. I think it's interesting how our generation takes mental illness more seriously than our parents, even though we are not all highly educated on the issue. Sometimes, our parents brushing off our thoughts and feelings only make us feel worse, which is why we don't feel that we can go to them for help.

Personal events/experiences can be a significant part of depression.

Before being clinically diagnosed with depression and anxiety, I always felt like my symptoms were disregarded by my parents, since mental illness is so heavily stigmatized in Asian culture. As a Filipinx, my mom would always shove religion down my throat and say things like “Continue to think positively and pray for God to help you” and completely dismissing the fact that I am not mentally healthy.