

Reflection 3

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During my internship at the KCS Mental Health Clinic, I had the opportunity to learn about mental health stigma, poverty, and access to mental health care.

In Flushing, the heart of the Korean ethnic enclave, there is only one OMH licensed community mental health center. Migrant Koreans began migrating to the United States in 1905, but mental health care was not considered a priority due to their desire to start a business, establish economic stability, and help their children integrate into American society.

On April 16, 2007, Seung Hui Cho, a South Korean student, committed a mass shooting at Virginia Tech. Before taking his own life, Cho killed 32 people and injured 17 others. One of the deadliest mass shootings in U.S. history, it caused widespread shock and grief. As a result of the shooting, discussions about mental health and gun control have continued, and many families of the victims and survivors continue to advocate for change. Those who died at Virginia Tech as well as the families of the victims will forever be remembered. Since this tragic incident, South Koreans have shown a greater interest in the mental health of their children. It was known that Seung-Hui Cho suffered from a wide range of psychological disorders and mental illnesses. In this case, untreated mental health problems could pose a threat to patients and the general public as well.

Despite the pressing mental health issues in the Korean community in New York City, Korean American children lack comprehensive mental health care. Due to licensing restrictions, the KCS mental health clinic only serves Korean Americans who are 14 years or older. KCS Mental Health Clinic has experienced a high staff turnover rate due to a lack of funding and inadequate reimbursement programs from the New York State Office of Mental Health. The lack of consistency and reliability in mental health care is a serious issue.

In addition, scheduling an appointment with a Korean psychiatrist or nurse practitioner for psychiatric evaluation and medication management can be difficult. This is due to several factors:

Psychiatrists and nurse practitioners are often fully booked for a few weeks because of high demand. As a result, Korean American patients may have to wait a long time for appointments.

Second, psychiatrists and psychiatric nurse practitioners are in short supply. Psychiatrists are in short supply in New York City, making it even harder to find one who will accept new patients.

Finally, I would like to address poverty issues among older Korean Americans. Korean Americans have been accepted as model minorities in the United States. Korean American elders in New York City have high poverty rates, contrary to this prevalent myth. Compared to the total

New York City population, the poverty rate for Korean residents was lower overall, but higher for working-age adults and seniors (Asian American Federation, n.d.).

Korean Americans have also delayed receiving mental health treatment due to the stigma surrounding mental health. There is still a stigma associated with mental health that prevents Korean Americans from seeking help despite increasing awareness and understanding. My suggestion is to become more involved in educational activities for Korean Americans in New York.

References

Asian American Federation (n.d.). Profile of New York City's Korean Americans. Retrieved from <https://www.aafederation.org/wp-content/uploads/2020/12/2019kr.pdf>