



# Thao Nguyen Foundation Inc. Newsletter

16<sup>th</sup> Issue  
July 2020

TOGETHER, WE BRING LIGHT TO MENTAL HEALTH AWARENESS

IN THIS ISSUE

## Greetings from the President

Nhung Hendy

Welcome to another issue of the TNF newsletter. As I write this column, we have been living with the COVID-19 pandemic for three months. Whereas the pandemic has disrupted our lives, school, and work, it has certainly heightened everyone's awareness of mental health. As you can see from the scientific evidence included in this newsletter, those with both physical and mental health conditions were impacted the most during the pandemic in terms of elevated levels of anxiety and depression, followed by those with mental health conditions. Even those with no pre-existing health conditions have surely found the past few months challenging.

As you know, due to COVID-19 and the stay-at-home order, we had to postpone our Daybreak Juried Art Exhibition, scheduled to open on April 4. I hope that we will be able to host this event sometime in the Fall. Please stay tuned. I would like to thank Jenée Mateer for her leadership in helping us with the event from putting out the Call to coordinating the submissions. Thank you to all judges who volunteered their time to jury the submissions. My biggest thanks goes to Deidre Aiken, for her generosity in donating her space to our event and for

being flexible in working with our schedule. Thank you, artists, for submitting your artwork and for your patience as we wait for the ban on large group gatherings to be lifted. I also wanted to thank Jessica Rupkey, a Towson graduate student in marketing for her time and effort in conducting a marketing campaign to promote the event.

I am happy to report that we awarded two scholarships to two graduating seniors from Loch Raven Highschool. Virtuous Ayuk (pictured right, \$1,000) will be studying art therapy at Goucher College. Abigail Connor (pictured below, \$500) will be studying music at the Community College of Baltimore County. A recipient of our scholarship from Drexel university is still pending as of this writing.

Please stay calm and make the most of this "safer at home" time with your loved ones. Have a safe and healthy summer.



Abigail Connor

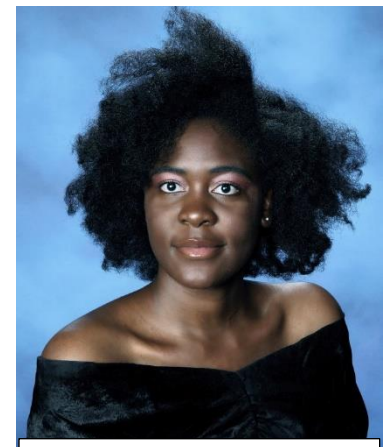
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### Upcoming events:

1. [Howard county Walk](#) – 10/10
2. [Baltimore Walk](#) – 10/31
3. Survivors of Suicide Loss Day – 11/21

### **TN Foundation Board of Directors**

Michael Biderman, Director  
Philip Hall, Director  
Nhung T. Hendy, President  
James Manley, Secretary & Social Media Manager

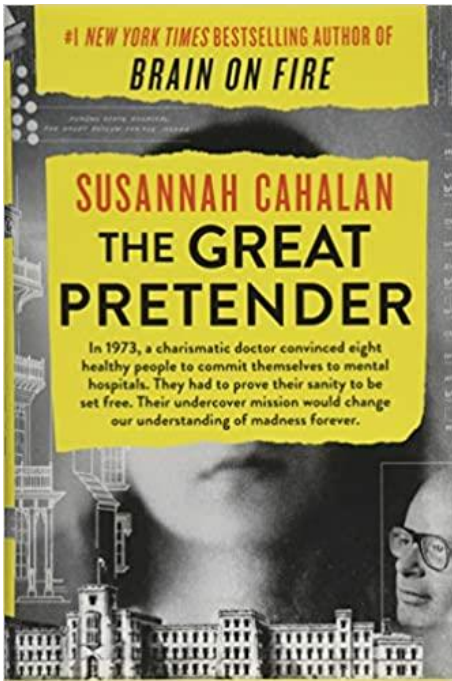


Virtuous Ayuk

## BOOK NOTES!

### The Great Pretender

Written by Susannah Cahalan  
Recommended by Nhung Hendy



I came to know this book by watching the Q&A with Susannah Cahalan on [C-SPAN Booknote](#) aired last year (11/10/2019). I have not yet read the book because I had to wait my turn due to its popular demand at my local public library. COVID-19 pandemic forced the library to close. Based on the interview with the book's author, I have learned a lot about mental health and our system of mental health treatment and care.

The book centers around Prof. David Rosenhan, a Stanford University professor who conducted an experiment during the early 1970s in which he recruited 8 healthy young men to play the role of an insane person and get themselves admitted to a mental hospital by saying that they heard voices in their head and by repeating 3 words "thud, empty, hollow". According to Cahalan's research, Prof. Rosenhan was biased in conducting his research to support his belief about the poor treatment of mental health patients in the U.S. at that time (think One Flew Over a Cuckoo's Nest). He left out one participant who reportedly was passionately cared for by the medical staff. He only included participants who reported being ignored

or abused by medical staff. The book is a validation of the impact Dr. Rosenhan's experiment had on the field of psychiatry in the U.S.

According to Ms. Cahalan, **there needs to be more mental health hospitals in the U.S. because the demand far outstrips the supply. It is sad to see how many mentally ill patients can be seen in jail cells** throughout the country where they do not belong. They should be able to obtain care in a mental hospital.

Ms. Cahalan was very persuasive and credible throughout the interview because of her own experience. She had an auto-immune disease that was misdiagnosed as schizophrenia that made her almost die in the hospital because of its treatment (the medication for schizophrenia made the auto-immune worse). She chronicled her own experience with mental health treatment in the U.S. in **her memoir "Brain on Fire", which was made into a movie** (I highly recommend it if you have not seen it already).

Watching the interview with Susannah Cahalan to me was cathartic because it **validates my own experience with the mental health system in the U.S. during the years I was struggling to seek help for my daughter** whose diagnosis kept changing because none of the doctors knew what was wrong with her.

Although I have yet to read this book, I feel strongly about it and I highly recommend it. You will not be disappointed.



Wishing you a great Fourth of July!  
Source: baltimoretimes-online.com

## COVID-19 and Your Mental Health

Summarized by *James Manley*

Have you thought about taking any steps to protect your own mental health? With the pandemic it's more essential than ever! A few suggestions:

- Limit screen time, and particularly news. You will feel better if you unplug for at least the 30 minutes before bed!
- Stay busy. Try cultivating your own sourdough starter, sprucing up your lawn or garden, or cleaning out that closet. Productive activities manage anxiety and help us cope!
- Focus on positive thoughts. Consider starting each day by listing things you are thankful for. Maintain a sense of hope, work to accept changes as they occur and try to keep problems in perspective.
- Check in with a friend or family member. Come up with ways to stay in contact. This could be through electronic devices or the telephone or by sending a note or post card to brighten someone's day.
- Get help when you need it! Please don't be afraid to ask for help—things don't get better on their own. Help can be from a friend, a leader in your faith community, a mental health professional, or [NAMI](#).
- Finally, I should mention the basics: get exercise, eat right, avoid relying on drugs such as alcohol to cope, take time to relax, and get enough sleep.

\* For more tips like these see the [Mayo Clinic's](#) webpage!



## IF YOU WANT TO CONTRIBUTE AN ARTICLE

Contact Nhung Hendy,  
President, TN Foundation Inc.  
[nhung@tnscholarshipforthearts.org](mailto:nhung@tnscholarshipforthearts.org)  
410-663-0207

**Research summary on the  
psychological impact of  
preexisting mental and physical  
health conditions during the  
COVID-19 pandemic**

*Summarized by Nhung Hendy*

The COVID-19 pandemic has substantially changed everyone's daily lives including our career trajectories and our sense of safety. Based upon existing research, younger adults (18 – 35 years of age) without any pre-existing medical conditions may be at a lower risk for complications of COVID-19 infection. However, young adults are often in unstable places in their careers, education, and social lives, which may be more disrupted by policy changes than those of older adults. Therefore, it is important to identify those within the young adult population who are at a higher level of risk for mental health difficulties relative to their peers in order to develop targeted intervention to mitigate emotional distress. Three researchers from Loyola University in New Orleans, LA set out to answer the above question. Their research was published on-line on June 11<sup>th</sup>, 2020 in the Journal of Psychological Trauma.

They recruited 620 young adults, defined as those between the ages of 18 and 35, and asked them to report their level of anxiety and depression before and after COVID-19 outbreak. To determine whether there were any differences in self-reported anxiety and depression in the weeks following the pandemic declaration by gender (broken down by three categories: male, female, and non-binary) and health status (broken down into four

categories: no pre-existing conditions, having either a pre-existing physical or mental health condition, and having both pre-existing conditions); the researchers conducted statistical analyses of the self-reported data. They found that the nonbinary participants reported the highest levels of depression and anxiety, followed by female participants. Male participants reported the lowest levels of depression and anxiety. **For health status, those with both mental and physical health conditions reported the highest level of anxiety and depression,** followed by those with mental health conditions, physical health conditions, and no pre-existing health conditions.

The policy implication of the study includes a call for resources to be directed toward individuals who fall into groups reporting greater emotional distress, so that clinicians can intervene as early as possible to prevent further mental health decline.

Reference:

Alonzi, S., La Torre, A., & Silverstein, M. W. (*in press*). The psychological impact of preexisting mental and physical health conditions during the COVID-19 pandemic. *Psychological Trauma: Theory, Research, Practice, and Policy*.

Researcher Jack Lennon from the Rush University Medical Center in Chicago, IL voiced his concern over the on-going suicide pandemic in the U.S. in an essay published on June 1, 2020 in the Journal of Psychological Trauma. He was baffled by the lack of compliance with social distancing during the stay-at-home order. He observed some individuals chose to engage with others in restaurants, bars, and other social events (e.g., birthday parties), placing themselves and everyone else at risk of COVID-19 infection. He noted that a residual impact of this pandemic is

suicide, currently unpredictable in the short term, and rising annually.

In the U.S., the average annual increase of suicide deaths was roughly 1,000 over the period of 2012-2016. However, increases in suicide deaths within the past 3 years have exceeded the estimated 1,000 average annual increase. **If this trend persists, it will equate to 51,726 suicide death total for this year – 2020, which is a 27.4% increase since 2012.** An important predictor of suicidal thoughts and ideation is social isolation (social distancing within one's home).

An important takeaway from Lennon's commentary is to make the most of the "stay-at-home" or "safer-at-home" time with your friends and loved ones. Social distancing does not mean social disconnection. **Know that a regular check-in via a phone call, a text message, a Google Meet or Zoom can serve as a pre-emptive screening, an effective suicide prevention strategy.**

Reference:

Lennon, J. C. (*in press*). What lies ahead: Elevated concerns for the ongoing suicide pandemic. *Psychological Trauma: Theory, Research, Practice, and Policy*.

