



Canadian Mental
Health Association
British Columbia



University
of Victoria

Centre for Addictions
Research of BC

What are the Mental Health and Substance Use Information Needs of Newcomers and their Supporters?

Findings from Recent Consultations with
the BC Multicultural/Settlement Sector



Overview

- Background
- Our process
- Consultation #1
- Consultation #2
- Next steps
 - Opportunities
 - Priorities for 2017/18



Background

BC Partners for Mental Health and Addictions Information

- A group of 7 provincial non-profit agencies
- providing quality information to promote well-being and
- help individuals and families prevent, recognize, treat and manage mental health and substance use problems



Background

- 2016: began a process to review the next steps for multilingual resources on our website: www.heretohelp.bc.ca
- Our goals:
 - **To understand needs** related to linguistically and culturally appropriate mental health and substance use resources
 - **To prioritize and inform** the development and distribution of the most useful mental health and substance use resources

Our process

- **Consultation #1:** We interviewed a range of individuals from the multicultural and settlement sectors—from program managers and settlement workers to mental health clinicians and primary care practitioners
- **Consultation #2:** We held a webinar and invited a larger group, asking more specific questions

Consultation #1

Key informant interviews...



Summary of key findings

- ★ Ensure resources are culturally relevant and appealing
- ★ Pay attention to literacy
- ★ Enhance supports for settlement and other professionals
- ★ Prioritize resources about navigating the system
- ★ Work in partnership with communities when developing resources
- ★ Figure out better ways to disseminate information
- ★ Recognize the needs of particular language and population groups

Detailed findings

★ Ensure resources are culturally relevant and appealing

- Avoid a tone that assumes Western model is best or that 'mental health' is even a concept
- Build on what's already in place, be strengths-based
- Talk about mental health in context of overall health
- Normalize settlement's impact on mental well-being
- Focus less on disorders, more on trauma, loss, grief, anxiety, stress, managing in daily life
- Recognize that not just *health* but *health services* may be viewed and trusted differently

Detailed findings

★ Pay attention to literacy

- De-emphasize written materials, use lots of visuals
- Illustrations over photos
- Design materials as memory aids after a face-to-face visit
- Brief, simple and repeat key messages
- Explain anything that could be unfamiliar

Detailed findings

★ Enhance supports for settlement and other professionals

- Support culturally safe conversations that acknowledge different experiences with health, social, justice, and other systems
- Acknowledge that newcomers often go to settlement workers and other intermediaries when they need help
- Provide good information on mental health impacts of settlement, on system navigation, and on examining own beliefs around mental health and substance use

Detailed findings

★ **Prioritize resources about navigating the system**

- Acknowledge a person's capacity to realistically act on the information
- Telling someone to go to their doctor isn't helpful on its own
- Break down how health, income, insurance etc. systems work

Detailed findings

- ★ **Work in partnership with communities when developing resources**
- ★ **Figure out better ways to disseminate information**
 - Rely less on websites as a primary method
 - Core information over multiple channels
 - Many newcomers want a relationship with the people that they are getting information from

Detailed findings

★ Recognize needs of particular language & population groups

- Immigrants and refugees have similar but not identical needs
- Consider specific audiences like parents, older teens
- Consider low-literacy English as a bridge to selected translations; use cultural adaptation whenever translating
- Language groups with particular needs include:
 - Middle Eastern (Arabic, Farsi, Dari)
 - African (Swahili, Tigrinya, Somali, West African languages)
 - Eastern European
 - South American (Spanish)
 - South and East Asian languages (Vietnamese, Nepali)

Consultation #2

Seeking specifics...



Consultation #2

Additional input on training needs of **professionals**

- Practical, ongoing, responsive
- Training/supporting other health professionals
- Vicarious trauma
- Supporting debriefs
- Dealing with distress
- Culturally-appropriate assessments
- Discussion spaces re: mental health (community of practice)
- Preferred formats
 - #1 Conference workshop / in-person presentation
 - #2 Webinar
 - #3 Video



Consultation #2

Additional input on information needs for **service users**

- Tools to support clients who are illiterate
- Low-literacy ways to talk about memory problems
- Peer support groups
- Cross cultural communication instead of interpretation (interpreter not just restricted to doing language interpretation)
- Formats believed to be preferred by newcomers
 - #1 Community talk
 - #2 Video
 - #3 App / audio / wallet card / brochure



Now what?



Next steps...

Opportunities

- Health care professionals need ongoing support in understanding and interacting with newcomers
- Professionals who don't have a mental health background need practical knowledge of mental health and substance use issues
- Professionals can be most effectively reached using in-person, interactive and engaging strategies (e.g., webinars, workshops, conferences, videos)
- Service providers who currently have face-to-face interactions with people whose primary language is not English often need simple practical tools they can use (e.g., visual tools for explaining complex issues)

Priorities for 2017/18

- Retire bulk of translated materials on HeretoHelp.bc.ca
- Enhance supports for professionals
- Engage with professionals to clarify the simple, practical, low-text tools that they would find helpful to use with various groups
- Work with settlement professionals to confirm priorities, strategies and formats (e.g., specific videos, webinars) and then develop content for training tools
- Explore idea of facilitating a multilingual and multicultural mental health 'community of practice'

Stay connected with us!

Please feel free to contact us for copies of the consultation report or if you're willing to engage with us again as we develop and disseminate resources:

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- You can also stay engaged by subscribing to our free, multicultural mental health/substance use quarterly e-newsletter, **Within Sight**: www.heretohelp.bc.ca/within-sight