

Newcomer Community Wellness Project

Community Collaborative Model

*Im/migrants' Perspective of their
Mental Health and Wellness*

APRIL 27, 2016

Acknowledgments

Immigrant Services Association of Nova Scotia (ISANS) would like to express its gratitude to members of the im/migrant community and agencies working in collaboration with this project for their valuable support and guidance during the implementation of this project.

Project Advisory Committee

Anna Jacobs – Capital Health Community Development Advisor (Diverse Communities)

Diana Guzman – Community Member

Gilliam Zubizarreta – Halifax Refugee Clinic

Hanaa Rashid – Community Member

Ingrid Waldron – School of Nursing, Faculty of Health Professions. Dalhousie University

Jennifer Jeffrey – IWK Health Center Mental Health & Addictions Program

Kathryn Bates-Khan – YMCA Centre for Immigrant Programs

Mira Musanovic – Immigrant Services Association of Nova Scotia (ISANS)

Sylvia Calatayud – Immigrant and Migrant Women Association of Halifax

Tabinda Sheikh – Nova Scotia Department of Health and Wellness

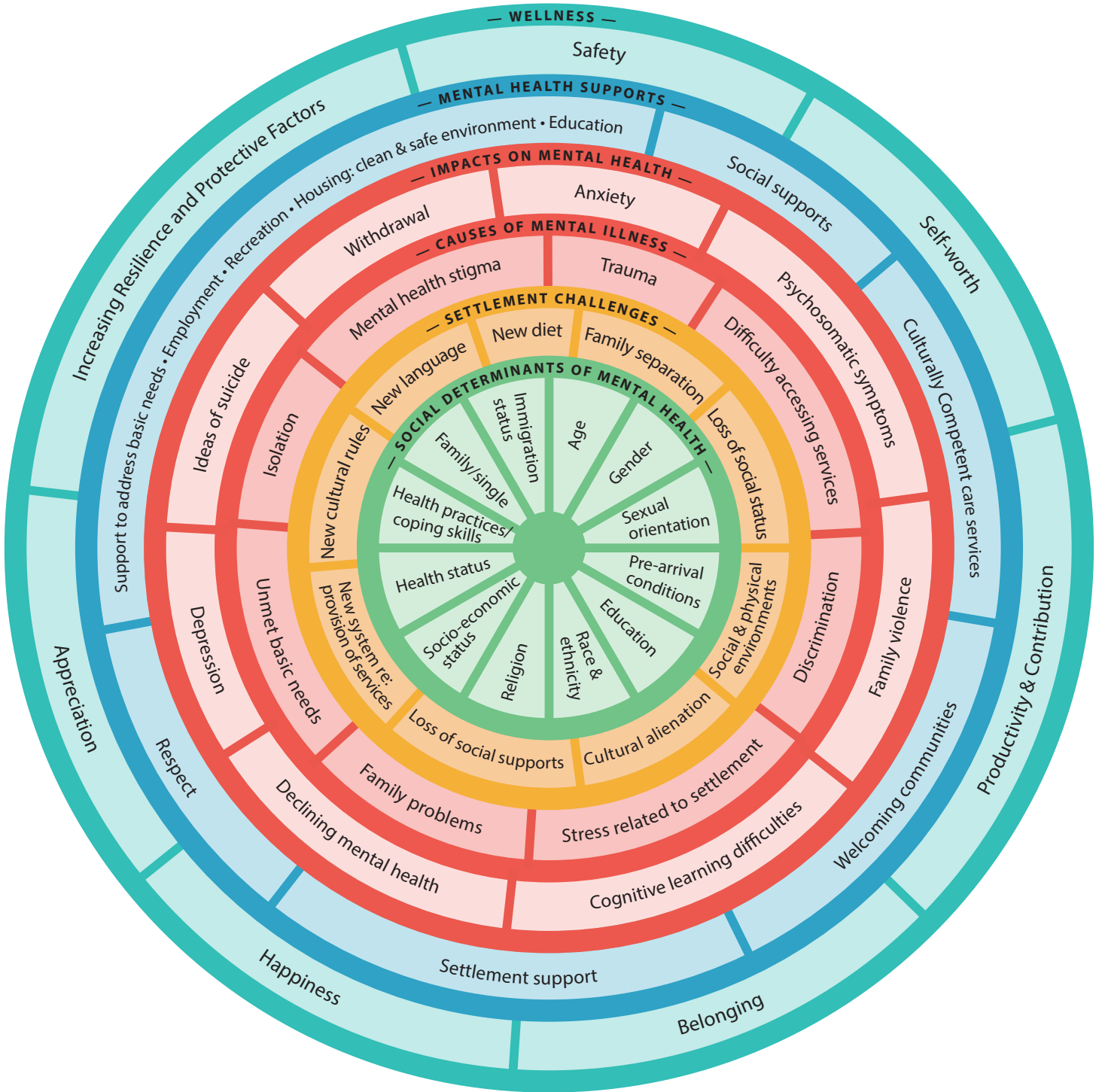
Project team: Carmen Celina Moncayo, Odette Gbeve, Rupesh Dhungana.

Background

The **Newcomer Community Wellness Project** is a three-year initiative led by Immigrant Services Association of Nova Scotia (ISANS) and funded by the Nova Scotia Department of Health and Wellness in the framework of the Nova Scotia Mental Health Strategy. The project aimed to develop a model to provide equitable and culturally competent mental health services to im/migrants and to help communities increase their ability to respond to issues of mental health, wellness and addictions.

- **Im/migrant = immigrant/migrant:** this project addresses the needs of immigrant and migrant populations.
- **Immigrants:** people who have moved to live in Canada and have Permanent Resident status such as Government Assisted Refugees, Privately Sponsored Refugees, Economic and Family class immigrants, Provincial Nominees.
- **Migrants:** people who have moved to Canada and do not have permanent status such as Temporary Foreign Workers, Refugee Claimants, International Students and their families. They are eligible for different services. Immigration status is a crucial social determinant of physical and mental health.
- **Im/migrant communities:** when using the term im/migrant community it is important to recognize that we are not talking about a homogeneous group bound together by similar goals, ways of living and worldviews. Very often, rather than approaching a “particular community”, we are connecting with different small groups with or without connections among themselves and with very diverse needs and life experiences.

Im/migrants' Mental Health and Wellness Wheel



The wheel summarizes the findings of the im/migrant community consultations on mental health and wellness

SOCIAL DETERMINANTS OF HEALTH

Factors that influence im/migrants' mental health

SETTLEMENT CHALLENGES

Challenges experienced during the initial stages of the settlement process that might affect im/migrants' mental health

CAUSES OF MENTAL ILLNESS

Root causes of mental illness

IMPACT ON MENTAL HEALTH

Mental health problems and illnesses experienced more frequently by im/migrants

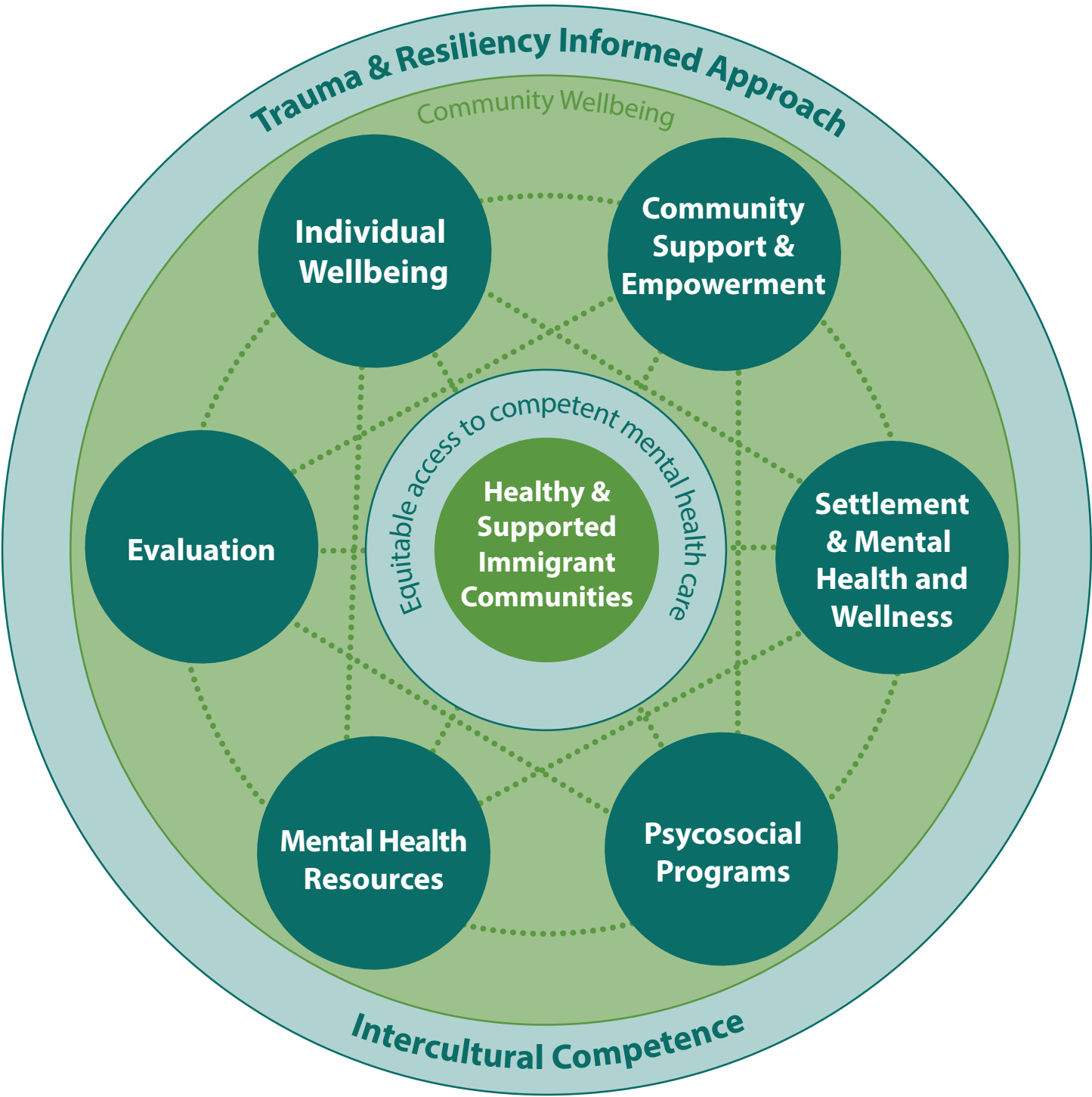
MENTAL HEALTH SUPPORTS

Supports needed to promote mental health and wellness

WELLNESS

Im/migrants' definition of mental health and wellness

Community Collaborative Model of Supporting Im/migrants Mental Health & Wellbeing



Introduction

The Model of Mental Health and Wellbeing Support for im/migrants (*this project addresses the needs of immigrant and migrant populations*) has been developed from the implementation of the Newcomer Community Wellness Project over the past 3 years. It has been informed by a literature review conducted during its implementation and lessons learned from our work together with im/migrant communities and mental health service providers.

The model is a framework to guide actions in six interconnected targets of intervention that, based on principles from the Trauma Informed Approach and Intercultural Competence, together build a welcoming community that supports the wellbeing of immigrants. It is an invitation to different sectors, im/migrant communities, primary care, the settlement sector, social services, mental health services, public and private and non-profit organizations and community health boards to visualize their role and to contribute to the ongoing development of the model.

The model should be flexible enough to be updated according to the changing demographics of im/migrants. All of us play a role in gathering culturally relevant information on the changing dynamics of those we serve, particularly settlement agencies. Additionally, all of us play a role in identifying the indicators that measure how well these strategies are working to support im/immigrants.¹

Vision

Im/migrants coming to Nova Scotia find a welcoming community that supports their efforts to maintain their wellbeing and provides equitable and culturally competent mental health care.

Guiding Principles

The model is guided by principles embodied in two key frameworks of practices:

Trauma and Resiliency Informed Approach

We recognize that many im/migrants have experienced traumatic events and that the settlement process might create new sources of stress. We are committed to reviewing and developing policies and to promoting relationships with im/migrants that enhance their resiliency and facilitate healing and growth². We will be guided by the trauma informed approach principles of:

- safety and trustworthiness
- choice and control
- empowerment and collaboration
- strength based skills building
- cultural and historical awareness
- engagement and developmentally-appropriate considerations³

Intercultural Competence

This is a key strategy for reducing general inequalities that affect access to resources for prevention and promotion of mental wellbeing and for improving the quality and effectiveness of mental health care for im/migrant populations.

Developing and embedding intercultural competence in this model means:

Awareness of Social Determinants of Health

- Address social determinants of health, in particular those related to the immigrant experience, such as language barriers, family separation, immigration status and pre-arrival conditions.

1. Canadian Collaborative Mental Health Initiative. Establishing collaborative initiatives between mental health and primary care services for ethnocultural populations. A companion to the CCMHI planning and implementation toolkit for health care providers and planners. Mississauga, ON: Canadian Collaborative Mental Health Initiative, February 2006. www.ccmhi.ca

2. The Trauma Toolkit. A Resource for Service Organizations and Providers to Deliver Services that are Trauma-Informed. Second Edition, Klinik, Community Health Centre, 2013. Retrieved from trauma-informed.ca

3. Your experience matters. www.yourexperiencesmatter.com/learning/trauma-informed-care/principles-of-trauma-informed-care/

- Consider the intersectionality of gender, age, ethnicity, sexual orientation and religion in the way im/migrants maintain their wellbeing and experience mental problems and how it affects their access to services and the quality of services they receive.
- Acknowledge the influence that social disparities and imbalances can have in our relationship with diverse racialized communities⁴.
- Include the provision of interpretation and culturally relevant materials as an issue of people's right to access the health care they deserve.

Collaboration and Empowerment

- Create consistent and long term opportunities for collaboration with immigrant and community organizations to strengthen their capacity to address issues of wellbeing and mental health problems.
- Using a knowledge exchange approach, both service providers and communities learn from each other about their particular frames of reference, understanding and interpretation of factors associated with protective and risk factors and the cultural and structural changes required to build equality.

Holistic Approaches to Mental Health and Wellbeing

- Valuing and respecting cultural diversity means including different perspectives in the way people see mental wellbeing and mental health problems.
- We have learned that Im/migrants tend to have a holistic perception of mental wellbeing that includes spiritual, physical, mental and emotional wellness.
- In developing this model we adopted the following definition from the Human Face of Mental Health and Mental Illness in Canada that fits well with the im/migrant perception of mental health and well-being:
*Mental health is the capacity of each and all of us to feel, think, and act in ways that enhance our ability to enjoy life and deal with the challenges we face. It is a positive sense of emotional and spiritual well-being that respects the importance of culture, equity, social justice, interconnections and personal dignity*⁵.
- Consequently what is required is a holistic approach to mental health that is multidimensional, comprehensive and built on collaboration among communities and organizations.

Interventions

There are two main interventions in this model:

- Prevention and promotion of mental health to support community wellbeing
- Direct mental health care and recovery

All of us have a role to play in these two interventions and, according to both the literature and our experience during the implementation of the project, the more we work together to support the settlement process and to create conditions that strengthen resilience, the less we need to use direct mental health care services. We know as well that most of the mental health problems experienced during the settlement process are better addressed through community interventions.⁶

Finally, by working together in the area of prevention and promotion we:

- facilitate timely access to mental health care services when it is required
- improve its effectiveness by making the proper referrals and by increasing mental health care providers' understanding of the immigrant experience

Consistent and long term funding of community organizations is required to provide a holistic approach and to address systemic gaps in current mental health service delivery.

4. Canadian Mental Health Commission. www.strategy.mentalhealthcommission.ca/pdf/strategy-images-en.pdf

5. The Human Face of Mental Health & Mental Illness, 2006. www.phac-aspc.gc.ca/publicat/human-humain06/pdf/human_face_e.pdf

6. To review examples of this model of intervention see: Transcending Violence: Emerging Models for Trauma Healing in Refugee Communities. Andrea Blanch, National Center of Trauma Informed Care, Draft 5/29/08, retrieved from www.c-r-t.org/content/research/TransViolencepap.pdf Culture, Context & the Mental Health and Psychosocial Wellbeing of Syrians, Geneva, UNHCR, 2015, retrieved from www.unhcr.org/55f6b90f9.pdf

Targets of Intervention

1. *Enhance individual capacity to maintain mental health, wellbeing and skills to deal with stress.*

Most im/migrants are resilient and present few mental health problems at their arrival. Settlement stress and experiences of conditions of inequality at arrival increase the risk of developing mental health problems. In addition to addressing basic settlement needs it is important to offer psycho-educational interventions to individuals and groups, to enhance healthy strategies to cope with stress and to actively move in a health promotion direction⁷. It is recommended that mental health education is integrated into the settlement support and services available for im/migrants and their families⁸.

Key focus areas:

- Reduce stigma
- Increase skills and knowledge to practice self-care
- Increase ability to seek help and information about wellness support programs and mental health care services

Recommended Actions

- Provide group orientation for new arrivals; topics: settlement stages and settlement stress, mental health and wellness systems of support in Canada
- Include mental health and wellness topics included in English as an Additional Language (EAL) curriculum
- Provide educational sessions on settlement stress and learning to live with stress
- Create wellness support groups - offer opportunities to develop friendship and peer support, learn about different holistic practices of self-care, healthy strategies to deal with stress and ability to self-regulate emotions
- Use multilingual resources: Mental Health & Wellness Resource Brochure, ISANS website (www.isans.ca/mental-health-and-wellness). Mental Health Services increase culturally relevant and translated resources on mental health and access to services
- Individual orientation and support related to emotional distress produced by the settlement process
- Collaborate with primary care, mental health care services and settlement agencies to tailor and deliver orientation, wellness support group and educational sessions on specific topics

2. *Enhance im/migrant communities' capacity to support the wellbeing and to contribute to the mental health care and recovery of their members.*

We know that most im/migrants rely on family members, friends and natural and spiritual leaders in their communities to address issues of wellbeing and mental health problems. Therefore, it is important to support community members in cultivating the skills and abilities to effectively support the needs of newcomers while adjusting to the new environment or/and when experiencing mental health problems and illnesses. It is essential as well to establish connections between natural helpers and mental health service providers to build inclusive and responsive systems of support.

Key focus areas:

- Reduce stigma
- Enhance peer support
- Increase skills and knowledge to support others
- Increase im/migrant communities in decision making process regarding mental health care prevention, promotion and care

Recommended Actions

- Provide educational programs for natural helpers
- Plan knowledge exchange between im/migrant natural helpers and mental health care service providers
- Include im/migrant voices in the development of policies and strategies, programs, services and evaluation

7. Lindstrom and Eriksson, 2005, Transcending Violence: Emerging Models for Trauma Healing in Refugee Communities, Andrea Blanch, National Center of Trauma Informed Care, 2008

8. Immigrant Mental Health, A Public Health Issue: Looking Back and Moving Forward. Usha George, Mary S. Thomson, Ferzana Chaze and Sepali Guruge. www.mdpi.com/1660-4601/12/10/13624/htm

- Include spiritual and natural leaders for collaborative care
- Train im/migrants in participating in advisory and consultative processes

3. Address mental health and addictions problems.

Significant changes are needed within mental health care services to address the mental health needs of im/migrants. This model suggests studying collaboration implemented in other cities in Canada to better serve im/migrant populations. This includes primary mental health care providers and mental health professionals working closely with primary sources of referrals, such as settlement workers and school teachers⁹.

Key focus areas:

- Early identification of signs of distress
- Early intervention and collaboration during the waiting period
- Collaborative care
- Knowledge exchange among interdisciplinary teams
- Research and development of evidence-based screening and treatment in different im/migrant groups

Recommended Actions

- Advocate for collaborative teams in family clinics. Literature suggests settings that include multiple service providers eased or reduced barriers to services, making them more accessible.¹⁰ Include a clinician and psychiatrist in the Transitional Health Clinic for Refugees in Halifax.
- Establish clear paths of communication between settlement organizations, family physicians and mental health services
- Expand and work in collaboration with the Network of Private Practitioners, Transitional Health Clinic for Refugees and settlement agencies to effectively deliver counselling services covered by the Interim Federal Health Plan for Government-Assisted Refugees, Privately Sponsored Refugees and Refugee Claimants during the first year or settlement. Recruit, select and train psychologists and develop framework of collaboration.
- Build capacity among mental health services providers to work in collaboration with interpreters and offer interpretation at all levels of intervention
- Use a collaborative and interdisciplinary approach to case consultation
- Create targeted group initiatives in collaboration: smoking cessation, support group for parents with children experiencing anxiety, trauma impact, support groups for family members dealing with issues of family separation, grief, mental illness, etc.

4. Enhance settlement sector to support and facilitate im/migrant access to mental health care.

The settlement sector is uniquely positioned to recognize psychological difficulties and facilitate the bridge between im/migrants and mental health services. This allows them to build trust and rapport with im/migrants that other professionals have difficulties establishing. By supporting settlement organizations to enhance their capacity, immigrants will have a better chance to address their mental health concerns early using community resources and get specialized support when needed.

Key focus areas:

- Early identification of signs of distress
- Integration of mental health and wellness objectives into settlement activities
- Orientation to and navigation of the mental health system
- Exchange of knowledge with primary and professional mental health care providers

9. Immigrants & Mental Health Services: Increasing Collaboration with Other Service Providers. Transcultural Child Psychiatry Service at the Montreal Children's Hospital, Lucie Nadeau, MD, Toby Meastram, MD. www.cacap-acpea.org/uploads/documents/67/August2005ImmigrantsandMentalHealthServices.pdf

10. CCMHI, 2006. www.ccmhi.ca

Recommended Actions

- Train staff in mental health and addictions support
- Offer im/migrants orientation and support to navigate system
- Assess im/migrant mental health needs and strengths and inform and define priorities in collaboration with mental health and other services
- Use collaborative and interdisciplinary approach to case consultation
- Include natural helpers in the design and assessment of support strategies
- Involve im/migrants in larger initiatives of advocacy on mental health issues
- Continue advocacy to deliver the Canadian Mental Health Association's online program for refugee mental health for settlement and primary care sector

5. Provide psychosocial programs to enhance resiliency and facilitate social inclusion and community attachment.

Increased availability of psychosocial programs can moderate the stress of settlement.¹¹ Programs that allow individuals to reconnect with their strengths and their sense of worth and purpose, like sports, arts and crafts, physical activities, gardening, volunteering, cultural and community events create a sense of connection and belonging. They also present the opportunity to address change from a perspective of possibility and hope rather than loss and grief.

Key focus areas:

- Increase awareness among im/migrants of the wellness benefits of enrolling in community, art and recreational activities
- Increase sense of mastery by providing opportunities to recognize previous skills and practice them in new environment
- Integrate mental health and wellness objectives in community and recreational activities
- Facilitate integration and work toward inclusive communities by involving local members

Recommended Actions

- Train staff and volunteers on the im/migrants settlement process, wellbeing and mental health
- Create a central hub to keep settlement staff, mental health care providers and community in general informed about local programming
- Promote psychosocial programs among im/migrants
- Partner with municipal services (libraries, community centres) and community organizations to deliver psychosocial programs and subsidized programs

6. Develop evaluation strategies to measure impact and sustainability of mental health and wellbeing programming.

There is currently only limited evidence that allows us to evaluate the impact of primary care strategies for promoting mental health and preventing mental illness that respond to the increasing diversity of immigrants and refugees in Canada¹². There is however, both international and Canadian research showing its potential in a number of studies. The development of this model requires a coherent and strong system indicators to measure progress and provide evidence regarding which strategies are most effective during the settlement process.

Key focus areas:

- Develop mental health and wellbeing indicators for im/migrants during their settlement process

Recommended Actions

- Form an advisory committee that guides the development of the model, facilitates coordination and liaises with the different agencies involved in the model.
- Build an evaluation framework with the settlement sector and universities across Canada

11. Immigrant Mental Health, a Public Health Issue: Looking Back and Moving Forward. Usha George, MaryS Thompson, Ferzana Chaze and Sepali Gurugi. www.mdpi.com/1660-4601/12/10/13624/htm

12. CMAJ Canadian Guidelines for Immigrant health. Common mental health problems in immigrants and refugees: general approach in primary care. Laurence J. Kirmayer Md. Lavanya Narasiah, MD MScI Maire Munoz September 6, 2011

Newcomer Community Wellness Project

Community Collaborative Model

Im/migrants' Perspective of their Mental Health and Wellness

Immigrant Services Association of Nova Scotia (ISANS)

6960 Mumford Road • Suite 2120

Halifax • Nova Scotia • Canada • B3L 4P1

Phone: 902.423.3607 • Fax: 902.423.3154

www.isans.ca