

Mental health needs not being met for immigrants and refugees

Michaela Hynie, Navindra Baldeo, & Marc Settino

What you need to know

Immigrants and refugees often face elevated stress due to discrimination, social isolation, and under-employment. These may aggravate or even cause mental health problems. Immigrants and refugees also face significant obstacles in getting care, including a lack of linguistically and/or culturally appropriate services, and often do not know about the services that do exist. Mental health needs differ between immigrant and refugee groups but also even within specific ethnic communities and cultures. They also depend on diverse individual factors such as immigration status, ethnicity, religion, gender, age, ability/disability, and sexual orientation.

The Central West Local Health Integration Network (LHIN) is a non-profit organization that works with local health providers and the community to determine health priorities. The Central West LHIN encompasses the most ethnically diverse region of Ontario. Many multicultural social and community services are available in the LHIN, but mental health services for specific communities are limited, with some being better served than others. For people requiring more tailored support such as those in need of housing, with addiction problems, or in specific age groups, many challenges exist. Ethnic and culturally specific mental health issues are often tied to problems of lack of employment, low-income, transportation difficulties, and English language ability. Effects vary depending on age, gender and culture, showing the importance of specialized resources to address different groups within a community. Communities do have existing knowledge and resources to address challenges in a cultural context. This points to the opportunities that exist in facilitating peer-to-peer interventions in supporting mental health needs.

What is this research about?

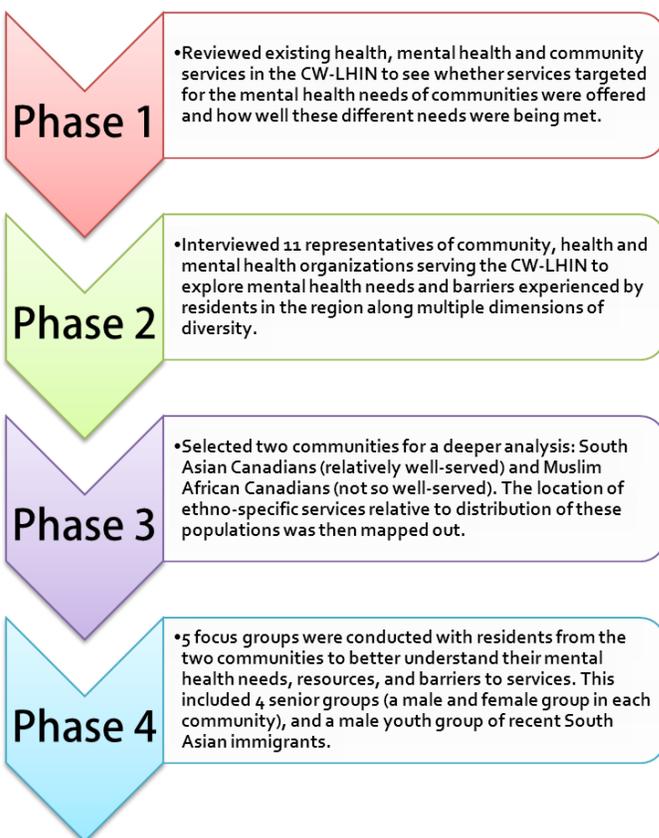
This project explored mental health needs over several sectors. It looked at the availability of mental health services for immigrants and refugees in the area served by the CW-LHIN to better understand the specific challenges that diversity can create for mental health services.

This research set out to answer specific questions:

1. What kinds of social and mental health services are available to immigrants and refugees in the Central West LHIN?
2. Which newcomers and sub-populations are best served?
3. How do different dimensions of diversity affect mental health needs and service barriers within ethno-cultural communities?

What did the researchers do?

This research was conducted through four phases:

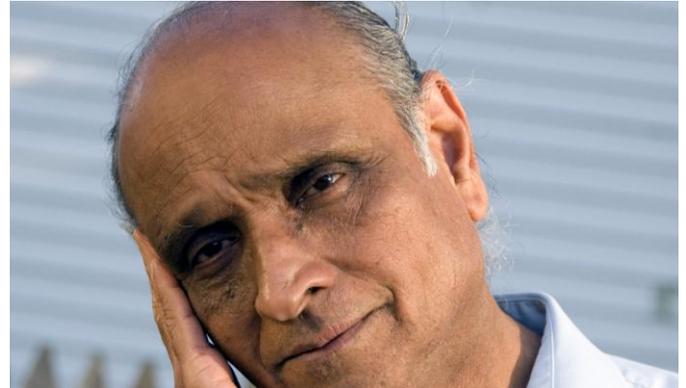


What did the researchers find?

Several organizations serve culturally diverse communities in the CW-LHIN, but there are few ethno-specific mental health services. Types of services vary by ethno-cultural community, with larger communities, like the South Asian community, having a greater number and range of services that are located close to where they live. Other communities, like the Muslim African community, may be very poorly served, with few resources and little knowledge about services that do exist. Service providers emphasize the importance of culturally specific care but some also note that providers do not necessarily match the community in terms of ethno-cultural diversity, and that residents from immigrant communities may not be as aware as non-immigrant residents of available services. Concerns were also raised about challenges providers face when trying to meet the mental health needs of diverse clients within specific communities, such as those with addictions, who are socially isolated by virtue of physical or mental disabilities, or youth and seniors.

Later findings emphasized how age, gender, ethnicity, physical mobility, and length of time in Canada all relate to stress. Challenges around employment and low income, poor English language ability, and lack of access to transportation had negative effects for all. However, some groups were affected more than others for reasons having to do with gender roles, migration patterns, and family cohabitation norms. Traditional family roles were both a source of stress and resilience, again depending on gender, age, and ethnicity.

Most participants found community services very helpful. Ethno-specific places of worship provided support, social networks and information. Young people were also able to access mental health resources through school. Men in the older Muslim African group reported being particularly under-served in terms of mental health and community resources, while older South Asian women and men were the most knowledgeable about available services. Nonetheless, South Asian residents also faced significant barriers in accessing available services due to cost, transportation and mobility.



Mental health needs of immigrants and refugees vary by ethnic community and culture. They are even further complicated by issues of sexuality, age, disability, and other individual factors.

They also struggled the most with social isolation. All expressed the need for culturally appropriate mental health services and meaningful social roles like volunteering. Moreover, to allow for activity involvement, access to adequate transportation is essential.

How can you use this research?

The findings of this research emphasize the complexity of needs within newcomer communities. More support for community and peer activities, transportation, and affordable services is needed. Needs of particular groups within communities, such as gays and lesbians, may be challenging to address within traditional ethno-cultural communities and require additional services or support.

About the researchers

Project title: *Identifying Unmet Mental Health Needs in Immigrant and Refugee Communities in the Central West LHIN*

Michaela Hynie is the Associate Director of the York Institute of Health Research and Associate Professor in the Department of Psychology at York University.

Navindra Baldeo, M.A. is a PhD student in the Institute of Health Policy, Management and Evaluation at the University of Toronto.

Marc Settino, M.E.S. is a research associate at St. Michael's Hospital, Toronto, Ontario.

Keywords

Mental health, immigrants, refugees, immigration, diversity, seniors, youth, Muslim African, South Asian, ethno-cultural, communities, Ontario, Local Health Integration Network