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Mental health and substance use
information you can trust



Canadian Mental
Health Association
British Columbia
Mental health for all

let's discuss

cross-cultural mental health and substance use

info sheets 2014 www.heretohelp.bc.ca



“I realized that I wasn’t alone going through [depression]. There are others like me facing the same life stresses. By interacting with other members, we shared our stories and understood that life can be better.”

—Kanwal Grewalson, BC

Our communities are culturally diverse. We know that mental health and substance use problems affect everyone, regardless of their background, culture or ethnicity, but current mental health and substance use services may not be able to respond to the diverse needs of our community members. While some services are underway, we still need to increase our awareness of cultural factors so we can help all community members equally.

Society, culture and mental health

Culture is bigger than one person. It includes sharing a set of values, beliefs, traditions and sense of belonging. Likewise, whenever we talk about mental health or well-being, we’re talking about something that is much larger than one person. The attitudes, skills and resources that lead to well-being are also shaped by things around us, such as:

- Our connections to others around us
- Our ability to participate in larger groups
- Our ability to access support or help
- Our social environment

- Our physical environment
- Our own ability to cope with stress or difficult situations
- Our work life and income
- The health services we can access
- Our culture—including our ability to participate in our culture and connect with our cultural groups

How does culture affect mental health and substance use?

Culture is related to mental health and substance use on several different levels. First, community members from different ethnic or cultural groups may have a higher risk of mental health or substance use problems because they

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beyond “immigrant” and “refugee”

We hear about immigrants and refugees all the time, and it can be easy to think of them as one group. But there may be big differences between immigrants and refugees, including different mental health risks.

Immigrants are people who come to live in a new country. According to the “healthy immigrant effect,” immigrants are healthier when they arrive in Canada than the Canadian-born population. Then, over time, their health declines until the difference disappears. Many researchers suggest this happens because you need to be healthy to immigrate to Canada. But there are many cultural factors that affect how you think about health in the first place. For example, a person may not identify a mental health problem as a health concern.

Refugees are people who are forced to leave their home because they will be harmed if they stay. They may have witnessed conflict like war or political unrest. They may have lost their families, friends, home, status and income. As a result, refugees may have a higher risk of mental health problems as they cope with the stresses of coming to Canada, adapting to their new community and making an income. Some of the challenges they might face include post-traumatic stress, unemployment and poverty, racism and feelings of worthlessness.

There are also differences within immigrant and refugee groups. Factors like personal history, family, traditions, beliefs, education, employment, income, social status, community support networks, language abilities and age also play a big role in mental health. We can't assume that all immigrants and all refugees have the same needs and concerns. We also shouldn't assume that all people within one cultural group are the same—in fact, differences within the same culture may be as great as differences between cultures.

may experience a greater number of stressors, such as discrimination and isolation. Newcomers to Canada may face the added stress of fitting into a new community. They may have different perspectives of health and may face language barriers when they access health or other services. They may have experienced trauma before they arrived in Canada. And once they arrive, they may have a lower status in Canada in terms of wealth or influence. This loss of status can be difficult to cope with. But culture is also a rich source of resilience and strength. It can provide support to overcome barriers and help people find their pathway to wellness.

Stigma and discrimination—The stress of stigma and discrimination in all areas of life affect well-being. New Canadians may experience stigma and discrimination in education, employment, housing, health care and justice, just to name a few. There is stigma around mental health and substance use in Canadian culture. Other cultures may also stigmatize mental health or substance use. Some people may try to avoid stigma by refusing to recognize a problem.

Different perspectives—Culture plays a big part in the way we think about and understand health and wellness. Different cultural groups may have different explanations of mental health problems or substance use problems. And different people may explain mental health or substance use problems in different ways. For example, some people talk about mental health in the way it affects the physical body. Others may think of it as a sign of misfortune. If the health system doesn't recognize that someone may be experiencing a problem, people may not get the help they need.

How people seek help may also be tied to culture. Some may prefer to talk privately with family members or faith leaders rather than a doctor. Others may prefer to talk to someone outside of their cultural group. And some may be less likely than other Canadians to talk to anyone. What is considered a “problem” may also be different among different people. The health system may call something a problem, but someone may understand it in a very positive way, like a spiritual experience. And some people may come from countries with no health care or an inaccessible health care system, so they may not understand how the Canadian health care system works or trust health care professionals.

Adapting to a new culture—“Acculturation” means adapting to the cultures and norms of your new home. The stress and anxiety of feeling pressured to adapt or feeling like you don't know how to

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adapt affect many people. It can cause stress within a family or community, too. Young people may adapt to different cultures more easily than older people, which can lead to conflict among family members. Even people born in Canada may feel caught between Canadian culture and their family's culture. But research shows that family support and community support play an important role in lessening the effects of this stress.

Language—In BC, knowledge of English may affect health. It's easy to see how a lack of English skills may prevent you from accessing health materials and health services. Even fluent English speakers may struggle with medical terms. People without strong English skills may misinterpret or misunderstand the concepts. This can make it hard to explain health concerns to a health professional, understand what a health professional is saying, and follow a health professional's instructions

Trauma—Trauma is a situation that's shocking, intense and distressing. The act of moving to a new country and adapting to a new community may be traumatic itself. Some also witness or experience very traumatic events like war or torture. Trauma can mean different things to different people, so Western ideas trauma may not include everyone's experiences. For example, in a study of a refugee group, people felt that witnessing the destruction of important religious sites was more traumatic than the personal harm they experienced—including imprisonment, torture and assault.

Isolation—How connected we are to others plays a big part in mental health. People may be isolated from others for a number of reasons. Culture, language, identity, access to services, access to opportunities and discrimination are just a few factors that may contribute to isolation. Isolation is a risk factor for mental health and substance use problems, and it may stop people from finding help or connecting with resources. It may also get in the way of recovery, as recovery often involves rebuilding self-esteem, social supports and finding a meaningful role in your community.

Resilience—Despite the challenges, newcomers to Canada can and do show remarkable resilience. Resilience is our ability to overcome difficult situations. It includes our personal ability to overcome problems on our own, but it also includes support from groups around us, like our family or community. The way we overcome difficult situations, including the way we help ourselves and the way we find help from others, is linked to cultural factors like our values and beliefs. Even the way we view different situations is based on our values and beliefs. We know that culture is a very important part of our well-being. The values and beliefs we learn through our culture help guide us to wellness.

What can we do about it?

“Cultural safety” should be the goal for people who work with ethnic or cultural groups. Cultural safety starts with cultural competence—that is, our ability to work with people with different cultural backgrounds.

Cultural safety means going beyond cultural competence and taking responsibility for the way we view culture. It means that people of all cultural backgrounds work together respectfully and effectively with knowledge and awareness. It includes attitudes, behaviours, skills, policies and procedures. Cultural safety might include:

- Understanding your community
- Building links between health services and culture-based community organizations or other organizations that serve a specific community, and recognizing the experiences and expertise of cultural organizations and leaders in our communities
- Providing helpful, tailored information in other languages
- Recognizing cultural, medical or health practices
- Making sure policies recognize the needs of the community, such as family or religious roles
- Providing tools like health screenings that are culturally relevant to the community you want to serve. One way to do this is to make sure tools use examples or questions that apply to a particular group, rather than simply translating a tool or screen from English
- Looking at the whole person beyond cultural or any other borders
- Looking at the bigger picture and recognizing that it's difficult to separate mental health concerns, like depression, from larger concerns, like poverty or lack of housing. And not assuming that we are all on a level playing field.

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where do I go from here?

Check out the resources below for more information on cross-cultural mental health and substance use:

[BC Partners for Mental Health and Addictions Information](#)

Visit www.heretohelp.bc.ca for information on mental health and substance use in Arabic, Simplified Chinese, Traditional Chinese, Farsi/Dari (Persian), French, Korean, Punjabi, Russian, Spanish, Japanese and Vietnamese. You can sign up for Within Sight, a free e-newsletter that highlights mental health and substance use resources in many languages. And you can read the Older Adult Immigrants and Refugees issue of Visions: BC Mental Health and Addictions Journal.

Our Aboriginal community members also face unique issues. See the info sheet, "Let's discuss: Aboriginal Mental Health and Substance Use."

[The Affiliation of Multicultural Service Providers \(AMSSA\)](#)

Visit www.amssa.org for information, events and resources. You can find service providers across BC and search the Multicultural Health Resources database. Visit www.amssa.org/cultureswest to read Cultures West, a magazine that discusses migration, immigrant settlement and integration. A past issue also looks just a mental health and culture.

[Multicultural Mental Health Resource Centre](#)

Visit www.mmhrc.ca for resources, research and information. You can find a database of mental health and substance use information in many languages and read the Mental Health Commission of Canada's report on diversity in mental health care, called Improving mental health services for immigrant, refugee, ethno-cultural and racialized groups.

[Cross Cultural Clinic at Vancouver General Hospital](#)

The Cross Cultural Clinic at Vancouver General Hospital provides culturally sensitive and language-specific psychiatric services. They can provide assessments, short-term counselling, education and community resources for residents of Vancouver. A referral is required. They also provide case reviews and second opinions for service providers across BC. Services are available in a number of languages and interpreters are available.

For more information, visit www.psychiatry.vch.ca/cccl.htm or call 604-875-4115.

This fact sheet was written by the Canadian Mental Health Association's BC Division. The references for this fact sheet come from reputable government or academic sources and research studies. Please contact us if you would like the footnotes for this fact sheet. Fact sheets have been vetted by clinicians where appropriate.



[BC Partners for Mental Health and Addictions Information](#)

HeretoHelp is a project of the BC Partners for Mental Health and Addictions Information. The BC Partners are a group of nonprofit agencies working together to help individuals and families manage mental health and substance use problems, with the help of good quality information. We represent Anxiety Disorders Association of BC, BC Schizophrenia Society, Canadian Mental Health Association's BC Division, Centre for Addictions Research of BC, FORCE Society for Kids' Mental Health, Jessie's Legacy Program at Family Services of the North Shore, and Mood Disorders Association of BC. The BC Partners are funded by BC Mental Health and Addiction Services, an agency of the Provincial Health Services Authority.