Introduction and Background:

There is increasing recognition that cultural adaptation of interventions is essential to respect cultural values. The Towards Flourishing (TF) Project presents an opportunity to increase our understanding of how best to address cultural issues in the development and delivery of mental health interventions. This TF case study on cultural adaptation is consistent with the objectives of the cultural lens on the TF Mental Health Promotion (MHP) Strategy designed to align the Strategy with the diverse needs of Manitoba families to ensure cultural relevance and meaningful promotion of mental health and wellness. This case study highlighted the experiences of the Public Health (PH) staff in using the TF Strategy with their immigrant and refugee clients.

Research Questions:

- What are priority mental health issues for immigrant and refugee families in Manitoba?
- How do we talk about mental health in culturally meaningful and relevant ways with families in these groups?
- What principles and guidelines do we need to consider in developing mental health promotion initiatives that are both effective for and respectful to immigrant and refugee families across Canada?

Participants:

- 4 Focus Groups with PH Staff
  - 2 with Public Health Nurses – in total 11 participated
  - 2 with Home Visitors – in total 12 participated
- 4 Individual interviews with Newcomer mothers

Data Collection and Procedures:

Method

Qualitative Study

- Focus Groups
- Semi-structured interview guide
- Audio-recorded & transcribed
- Thematic analysis of field notes and transcripts using N-Vivo 2 to organize the data
- A short questionnaire providing basic demographic information

Results

Staff Experience of Immigrant and Refugee Families’ Mental Health Issues

- Grief, anxiety, depression, post-partum depression
- Post-traumatic stress disorder
- Challenges of daily life in Canada
  - Employment and financial problems (housing/self-esteem)
  - Isolation & transportation
  - Language barriers (even for English speakers)
  - Lack of knowledge about resources (legal rights, how to do taxes)
- Resilience

Staff Experience of Talking About Mental Health Promotion

- Avoid the word “mental”
- Instead promote “well-being”
- TF’s plant-based analogy is helpful: “flourishing”
- Use “growth,” “feeling good about yourself”
“feeling happy”
- Frame positively
  - Normalize
  - Teach healthy coping

**Cultural Considerations**
- Importance of family in post-partum period
- Importance of community – “mental health is communal”
- Support of family and friends
  - Extended family as support system

**Lessons Learned from Curriculum**
- Inexpensive, simple, easy to use
- Visual, not dependent on literacy or English language skills
- Can do it with parents
- People can use it on their own
- Quick to do and can be used immediately
- Positive framing avoids stigma
- Talking about health promotion versus disease
- Plant analogy helps to normalize reactions to trauma
- Non-threatening

**Suggestions for Service Providers**
- Link clients to services (isolation; basic needs)
- Assess family’s needs & preferred ways of meeting needs
- Listen to clients
- Build on strengths (liked being told they were good mothers).
- Take time to establish trust, strong relationship
- Be aware of, and open to, other cultures’ values and practices
  - Take time to recognize, understand and accept
  - Be flexible (might need to bend rules)
- When English is limited
  - Face-to-face encounters, speak slowly, watch body language, do more activities

**Suggestions for Planners**
- Flexibility to adapt programs to individual family’s needs (funding; rules)
- Maintain home visits: “You come to us - will not work”
- Ensure enough time to establish effective relationships with newcomers
  - Different cultural practices, language challenges and trust issues
- More staff get-togethers to share info and strategies, learn about culture
- Mapping of community resources for staff
- More interpreters, multi-lingual staff; handouts in multiple languages
- Meet basic needs; provide more local information to newcomers sooner
- More resources in communities where newcomers live – e.g. schools
- Improve availability of transportation and child-minding
- Find ways to include fathers in programming
- More research on specific cultures with families and agencies
- Non-Western approaches to providing service; how trauma affects attachment; alternative everyday strategies
- Prioritize family needs
- Meet with specific ethnic group in the neighbourhood
- Make TF available sooner to settlement workers, sponsoring organizations etc.