

**Mental Health Network
Multicultural Sub-Network Steering Committee Newsletter**

Cultural Lens

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Understanding world views: Suicide Prevention

This edition of *Cultural Lens* focuses on suicide prevention, particularly the imperative to address the long-standing void in data on suicide and suicidality among ELD communities in Australia. We acknowledge that collecting accurate data on ELD groups is challenging because some communities/families will not report deaths as suicides due to stigma, resulting in some suicides reported as unintentional or accidental deaths¹.

1 The Multicultural Mental Health Sub-Network Steering Committee was represented at the recent *Cultural Conversations: Suicide Prevention Forum* aimed at exploring effective ways that young ELD adults and sector influencers may reduce suicide in ELD communities. Aside from reducing stigma and improving suicide and mental health literacy among ELD communities, we acknowledge that we must do more to engage with third culture young adults to deepen our understanding of their world views surrounding

suicide. Thus far, suicide prevention efforts among ELD groups have been limited. Uptake of targeted programs is poor¹. Why ?

On page 2, readers will note that issues related to suicide featured prominently in the Co-designed Roadmap for a Mental Health Research Strategy in WA (Co-ROAMERS WA Project) - one aim of which was to develop relevant research questions for ELD groups.

We will continue our commitment to ensure mental health service delivery and programs for ELD communities are meaningful and ethnoculturally responsive. At times, the person's world view may be superimposed over ethnocultural nuances - especially when acculturation processes can influence these world views at a conscious or subconscious level.

We hope this edition of *Cultural Lens* resonates with you and we wish you and your loved ones a safe and happy festive season.

¹Reference(s) provided on request.



MULTICULTURAL MENTAL HEALTH SUB-NETWORK STEERING COMMITTEE

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* We have chosen to use the term 'ethnoculturally and linguistically diverse' (ELD) to refer to the target population for which our sub-network has been established. We believe the term recognises that ethnicity and ethnic group identity, can define the person's relationship with their broader culture. Any experience of marginalisation in this context can also significantly influence values and belief systems surrounding timely mental health service access, utilisation and outcomes that may be anticipated by the person.

“Doing with, not for, ELD communities” - Suicide prevention

Neeka Zand, Suicide Prevention Coordinator, Neami National and Multicultural Mental Health Sub-network Steering Committee Member



Neeka Zand - discussing the role of the Multicultural Mental Health Sub-Network

In response to collective conversations held in ELD communities, the *Cultural Conversation: Suicide Prevention Forum* was held on November 18th, 2022. The event was hosted by the Neami National Perth Metro Suicide Prevention Coordinator program, in partnership with Headspace (Armadale and Midland) with the support of the Multicultural Mental Health Sub-Network Steering Committee.

Suicide prevention is a stigmatised topic. However, young leaders from ELD groups have expressed the need to de-stigmatise this issue because suicides and attempts on lives are happening in their respective communities. By default, ELD young adults assume the role of system and culture navigators for the family and feel much pressure to respond effectively. The Forum’s objective was to provide a safe space for these young adults to air their stories and concerns to service providers with a view to achieving a collective agreed response for reducing suicide in ELD communities.

Cultural Conversations - Take Away Messages

ELD communities want increased service providers presence at their community events. But service providers await invitation.

Religious leaders must be engaged more in service delivery which must integrate religious and cultural protective factors.

Information and resources for families/carers must be ethnoculturally sensitive and reflect an understanding of families’/carers’ level of suicide and mental health literacy.

Recruitment of more ELD staff in the mental health workforce is essential.

Demonstrated priority for funding of early intervention and prevention strategies for ELD communities.

“Doing with, and not for, ELD communities” in the context of policies going forward.

Results are in ! ..The mental health research priorities for ELD communities in WA

Professor Peter McEvoy, School of Population Health and enAble Institute
Curtin University, Western Australia

In preparation for developing Western Australia’s first mental health research strategy, a team of researchers from Curtin University, led by Ben Horgan and myself, conducted an extensive consultation with the community. The aim was to identify which research questions, if answered, would have the largest positive impacts on the mental health of the WA community. One of the 22 mental health issues and populations covered by this consultation was ELD communities, which was supported by the Multicultural Sub-Network Steering Committee of the Mental Health Network. The researchers met with an ELD reference group and consulted with experts and the literature to identify questions that were considered by two panels. The first panel consisted of people with lived experience of mental health challenges (consumers, carers). The second panel consisted of mental health professionals (researchers, clinicians, policy-makers). Research questions needed to be endorsed by both panels to be identified as a priority.

A total of 75 research questions were identified for consideration by the panels in the ELD area. After three rounds of rating, 17 priorities achieved consensus across both panels (importance rating of at least 6/9 by at least 80% of panel members). The 17 questions are listed on the next page. Issues related to suicide featured prominently, being mentioned in 8 of the items. It is important to note that there were an initial 1015 questions across the 22 areas in the survey, with a total of 608 consensus priorities identified. Many of the other priority areas would also be relevant to ELD communities, but the 17 questions were those specifically worded with reference to ELD communities.

Our hope is that this work assists the sector to advocate for funding to address these critically important research questions to support the wellbeing of the community. The WA Mental Health Research Strategy is currently being finalised and has been informed by this work. The research team is very grateful to all who helped us identify these priorities.

“Issues related to suicide featured prominently, being mentioned in 8 of the items....”

THE SEVENTEEN MENTAL HEALTH RESEARCH PRIORITIES FOR WA'S ETHNOCULTURALLY & LINGUISTICALLY DIVERSE COMMUNITIES

(in order from highest to lowest average rating)

1. How can cultural responsiveness of emergency department teams be improved for people from migrant and refugee backgrounds at risk of suicide?
2. What is the prevalence of suicide in ELD communities, including refugees and asylum seekers, disaggregated by relevant subgroups (e.g., cultural, ethnicity, socioeconomic status, age and resettlement location, length of time on specific visa category, support networks, level of engagement with broader community)?
3. What is the prevalence of suicide of people held in immigration detention centres disaggregated by ethnicity, length of time, length of separation from family, access to communication with significant others, frequency and nature of updates on status resolution by relevant authorities?
4. How do different ELD communities understand mental health challenges and its consequences in the context of their own beliefs and the 'western-based' conceptualisation?
5. What are the coping and help-seeking strategies among people from migrant and refugee backgrounds at risk of suicide?
6. How adequate is the training of suicide prevention service providers to work with people from migrant and refugee backgrounds at risk of suicide?
7. What factors deter help-seeking among people from migrant and refugee backgrounds at risk of suicide at the individual, family, and community levels?
8. What types of cultural responsiveness training are most effective?
9. How can cultural responsiveness training be effectively delivered to healthcare providers?
10. What are the unique challenges and stressors children from minority or ethnoculturally diverse backgrounds face in accessing and engaging in family and domestic violence services?
11. What are the benefits and challenges of providing specialist refugee mental health services?
12. How can consistency and data collection practices be improved and effectively used across mental health and AOD services in WA?
13. How are the mental health needs within ELD communities changing over time?
14. What sorts of community education and awareness programs are beneficial in reducing suicide among people from migrant and refugee backgrounds?
15. How can we effectively increase provision and accessibility to appropriately trained staff (cultural awareness) for ELD groups in mental health and alcohol and other drugs services?
16. How do cultural and religious values and beliefs influence suicidal behaviours in ELD communities?
17. How do family and carer perspectives on help-seeking behaviour influence use of mental health services by people from an ELD backgrounds?

More information on the outcomes of the broader priority setting project can be found here: <https://bit.ly/MentalHealthPriorities>

Play your part to reduce stigma

The word 'stigma' originates from an ancient Greek verb meaning "to carve, to mark as a sign of shame, punishment or disgrace". For ELD communities, the effects of stigma related to mental ill health can transcend family units, community circles and generations. A draft of the National Stigma and Discrimination Reduction Strategy is open for consultation until 1st February 2023. The Strategy proposes a range of actions by governments, industry and the community, across sectors and settings, to reduce mental health-related stigma and discrimination - <https://haveyoursay.mentalhealthcommission.gov.au/hub-page/national-stigma-and-discrimination-reduction-strategy-draft-for-consultation>

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Happy Holidays !



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