

Background

On 27 October 2023, a diverse group of 14 individuals from across the country – diverse in terms of age, gender, geographical location, ethnocultural background and socio-economic status – brought their unique perspectives to deliberate about improving access to mental health services for immigrant, refugee and asylum-seeker (henceforth referred as newcomers) children, youth and their families in Canada.

The main objectives of this virtual panel were threefold: 1) to gather insights on the challenges related to improving access to mental health services; 2) to explore potential solutions to address these challenges; and 3) to identify barriers and facilitators that can aid in implementing these solutions. The gathered information was used to inform a national stakeholder dialogue involving system leaders, policymakers, managers, professionals, researchers, caregiver representatives and other stakeholders. This document summarizes the key insights that emerged during the virtual panel.

Box 1 provides additional background to the panel, and Box 2 provides a profile of participants.

Panel Summary

Improving access to mental health services for immigrant, refugee and asylum seeker children, youth and their families in Canada

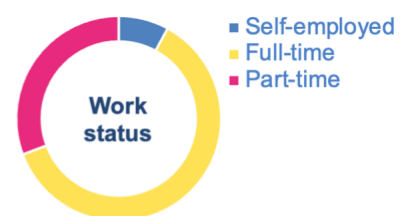
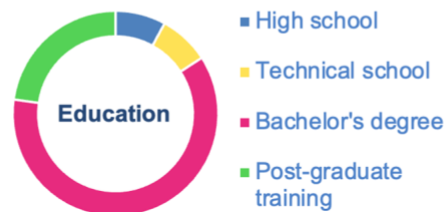
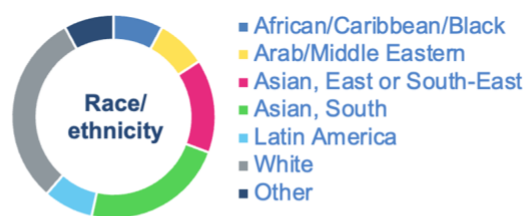
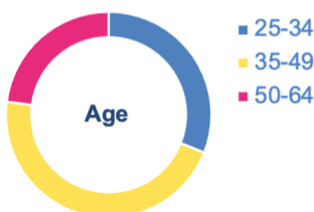
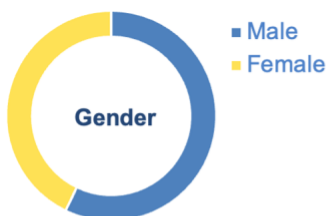
27 October 2023

Box 1: About this panel

This virtual panel had the following 11 features:

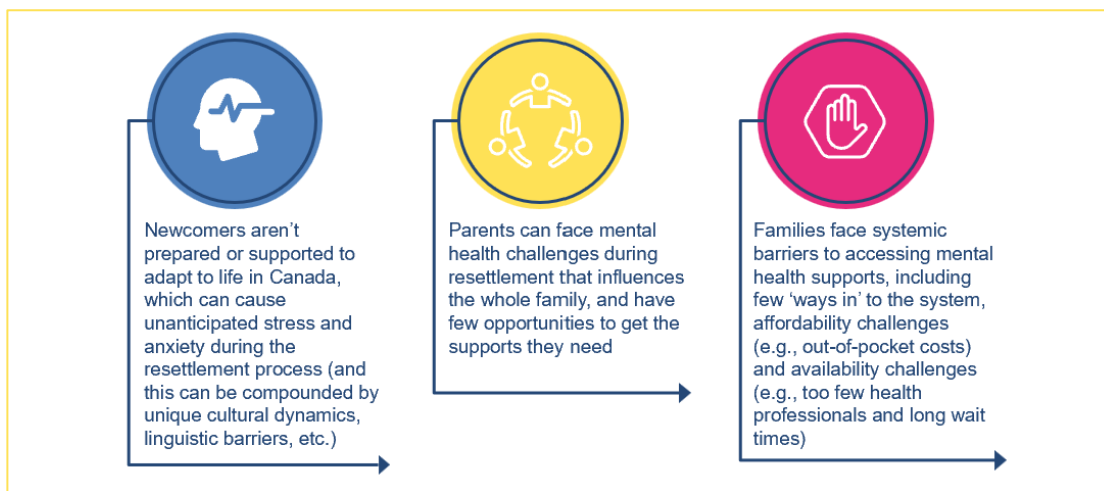
- it addressed a high-priority issue in Canada
- it provided an opportunity to discuss different features of the problem
- it provided an opportunity to discuss solutions for addressing the problem
- it provided an opportunity to discuss key barriers and facilitators to move forward
- it provided an opportunity to talk about who might do what differently
- it was informed by a pre-circulated, plain-language brief
- it involved a facilitator to assist with the discussions
- it brought together participants affected by the problem or by future decisions related to the problem
- it aimed for fair representation among the diversity of participants involved in or affected by the problem
- it aimed for open and frank discussions that preserved the anonymity of participants
- it aimed to find both common ground and differences of opinions.

Box 2: Profile of participants



Summary of the deliberation about the problem

During the deliberation about the problem, participants agreed that mental health systems have difficulties meeting the needs of children, youth and their families who are newcomers. In particular, participants emphasized three main issues when considering some of the major challenges they face, which are included in the figure below.



Regarding the first issue, participants noted that newcomers are not prepared or supported to adapt to life in Canada, which can cause unanticipated stress and anxiety during the resettlement process (for example, starting from 'ground zero,' finding meaningful employment and affordable housing). The stress and anxiety can be compounded by unique cultural dynamics, linguistic barriers, immigration status and other socio-economic factors.



Regarding the second issue, several participants explained that parents can experience a lot of stressors during the migration process, but some of these stressors are 'self-inflicted.' In clarifying this concept, participants noted that newcomers put a lot of pressure on themselves (e.g., to be successful in Canada immediately upon arrival) and set high expectations (e.g., creating a narrative that life in Canada will be much better) that can lead to stress, anxiety and other mental health problems – all of which can have repercussions for the entire family. Participants also emphasized that newcomer parents' ability to perceive mental health needs and seek care may be limited due to:

- stigma associated with mental health
- cultural factors such as beliefs, values and social norms that shape how newcomer parents perceive their need for support, with one participant stating, "We don't have time for depression"
- the perception that they may not be entitled to access certain services, and a lack of information about the services that are available to them (although some participants stated that in their experience it was less about too little information, and more about the difficulty associated with sorting through the massive amount of information they receive when settling in the country)
- the perception that no one is proactively prompting them to consider their need for mental health support.

Participants also expressed their view that parents may feel left to handle their mental health challenges on their own. This is in contrast with their children who seemed more supported (due to the availability of resettlement supports in school settings, as well as curriculum that raises awareness about mental health alongside other health and social topics). Some participants expressed their view that this dynamic between parents and their children had the potential to create a disconnect between them during the resettlement process and beyond.



Regarding the third issue, participants highlighted three systemic barriers that exist that make it difficult to access mental health services, including:

- the difficulty of approaching the system and understanding the ‘ways in’ to available mental health supports, with several participants noting a lack of outreach focused on supporting their mental health, a lack of information about the services available to them, and the complexity of navigating a health and social system that is markedly different from the one they were exposed to in their home country
- the lack of affordability associated with certain types of supports (e.g., accessing mental health services is often associated with out-of-pocket expenses)
- the lack of availability of needed services, often linked to a lack of health- and social-care professionals and long wait times.

Summary of the deliberation about solutions



Participants raised several issues when discussing each solution as they were framed in the brief (see the figure above), which are summarized below.




During the deliberation about solution 1 (which centred on newcomers working alongside other stakeholders – from all sectors and from all levels of government – to develop a framework to improve access to mental health services) participants generally agreed about the importance of developing a framework that could help mental health services cater to the needs of newcomer families. They emphasized the following three points:

- mental health is a sensitive topic, and conversations about needs, values and preferences regarding mental health services should be initiated by trustworthy professionals who have established relationships with those the framework is meant to serve (for example, teachers, social workers, health and social care professionals), and doing so in a way that ‘meets them where they are’ (e.g., at home, at school, in the community)
- there is a need to identify and address mental health risks with regular assessments and contacts (with regular contact achieved through efforts like weekly check-ins during school hours, or using phone, email or virtual platforms to understand newcomers’ needs, values and preferences)
- the voices of those at greatest risk of experiencing mental health challenges need to be prioritized in these efforts.


Participants also identified six key ingredients (or principles) that should underpin a bold vision for improving access to mental health services:

- ensuring approaches are proactive (providing support as early as possible in the migration journey, and focusing on outreach activities that meet newcomers where they are)
- ensuring approaches are trauma-informed, adaptive and flexible, to reflect that newcomers are a heterogeneous group dealing with many different issues, and that promote cultural and linguistic sensitivity
- adopting holistic approaches that consider newcomers’ health as well as their social needs
- staying family focused, acknowledging that parents have unique needs and their mental health challenges can influence their entire family, and considering the dynamics created by generational gaps
- fostering open and seamless communication, within families, with communities and with providers and the system

- strengthening the role of communities in the design, execution and oversight of mental health services for newcomers (including strengthening community social capital and resilience).

 During discussions about solution 2 (focused on identifying existing models of care and adapting them to improve access to mental health services for children, youth and their families), participants mainly discussed models of care that focus on promoting mental health wellness among all children, youth and their families through population-based interventions, providing services for those at risk of experiencing mental health problems and for those experiencing significant mental health problems that affect functioning in some areas of daily of living (i.e., the first three steps in a ‘stepped-care model’). When discussing the various approaches that could be included in models of care, participants reiterated the need to focus on family-oriented approaches, and several participants advocated for including the following components:

- improved communication, which could be in the form of a ‘welcome package’ for newcomers
- sustained follow-ups during the settlement process (which many participants described as being overwhelming to newcomers)
- a dedicated case worker per family to establish long-term rapport and trust, and to help with navigating unfamiliar health and social systems
- emphasis placed on school-based and community-based interventions, recognizing the significant role local communities and diasporas play in assisting newcomers.

 The third solution focused on engaging newcomers to help the mental health system to learn and improve rapidly (or at least more rapidly than the current pace). Participants raised five main ways newcomers could help during the discussion of this solution:

- identifying the problems they are facing
- participating in efforts to design programs and services to better meet their needs and preferences
- helping to implement newly designed programs and services
- providing feedback about what works well and what doesn’t work with relation to the programs and services they have experience with
- supporting the adjustment of programs and services based on what is being learned about them, and sharing lessons learned more broadly.

Participants also suggested that the implementation of a rapid-learning and improvement approach focused on engaging newcomers requires the creation of ways for newcomers – including children, youth and their parents – to ‘connect’ and share their experiences. One approach that participants collectively agreed could achieve this is the development of a web platform, which would:

- allow newcomers to connect with each other easily in a central space
- support the system to learn and improve rapidly (e.g., allowing users to solicit feedback on existing programs and services, identify problems, and propose solutions)
- prioritize security and confidentiality, providing a safe and judgment-free communication channel for users.

Summary of the deliberation about barriers and facilitators to moving forward

After discussing the three solutions, participants examined potential barriers to and facilitators for moving forward. The discussion generally focused on two key barriers:

- the chronic underfunding of mental health services across the country
- difficulties with mobilizing newcomers to discuss issues related to policies, programs and services – especially given they already have many priorities to juggle (with one participant stating that “it’s hard for settled Canadians to access many services, let alone newcomers that have additional challenges”).

When turning to facilitators, participants identified five, including:

- Canada’s general proactivity in addressing health and social issues (as one participant said: “I think Canada tries to make things better. Canada addresses issues that in our birth countries we do not talk about.”)
- the expected growth in the newcomer population (which will result in growing local communities and diasporas who will play an important role in assisting newcomers in all aspects of life)
- the capacity to adapt existing mental health awareness campaigns to diverse cultures
- the power of storytelling to address stigma (having influential newcomers who could share their stories about their mental health challenges and the importance of seeking care)
- the resilience of immigrant, refugee and asylum seeker communities.

Ali A, Moat KA, Gauvin FP. Panel summary: Improving access to mental health services for immigrant, refugee and asylum seeker children, youth and their families in Canada. Hamilton: McMaster Health Forum, 27 October 2023.

This panel was funded via a CIHR Catalyst Grant awarded to Drs. Andrea Gonzalez and Amanda Sim, entitled “Reimagining Care: Developing a Strategic Framework in Child and Youth Mental Health for Immigrant, Refugee and Racialized Families.” The McMaster Health Forum receives both financial and in-kind support from McMaster University. The views expressed in the panel summary are the views of participants and should not be taken to represent the views of CIHR or McMaster University.

ISSN 2368-2124 (online)