

TIPS FOR MENTAL HEALTH SERVICE PROVIDERS

Young South Asian women (YSAW) experience a number of barriers when accessing formal mental health supports, these include stigma, and lack of culturally relevant gender focused supports. This handout describes key messages for mental health service providers to consider when working with YSAW.

1 General background

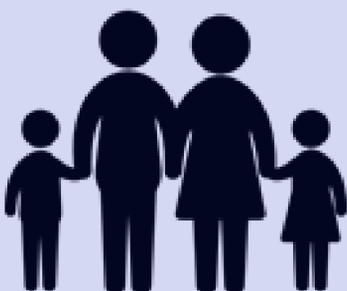


1. There is a lot of diversity within South Asian communities. Ask the YSAW you work with to describe their community of origin, how this has shaped their identity, and their understanding of mental health. International students, newcomers and refugees have unique needs that may differ from Canadian born YSAW.
2. YSAW report experiencing imposed and rigid cultural gender roles – deviating from these cultural norms can contribute to difficulties in the family and community. The restrictive nature of cultural norms may impact the mental health of YSAW and prevent them from seeking help. Due to the restrictive nature of their experience might present as ‘defiant’ or ‘not caring’ when really she is trying to assert her boundaries.
3. These experiences can result in feeling powerless within the family unit, community, education system and when accessing mental health supports. Invalidation in either of these contexts can lead to disengaging from supports.
4. Be mindful that given this context, YSAW are likely to reach out for formal mental health supports at crisis point after having navigated significantly stressful community level barriers.

2 Ways to support

1. Provide education on the spectrum approach to mental health and mental illness that includes maladaptive coping strategies like self-harm (e.g. cutting, eating behaviours, substance use) and suicide through to adaptive and healthy ways of coping.
2. Create a safe space in which YSAW can talk about suicidal ideation.
3. YSAW engage in holistic approaches to healing and recognize medication as one component. Examples of holistic approaches include music, art, storytelling, smudging, journaling, spiritual and religious practice, and Ayurvedic treatments. YSAW may also access treatment in countries of origin. Enquire about these in a culturally sensitive manner during an intake assessment and integrate into treatment as appropriate. It is important to recognize that some of these practices may not have been validated by Western research but are integral to cultural belief systems.
4. Integrate alternative mediums of expression. Art, poetry and letter writing can help YSAW verbalize their thoughts and feelings.
5. YSAW report experiencing multiple forms of discrimination. Encourage dialogue about these experiences and how they contribute to poor mental health. Assess for intersections of gender, sexual orientation, race, religion, family history - the more marginalized the greater the barriers to accessing supports. These experiences may manifest in the individual through low self-concept or a systemic level through barriers to services.

3 Family engagement



1. Be open to a broad definition of family. Given the complexity of relationships with birth/blood family, YSAW may not share personal information with them. You might hear YSAW speak about creating a ‘chosen family’ in which they feel heard, supported and loved.
2. Parents can be heavily involved in career and life planning - this may influence decisions of the young person and be an additional source of stress.
3. Parents may encourage their children to see a faith leader in addition to coming to you. It’s important to be respectful and sensitive to the family’s cultural belief system while ensuring the YSAW is consenting to this approach. YSAW reported that parents focusing on faith approaches resulted in their immediate needs being neglected.
4. YSAW may not want to see their family doctor for specialist referrals due to concerns about disclosure to the family. This can present a barrier to seeking help for mental health, substance use and sexual health services, and rupture further engagement in treatment. Where appropriate provide other options such as seeing a doctor at a walk-in clinic outside of the individuals community.