

 Action Dignity





We all pay the price
when people are
overlooked
dismissed
unheard
uninvited
ignored
silenced

STOP RACISM



RACISM
IS A
PANDEMIC
TOO! #

Vision

Calgary is a just and equitable
society for all

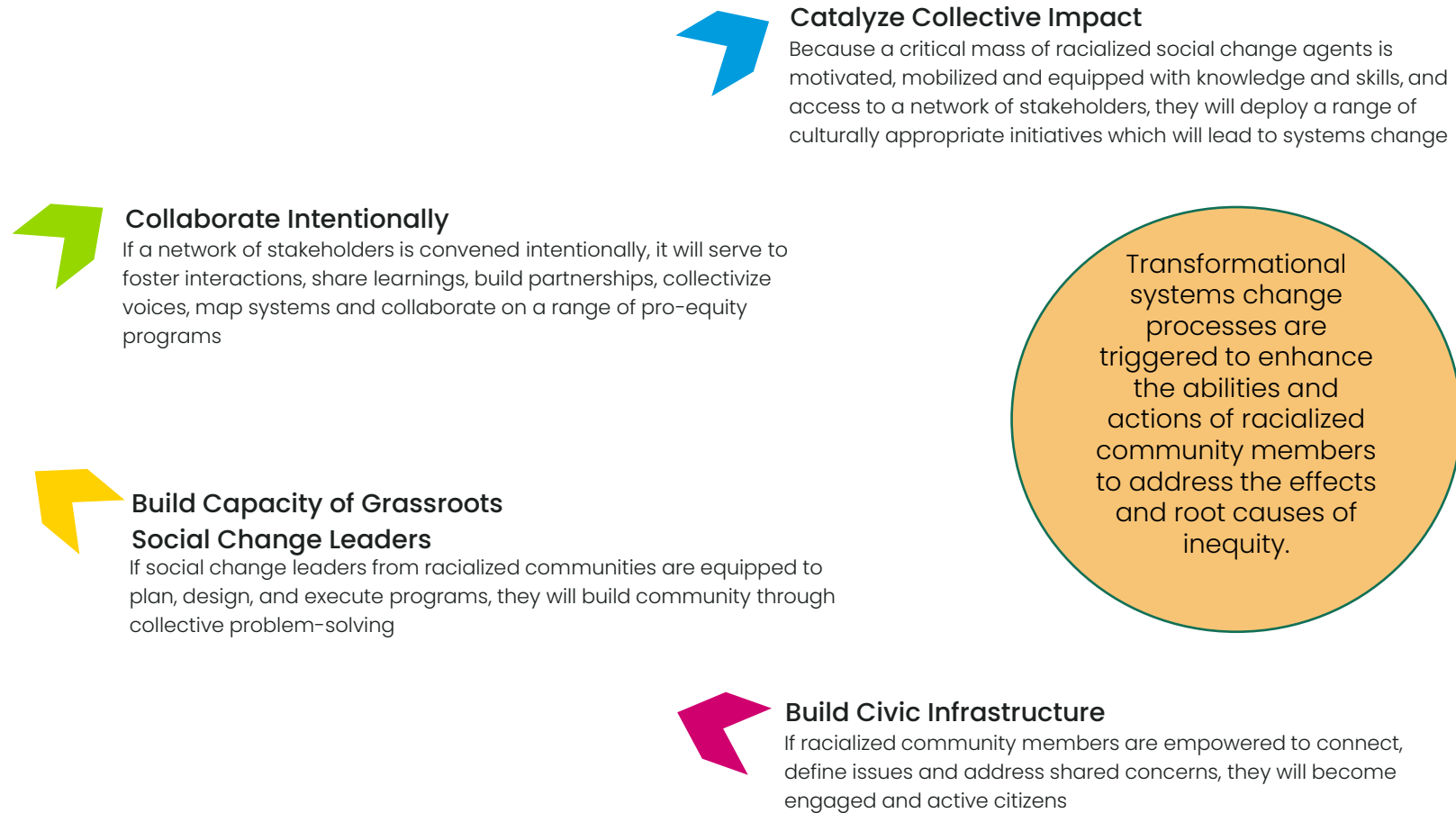
Mission

To work together with ethnocultural, racialized, and
equity seeking groups to create transformational
changes in our communities and society

Values

Respect for diversity
Equity and Social Justice
Active citizenship and
democratic participation
Collaboration

The ActionDignity Edge: Our Theory of Change



Overview of ActionDignity

About us:

- Alberta-wide
- Registered charitable organization
- 100+ ethnocultural community members
- 100 individual members



How we do our work

Community Development Strategy – Bringing together the talents, resources and skills of people in the community to increase their collective power and work for social change.

CD Components:

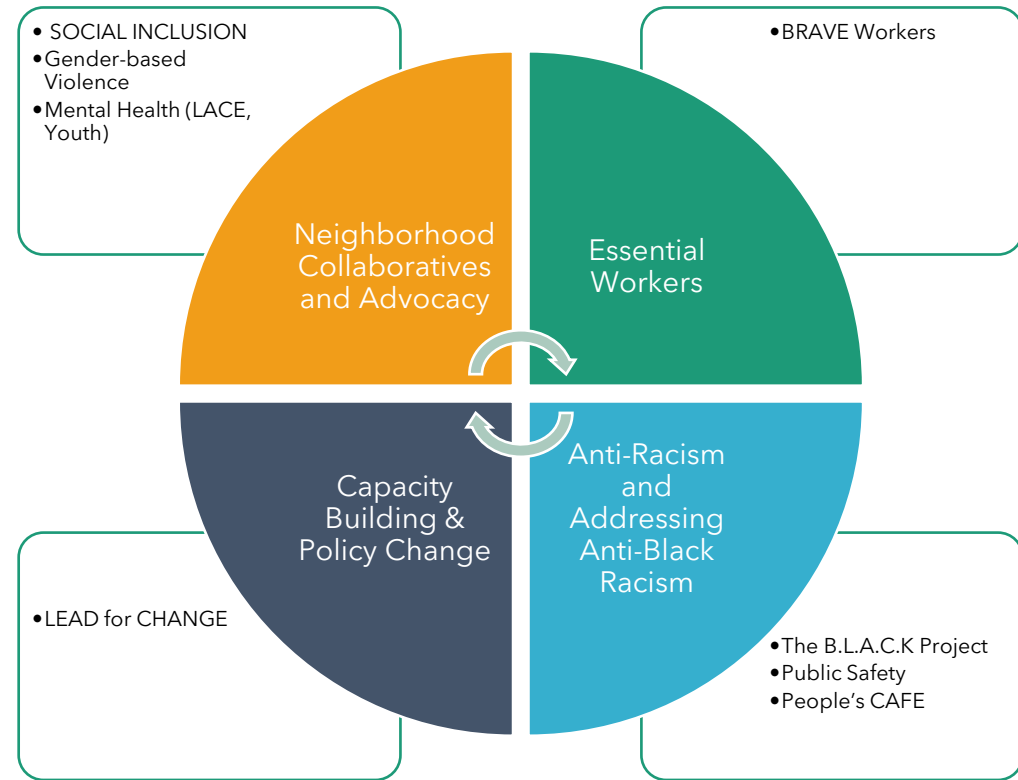
- ✓ **Leadership Development**
- ✓ **Community Capacity Building**
- ✓ **Community Mobilization**

Community Broker Strategy – They are advocates and connectors imbedded in racialized populations, Brokers bring a voice to inform decisions towards improving policies, programs and services of government, public institutions and service provider organizations.

Platform Strategy – A network of ethnocultural, racialized community groups and organizations who share a common vision of a just and equitable society and are committed to working towards effecting change.

Community-based Participatory Action Research - emphasis on working with the community as full and equal partners in all phases of the research process

Our Programs



Community Based Participatory Action Research

Deep in our Mind: Isolation & Racism



Background

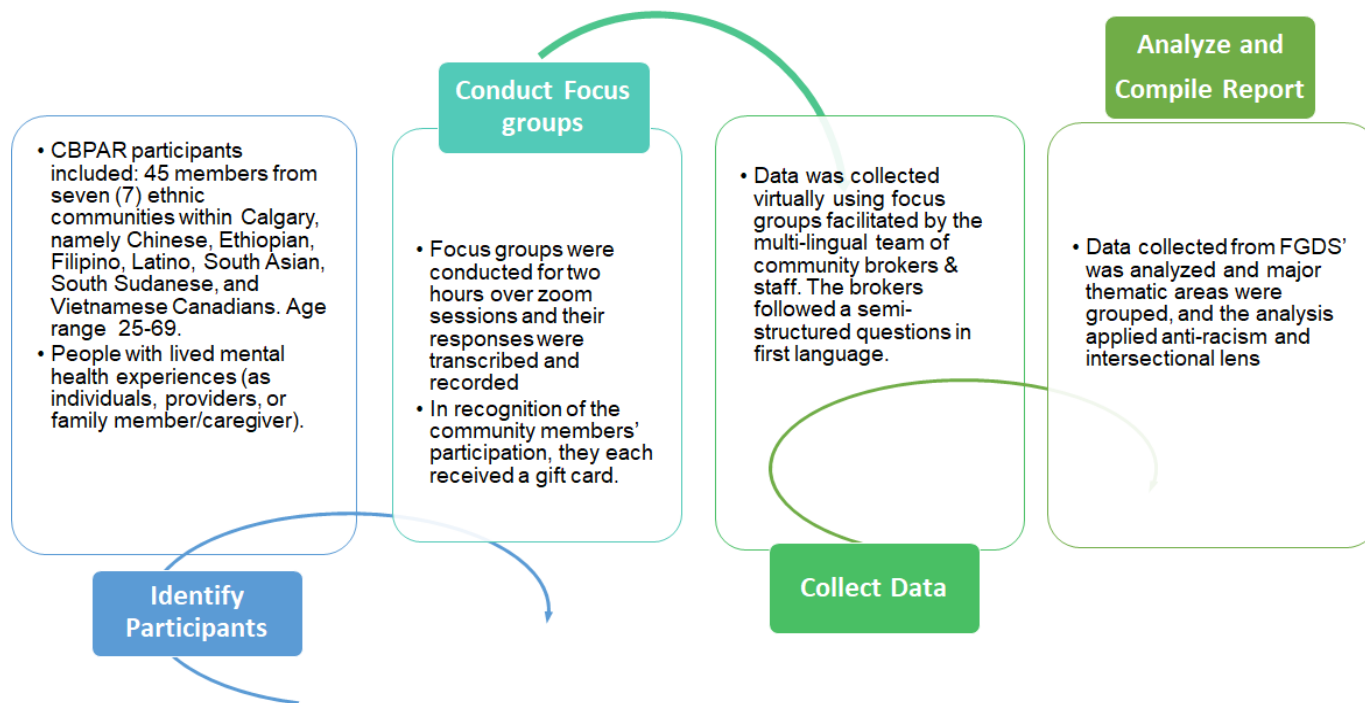
- Two large scale meta-analyses established significant negative impacts of discrimination on mental health.(1,2)
- Mental health of immigrant, refugee, and racialized communities is a key public health issue not just in Calgary but in Canada. (3)
- Must navigate a service system that works from a dominant discourse described as the 'medical model'
- This model overlooks the structural, social, and cultural factors influencing mental health. (4)

- Some mental health and addiction strategies and plan we reviewed does not include phrases like “racial trauma” and “trauma-informed care.”
- Naming the issue and using the right language. Language shapes policies, programs, and services. It is one of the most important cultural means that people have for shaping their identity and for the state to acknowledge racial inequities and racism.

references

1. Pascoe EA, Richman LS. Perceived Discrimination and Health: A Meta-Analytic Review. *Psychological Bulletin*. 2009; 135(4):531–54. doi: 10.1037/a0016059 PMID: 19586161
2. Schmitt MT, Branscombe NR, Postmes T, Garcia A. The Consequences of Perceived Discrimination for Psychological Well-Being: A Meta-Analytic Review. *Psychological Bulletin*. 2014; 140(4):921–48. doi: 10.1037/a0035754 PMID: 24547896
3. Corneau S, Stergiopoulos V. More than being against it: Anti-racism and anti-oppression in mental health services. *Transcultural Psychiatry*. 2012;49(2):261-282)
4. Tew, J. (2002). Going social: Championing a holistic model of mental distress within professional education. *Social Work Education*, 21(2), 143–155).

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Why
Community-
Based
Participatory
Action
Research
(CBPAR)?

Findings

Mental Health

- Mental health is still a taboo and viewed as equivalent to mental illness in most participating communities
- Lack of understanding on mental health & stigma created barriers to connect and for people to seek treatment.
- Many don't know how to use/access available resources
- Different factors contribute to mental health: Racism, financial and employment instability, language barriers, challenges in settlement and integration, family dynamics, COVID-19



Inaccessibility to Resources

- Current services do not understand cultural backgrounds, norms and experiences
- Culturally competent services are not shared in an accessible way
- Inefficient information exchange between service providers
- Mainstream mental health resources do not consider racialized populations during the creation stage



Intersections of Inequalities

- **Challenges in Immigration & settlement process**
 - Losing socio-economic status
 - Disconnect – socially isolated
 - **Economic Inequality**
 - Inequitable hiring practices
 - Toxic workplace
 - Stress due to financial instability
 - **Impact of Covid 19**
 - Seniors, children are feeling more isolated due to COVID
-
- **Cultural and Language Barriers**
 - Lost self-confidence
 - Self-isolate
 - Losing opportunities
 - **Link to Domestic Violence**
 - DV still a taboo
 -
 - **Family Dynamics and Age Differences**
 - generational differences in capacity to adapt to life in Canada

Understanding Trauma

“Immigrants choose to leave their country of origin,

Refugees are forced to seek asylum in another country. They come from areas of conflict or countries with limited resources for health, including shelter, clean water, food supply and education. They are more likely than immigrants to have certain health problems, such as anemia, malnutrition, neglected chronic health issues and mental health problems (Fowler, 1998; Hyman, 2007).

By contrast, Canada’s immigrants, particularly those from non-European countries, tend to have better overall health than the Canadian-born population when they first arrive (the “healthy immigrant effect”; Ali, 2002).

What Trauma could like for Racialized Community Members?

- **Pre-migration Factors**

- Exposure to trauma due to political persecution, human rights violations, violence, war, conflict, poverty.

During Migration

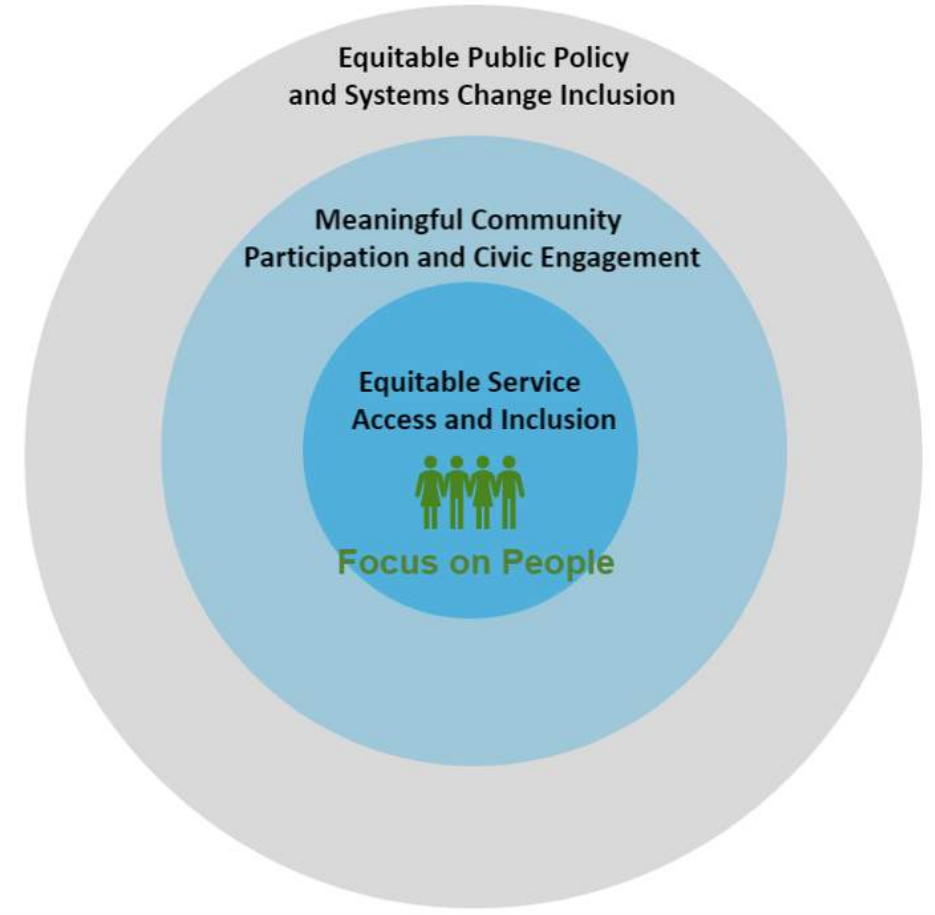
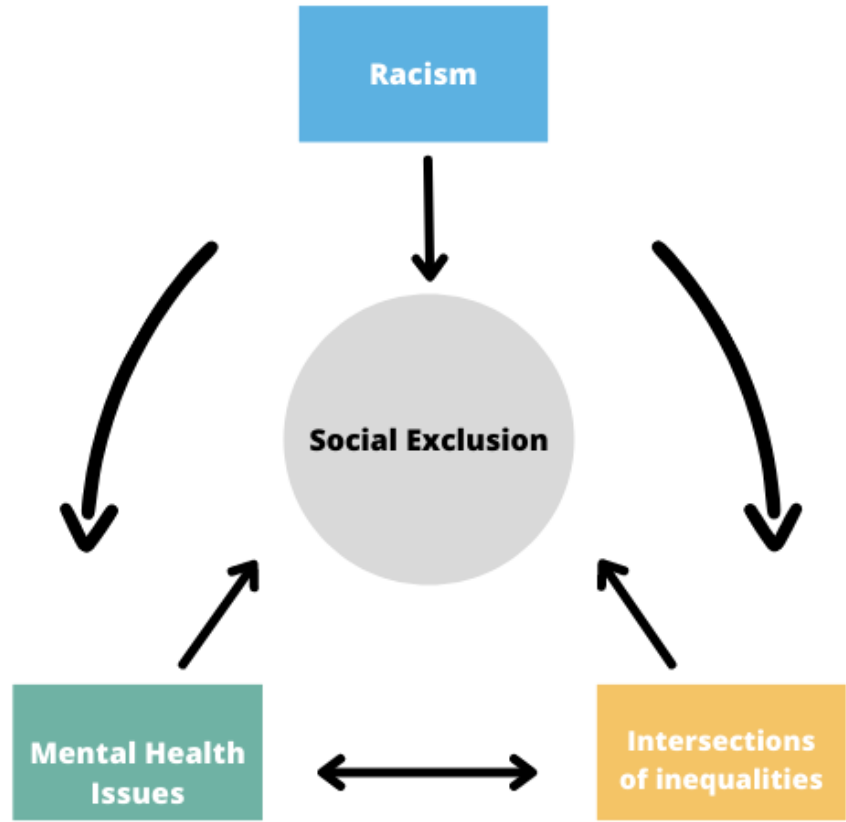
- Breakdown of family and social networks and community bonds.
- Traumatic journey to the host country in refugee camps in unfamiliar countries.

- **Post migration/ settlement and Integration Challenges**

- Housing, financial, unemployment/ underemployment, difficulty finding a descent job
- Acculturation stress, problems with adjusting to the host culture
- Family and parenting issues
- COVID 19 related challenges and isolation.

These obviously lead to complex psychosocial and mental health issues

Summary



Recommendations

Individual and Community

- Take action on **Discrimination & Racism**

Service and Systems Level

- Inclusion of racial trauma in the definition and causes of Trauma and in Trauma informed care.
- Integrate racial understanding and racial trauma in the therapeutic practice
 - Those that understand pre and post migration traumatic experiences
- Increase **availability** of low barrier, gender-inclusive and culture and race-sensitive clinical service
- Reduce complexity of **Navigation to Resources** & provide assistance
 - Create a centralized and coordinated response model to ensure a seamless transition and referral of clients among various service providers.
- The need for more diversity among staff of service providers

Policy

- Collect race and ethnocultural data to improve understanding and scoping of mental health issues among racialized communities.
- Advocate for changes in policies that maintain/sustain discrimination.

Suggests to delete

A Need for Natural Support Identified by the Community

- "We need to come together and find people who are passionate about helping the community to stand up and help share experiences. If the community is connected and solidate, we can help everyone better." Vietnamese Community Member
- "I helped the newly landed immigrant with a list of basic info about how to transition life in Canada. This might be an essential service for new immigrants. Also, immigrants need some life hacks and tips to survive. We need an organization or a group volunteers that can share their experience and act like mentors for them." Chinese Community Member



- “Many have been exposed to stressful and traumatic experiences. Furthermore, these situations often lead to the breakdown of families, social networks, and community bonds. Such culturally appropriate Conversation Circle helps essential worker to open up, share their experience and gain skills around coping with stress.”
- According to the member of Canadian Vietnamese Women’s Association, “We have several women who were very shy at first, but gradually started to share ways to destress. These workshops helped them boost their confidence and share their stories with the rest of the women.”
- In the words of a member of Champion Life Centre from the Filipino Community: “Most of the feedback that we got is that the Webinar helped them a lot to distinguish their emotions as to what anxiety is, how we take care of our mind, and how the support system plays a big part of overcoming these struggles. They are asking to have more webinars like these in the future.”



Thank you!

