Activism and Immigrant Women’s Mental Health and Wellbeing

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WHAT WE NEED TO KNOW

Although immigrant women have great strength and resilience, little is known about their contributions to their communities, their roles in activism and how this is linked to their wellbeing. This pioneering research in the field of mental health promotion examines immigrant women as a unique group with particular barriers and puts activism at the forefront in promoting women’s mental health and wellbeing (MacDonnell, 2012a).

As a group, immigrant women often experience a disproportionate share of mental health concerns and mental illness that are linked to social determinants of health including employment, violence, socioeconomic status, race and gender. When women immigrate to Canada, they often carry a large amount of the stress and burdens of relocating and settling into a new country. Although immigrants make up almost half of the Greater Toronto Area, and more women than men are settling here each year, there is limited understanding of how to promote women’s mental health. At the same time, these women are able to tap into a diverse range of personal strengths and also make important contributions to their communities. Yet little is known about the many ways that this happens or the benefits for immigrant women themselves.

WHAT IS THIS RESEARCH ABOUT?

This research analyzes how activism is often brought about and specifically in response to the impact and effects of resettlement on the mental health and wellbeing of women. This study makes more visible the multiple ways that immigrant women in Ontario have contributed to transforming their communities and health systems. This qualitative community-based research explores:

- The role of activism as a feature of immigrant women’s mental health
- How immigrant women themselves express their agency individually and collectively
- How immigrant women describe their political activism and the meaning it has for them in relation to the settlement process

This study used a constructivist grounded theory approach (Charmaz, 2006) and a critical intersectional lens which foregrounded race and gender (Massaquoi & Wane, 2007). As community-based research this project aimed to create evidence that would also build community-institutional links and community capacity through processes that stimulate uptake in diverse communities.
HOW WAS DATA COLLECTED?
Researchers first collected data from 57 racialized immigrant women in the Greater Toronto Area who had been living in Canada for at least three years. Women were between the ages of 25 and 65, and most identified their first language as other than English. They were of diverse sexual orientations and came from many different cultures and countries. They also had diverse educational and employment backgrounds.

The women participated in one of seven focus groups to share stories about their experiences with settlement, health and activism and how it had affected their families, communities and their own mental wellbeing. One group was carried out in Somali while the others were in English.

A forum with the community was organized to take the voices of the women back to other researchers, immigrant serving organizations, policy officials, and healthcare providers in order to encourage action to be taken in these respective areas.

WHAT DID THE RESEARCHERS FIND?
Women’s experiences were analyzed for themes that contributed to an understanding of (i) how women experience and respond to settlement processes and (ii) how they understand and participate in activism and its connection to their wellbeing.

EVERYDAY CHALLENGES IN SETTLEMENT PROCESS
Multiple and complex settlement factors shape women’s mental health and well-being. The stories that came from the women shared many common issues that they face in Canada. Difficulties in accessing health care and education, finding meaningful employment, family upheaval and the stress caused by all of it are challenges that affect many immigrant women regardless of culture and background. Women also spoke about challenges and barriers to accessing services, care, housing, language, and credentialing, plus family concerns often related to changed gender roles in addition to many other dynamics (MacDonnell et al., 2012).

All settlement workers have problem with clients who have stress and unemployment. If the government solved employment and education... the mental health problem will be solved... Very frustration [sic] for me. I have master degree, ten years experience. I did immigrant women integration program and every time I finish one course I do another one... They say I need confidence. Not that I am shy or lack confidence... I go to interview. For some reason they do not want to accept high qualified people... What can I do? The main issue of mental health for immigrant is employment program. (FG no. 2)

Gender and race do play a large role in how immigrant women respond to the pressures of immigration and negotiate the everyday challenges in their lives. The research found that immigrant women’s mental well-being has much to do with everyday life in Canada. How they cope, how connected and free they feel as individuals and within a community, and how they participate in society all significantly affect mental wellbeing.

FINDING MEANING AS INDIVIDUALS AND THROUGH COMMUNITY CONNECTIONS
The findings focus on the strengths that immigrant women bring and develop through settlement experience and shows that for them, well-being is related to resilience, finding meaning and community
through activism, as well as citizenship:

- Their resilience or their ability to bounce back from everyday challenges.
- Their ability to find meaning as individuals and through community connections.
- Their work with other individuals, their families, their communities and systems to challenge barriers and negative stereotypes and create new understandings, connections and resources.
- How their own and society’s expectations for immigrant women to be “good citizens” and their actual settlement experiences affect their actions to challenge the barriers they face.
- Since these women challenge stereotypes and assumptions about immigrant women and knowledge about immigrant women’s actions is often invisible, they challenge the notion of what it means to be a “good citizen.”
- By taking action to improve their own everyday lives and the lives of others, they improve the conditions in which diverse immigrant women and others live and the supports available to them. They thus participate in emancipatory practices, transforming communities and systems.

In contrast to dominant deficit-based discourses about immigrant women, these findings illustrate how immigrant women are knowledgeable and articulate and critically conscious who implicitly and explicitly point out the links between their individual experiences and larger family, community, and social structures (MacDonnell et al. 2012).

**RECOMMENDATIONS**

**SUPPORT FOR IMMIGRANT WOMEN**

- There is a need to create spaces and support for immigrant women to identify and take action on the issues relevant to their lives.
- Support should be considered both on an individual level as well as in a group format to support positive changes in themselves, with their families, in their communities, and in society at large.

- If strategies for change, that is, promoting mental health, are exclusively focused on biomedical and behavioural understandings of well-being, there is not only the possibility of blaming the victim, but also limiting effective solutions that address structural change (MacDonnell et al., 2012).

**IMMIGRANT WOMEN IN DECISION MAKING PROCESSES**

- Policy makers, immigrant-serving organizations, health care practitioners, and researchers, need to create strategies that will include immigrant women and support them to more positively contribute to their communities and broad health and social service systems.

**PARTICIPATORY RESEARCH**

- Policy makers, immigrant-serving organizations, health care practitioners, and researchers, need to use participatory research to create evidence that focuses on women’s strengths to promote the mental health for diverse groups of immigrant women.
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rmation Sheet#6 Office of Women’s Health Research Chair in Mental Health

SELECTED REFERENCES:


ABOUT THE INFORMATION SHEET

This information sheet is a summary of the study: “Exploring How Immigrant Women Conceptualize Activism: Implications for Mental Health Promotion.” This study was in collaboration between Women’s Health in Women’s Hands Community Health Centre, Toronto, Ontario, and York University School of Nursing, Toronto, Ontario. For further information, please contact Dr. Judith MacDonnell, 416-736-2100 Ext. 77515, jmacdonn@yorku.ca

WOMEN’S HEALTH RESEARCH CHAIR IN MENTAL HEALTH

The Office of Women’s Health Research Chair in Mental Health is part of the Faculty of the Health, School of Nursing at York University. We are interested in studying social factors that affect the mental health and well-being of women, youth, and children. To learn more about the activities of the office, please visit www.yorku.ca/nkhanlou

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