# Mental health in French

UNDERSTANDING THE COMPLEXITY OF THE CHALLENGE AND THE URGENCY TO COME TOGETHER



## What is the problem?

#### AT THE NATIONAL LEVEL

Mental health directly or indirectly affects all Canadian families. One Canadian in five will experience a mental health disorder over the course of the year. This equals more than 200,000 Canadians living in Francophone minority communities.<sup>1</sup>

No one is immune, regardless of place of residence, age or social status. There is no one cause for mental health disorders and mental illnesses. They are the result of a complex set of social, economic, psychological, biological and genetic factors, which also have effects on the general state of mental health and well-being. This phenomenon is all the more worrisome because it is highly stigmatized in society.<sup>2</sup>

Up to **50%** of mental health disorders or mental illnesses among adults appear **before the age of 14 years**.<sup>3</sup>

#### What is the problem? (continued)

- Although the symptoms do not always follow a specific pattern, certain mental disorders and mental illnesses may cause strong feelings of despair and low self-esteem that can lead to suicide.<sup>4</sup>
- Of the **4,000 suicides** that occur in Canada each year, most involve individuals suffering from mental health disorders or mental illness.<sup>5</sup>
- Only **one person in three** suffering from mental health disorders or mental illness says that he or she has sought and obtained services and treatment.<sup>6</sup>
- Only 40% of Canadians who have reported mental health disorders choose to consult a health professional. A number of theories are put forward to explain this phenomenon: lack of resources, fear of stigmatization, and the problem of accessibility of services are cited as obstacles to obtaining care.<sup>7</sup>
- Francophone communities are socio-demographically highly diverse in Canada.
   Overall, Francophones in minority communities are older, less educated and have a lower average income compared to Anglophones, three risk factors for mental disorders and mental illnesses.<sup>8, 9</sup>
- It is now recognized that language barriers: reduce recourse to preventive health services; prolong the duration of consultations; increase the likelihood of resorting to diagnostic tests, and increase the likelihood of errors in diagnosis and treatment.<sup>10, 11</sup>
- Communication is an essential tool for health workers, whether for promotion, prevention, assessment or treatment of a mental disorders and mental illnesses.
   Language thus plays a decisive role in disclosure and promoting recovery.<sup>12</sup>
- A clinical interview conducted in a language other than the patient's mother tongue
  may lead to an incomplete or biased assessment of the mental state. Moreover,
  the use of medical interpreters in this context, whether or not they are trained, has
  greater clinical impacts than in other areas of health care. These situations present
  greater risks by compromising the correctness of the diagnosis as well as the
  detection of disorganized thought or delusions.<sup>13</sup>

I'm always offered services in English.
I can't express myself well enough...So, I refuse to go...
It's becoming a nightmare for me!<sup>17</sup>

# What is the problem?

#### IN SASKATCHEWAN

In the 2011 Census, there were **18,935 Saskatchewan residents** who reported French as their mother tongue.<sup>18</sup>

Saskatchewan welcomed over **7,600 new immigrants** in 2010, and nearly **600 new permanent residents** from 2010-12 with French or bilingual official language ability. 19

Given that 1 in 5 Canadians experiences a mental illness or substance abuse problem in any given year, in Saskatchewan this equates to approximately 220,000 people who have one of these illnesses.

Yes, I can express myself in English to tell you that I'm ill but not to explain the exact problems I have...<sup>17</sup> For two weeks the doctors were telling me something; it just wasn't going into my head and I didn't understand a thing of what they were saying... I lost weight because no one understood when I was saying I wanted to eat to live...<sup>17</sup>

#### Case Study in Saskatchewan

Gaston Habiyakare was an African man in his 40's and an immigrant who moved to Saskatoon from Alberta in October 2012. He received assistance from his settlement worker at the Assemblée communautaire fransaskoise to receive social assistance and accommodations. However, Gaston suffered from mental illness when he arrived in Saskatoon and his settlement worker explained to Gaston's social worker that Gaston needed help for mental illness.

Unfortunately, Gaston's symptoms continued for the next several weeks, and in December was hospitalized after attempting suicide from exposure to severe cold. Gaston was discharged after a few days and again attempted suicide in January of 2013. Again, Gaston was discharged after a few days but went missing immediately after, and was filed as a missing person by police.

When Gaston was hospitalized, his settlement worker and other members of the African community in Saskatoon tried to help him, but were turned away by police and hospital employees citing confidentiality reasons. In May of 2013 Gaston's body was found on the banks of the South Saskatchewan River in Saskatoon.



noto: CBC News

On December 1, 2014, the 10 Year Mental Health and Addictions Action Plan for Saskatchewan was submitted by Dr. Fern Stockdale Winder, Commissioner of the Action Plan.

The Plan outlines 16 recommendations for improvements on how the province responds to people with mental health and addictions issues. The Health Minister Dustin Duncan has endorsed the action plan and emphasized the governments' commitment to helping people with mental health and addictions issues.



#### Contact information for a resource person

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## What are the solutions?

#### AT THE NATIONAL LEVEL

- The health in French movement, in keeping with its mental health policies for promoting recovery in one's own language, has obtained a grant from Health Canada to complete the project *Renforcer la capacité en santé mentale* (Mental health capacity building).
- The purpose of this project is to empower Francophone minority communities with regard to mental health. This happens in part through the deployment of the mental health first aid program of the National Mental Health Commission (NMHC). Mental Health First Aid (MHFA) was first created in Australia and has demonstrated its effectiveness with a number of groups and in various settings.<sup>14</sup> This program was adapted under the leadership of the society for francophone communities.
- By 2017, the health in French movement will have over 25 MHFA-certified
   Francophone instructors, making it possible to train more than 600 mental health first aid workers in all the Francophone minority communities in Canada.
- These 600 mental health first aid workers are ordinary individuals who have acquired a basic understanding of mental health and developed skills for responding in difficult situations for promoting recovery in French with their fellow citizens.



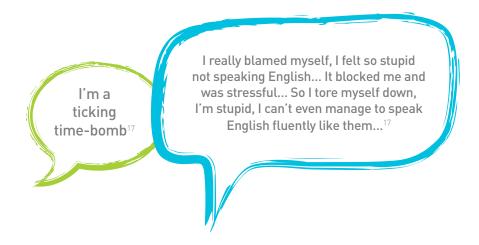
### What are the solutions?

#### IN SASKATCHEWAN

- Members of the Francophone community have already completed the Mental Health First Aid course, and several Francophones have been trained as instructors. We will continue to recruit community members to complete the course.
- Sensitize the Francophone community to mental health issues, especially the specific mental health risks of belonging to an official minority language community. Particular attention will be paid to the mental health needs of three vulnerable populations (children and youth, seniors, and newcomers).
- Sensitize health professionals on the **importance** of offering mental health **services in French** in order to ensure patient safety and quality of services.
- **Develop collaborative relationships** with government and health regions in order to address the specific mental health needs of the Francophone population in Saskatchewan.

#### The RSFS goals

- Be included in the dialogue and participate in the implementation of the 10 Year Mental Health and Addictions Action Plan for Saskatchewan by the Ministry of Health. The RSFS has begun developing a number of internal initiatives, but would like to ensure that government efforts incorporate the needs of the Francophone community.
- Collaborate with Regional Health Authorities in the province to identify essential programs promoting mental health that can be adapted and available in French.
- Help ensure Francophone patients with mental health problems and illnesses, as well as limited English language proficiency—especially seniors and newcomers—can be accompanied by interpreters and/or community health workers (patient advocates) who speak French as patients navigate the health system. The RSFS has begun organizing a network of interpreters and community health workers.
- Help ensure resources and information relating to mental health promotion and illnesses and mental health services are available in French.



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