

Co-designing with immigrant women to imagine an equitable mental health service ecosystem

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1 Abstract

Immigrants currently represent a quarter of the Canadian population, and this fraction is increasing as more people move due to social, financial, political, and environmental causes. However, this population experiences a considerable decline in their health over time after their arrival; thus, making immigrant health a crucial public health issue. This decline has been attributed to the lack of capacity of the existing health system to address the intersectional needs of immigrant populations. Immigrant women in specific, experience higher mental health risks because of interlayered stressors that include expected gender roles, work, family obligations, and culture shock. Therefore, mental health inequities should be tackled by putting equity and intersectionality front and center. This research project explored the mental health experience of immigrant women in Canada through participatory methods to acquire an understanding of the needs and potential interventions required to achieve equitable public mental health. For this study, twenty-one immigrant women from various geographical backgrounds living across the Greater Toronto Area were recruited to participate in one-on-one interviews and two co-design sessions. The data gathered during the activities revealed that immigrant women experience a great amount of intersectional daily stressors across system scales – which result from their responsibilities and perceived expectations – leading to an absence of adequate self-care and emotional relief. The co-design sessions highlighted that these issues tend to saturate their daily schedules and corresponding stress levels, contributing to the perceived barriers of time and distance to access spaces and programs that could support their mental health. Based on this data, the researcher applied the findings from the interviews and co-design sessions to service ecosystem design theory and developed an equitable mental health ecosystem model (see Figure 1). The model aims to facilitate guidance to organizations, institutions, services, and major funding bodies across the mental health care continuum through a set of foundational values and practices that ensure intentional and equitable mental health support for diverse populations. For this to occur, entities that – directly or indirectly – influence mental health services must commit and act on the inclusion of the values and practices of the model through: participatory collaboration with internal and external stakeholders to understand the barriers present in the current mental health system;



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active and intentional reformation of the system; and iterative consideration of the values and practices of the model across scales and interactions. In conclusion, this study approaches a complex community health topic to propose a service ecosystem model that acknowledges the mental and social burdens behind the immigrant experience, which can be life-changing to those populations that for decades, have encountered barriers in their mental health-seeking journey.

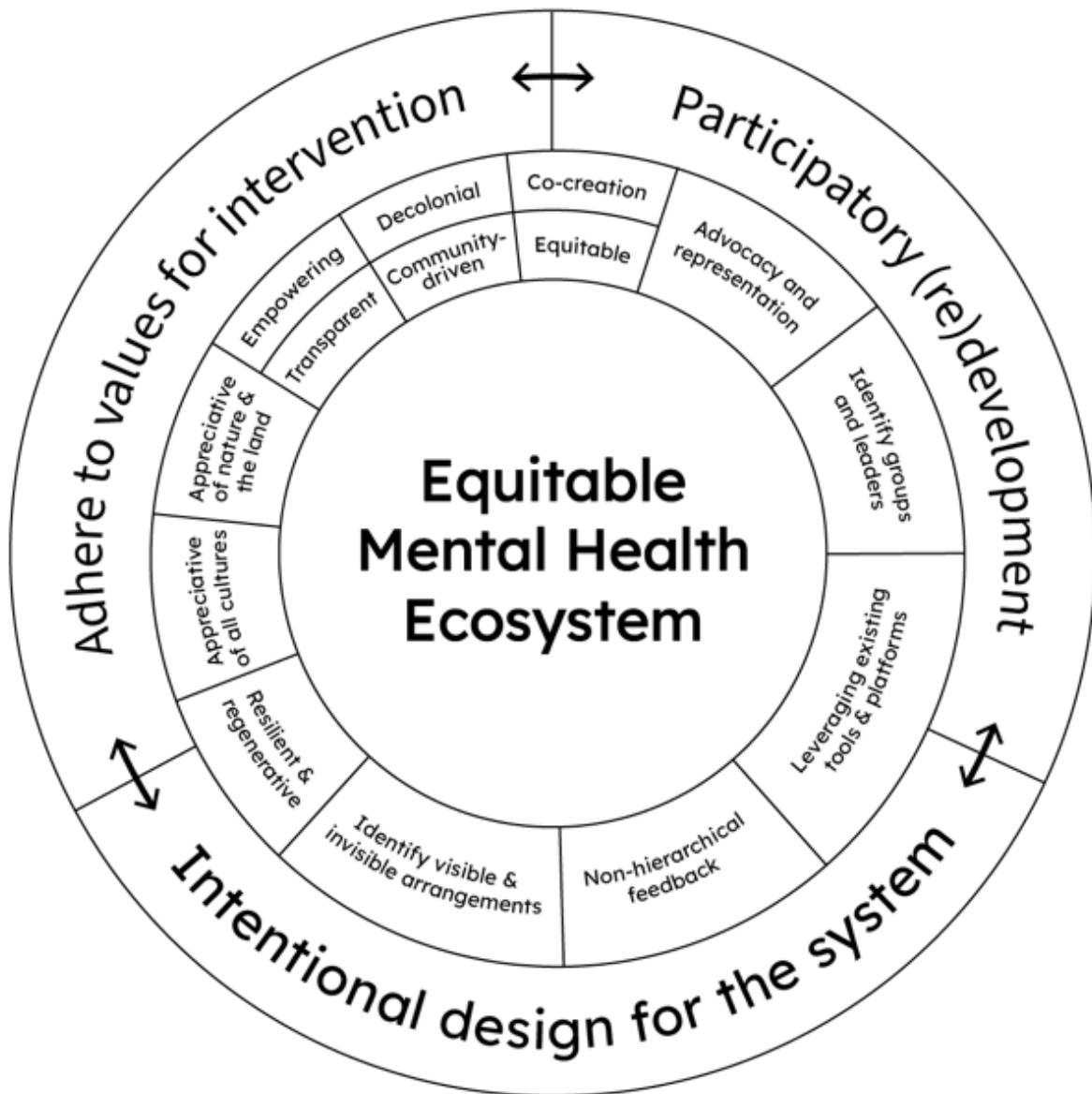


Figure 1. Equitable Mental Health Ecosystem model developed as a design outcome of this study. The inner ring shows values and practices that fit into the outer, foundational categories of an equitable mental health service ecosystem.

Keywords: Co-design, participatory design research, immigrant health, immigrant women, mental health, health equity, intersectionality, service ecosystem design

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