

STARTTS

Mental Health Information Sheet

Some identified issues faced by communities from diverse African backgrounds

What is Mental Health?

According to the *World Health Organisation*, Mental health is defined as '... state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community. It is very common for people to experience a problem related to their mental health at some point in their lives. With the right kind of support and professional guidance many people are able to overcome these problems, recover and live healthy and productive lives. There is no need to be ashamed to talk about mental health and mental illness is not a sign of weakness.

MYTHS vs FACTS

MYTH: AA person with a mental health problem is "crazy" or 'mad'.

FACT: Mental health problems results from the interplay between genetic, biological, psychological, environmental and spiritual factors. It's common for people to experience mental health problems at some point in their lives. Mental illness is often treatable and many people are able to recover and live a healthy life.

MYTH: Mental health problems are mostly caused by supernatural causes or witchcraft. A person who has mental health problem is cursed and can bewitch you or your family.

FACT: The causes of mental illness could be linked to a complex combination of genetic, developmental, environmental, socio-economic, cultural, and spiritual factors. People with mental health problems are neither cursed nor can they bewitch you or anyone.

MYTH: The first person to help with a mental health problem is a traditional healer.

FACT: Traditional healing methods are very important and can provide you with much needed and culturally relevant support. Often however they work best if they are combined with contemporary medical or psychological methods because this means you are getting the full range of possible help.

MYTH: Mental illness is not a serious issue, and can be overlooked.

FACT: Mental illness is as real as diabetes and heart disease. The earlier it is treated the better.

MYTH: Words used in English to describe mental health problems don't translate well into African languages. This means we will not be understood by a western counsellor or doctor.

FACT: It's true that many English words used to describe mental health problems don't always have direct translation into many of the African languages. However these English words can be explained in a person's chosen language so the person and counsellor or doctor can understand each other, and the person can be helped.

MYTH: If someone has a mental health problem, the best thing is to ignore them.

FACT: Ignoring a mental health problem is not a good idea. The longer a mental health problem is swept under the carpet the more likely it is that the person will become increasingly unwell.

MYTH: No one is born with mental health illness. It can come when you take alcohol or drugs into your body.

FACT: The causes of mental illness are complex. There isn't one simple, obvious thing, like a virus or bacteria, that causes mental illness, and that makes the causes hard to work out. For some mental illnesses, like schizophrenia and bipolar disorder, it's possible to inherit a predisposition — a greater likelihood that you'll develop the disorder. For others there seems to be no genetic link at all. But even then it doesn't mean you'll get sick. Your likelihood of developing a mental illness is influenced by a complex combination of genetic, neurological, developmental, environmental, socio-economic, and cultural, life experience and other factors.

MYTHS vs FACTS

MYTH: Counselling does not help, and is meant for crazy people.

FACT: An aspect of counselling is to provide professional assistance and guidance to help you to resolve personal or psychological problems. It includes working on strategies to better manage the difficulties you are coping with. Many people with a mental illness can recover and live normal lives if they are willing to access ongoing treatment and support, including counselling and make appropriate changes if needed in their lives.

MYTH: Talking aloud to oneself, acting irresponsibly and hitting people are the symptoms of mental health problems.

FACT: All these may be symptoms of mental health problems but are not necessarily. There are many symptoms and many of these are unseen e.g. feeling very anxious or having trouble sleeping.

While some people may show outward signs and some may need to be put in hospital, most people with mental illness don't look crazy from the outside and aren't hospitalised. Perhaps the most damaging myth about mental illness is that it makes you violent or talk to yourself. Movies, TV, games and even the news can give us false, highly stigmatising stories that people experiencing mental illness are violent.

This is usually not true. There is no evidence that people living with mental illness are generally more violent than anyone else. Violence is not the only symptom of mental illness. There is a likelihood of violent behaviour among people with mental illness, but analysis of many studies suggests that this may be more the result of abusing drugs or alcohol, not receiving proper treatment or having a history of violent behaviour which is independent of mental illness.

MYTH: Thinking of committing suicide or about killing oneself is abnormal and wrong.

FACT: Many people experience suicide ideation and is nothing to be ashamed of. It is not a sign of weakness. Seeking or getting help and treatment including social support can assist to address these thoughts and associated feelings. Ignoring the problem will not make it go away.

MYTH: If a family member has a mental health problem, it is better kept as a secret or attributed to witchcraft.

FACT: Many people feel that having a mental health problem is shameful, but secrecy generally only makes things worse because hiding the problem tends to make them seem bigger and scarier than they really are. Seeking help from a counsellor or a psychiatrist can help the individual cope more effectively.

It is important however that people receiving or seeking psychological treatment are sure of confidentiality as a professional practice. This means that whatever you talk about in your session is private and just between you and the counsellor.

MYTH: Counselling is a western treatment and is not helpful to people from other cultures.

FACT: Psychotherapy or counselling helps by providing an opportunity to talk to a specially-trained health professional in order to understand your symptoms, and to help you see things from a different perspective. Talking and sharing is a typical African thing.

MYTH: Counselling is supposed to be confidential, but our culture is to share some of our problems and frustrations with friends, family and community leaders.

FACT: Confidentiality is a way of protecting your privacy and it is your decision who you choose to inform about your condition.

Background

In order to spearhead the recovery process of people from refugee backgrounds and people seeking asylum who came from Africa and are experiencing symptoms of post-traumatic stress and other issues such as grief, STARTTS has gathered mental health information for better service delivery and to demystify the general understanding of mental health within African communities. The mental health needs of immigrants are a crucial aspect of today's health care arena. Even if the acculturation process follows a conventional course, the outcome is complicated by the impact of pre-migration losses, traumatic events and adapting to differences in weather, religion, language, clothing, legal principles and financial pressures all of which carry substantial mental health implication.

This information sheet was developed in consultation with 15 representatives from different African communities including; Ugandan, Kenyan, South Sudanese, Somali, Gambian, Sierra Leonean, Rwandan, Liberian, Congolese, Guinean, Eritrean, Ethiopian, Burundian, Cameroonian and Ghanaian. Its aim is to provide clear and relevant information about mental health and its impact on individuals, families and communities who have come to Australia from across Africa. This information sheet addresses common myths/beliefs and provides information and guidance. It's imperative to note that everyone has opinion about mental health, but opinions based on myth add to stigma and make life harder for people affected by mental illness, so let us stick to the facts. It does not attempt to represent the richness in diversity, ethnicity, religion, language, culture, norms and beliefs across the African diaspora.

Funded by



About STARTTS

STARTTS works with people who have experienced persecution, war, and violence or human rights violations before coming to Australia, to assist them to heal and lead a more productive life. When people feel less pressured and more in control, it is easier to learn English, get a job, get along with family, and make new friends.



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and Trauma Survivors

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