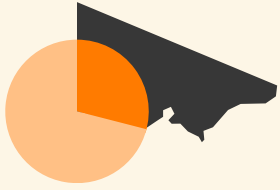


# Mental Health and Wellbeing



## WHAT IS NEEDED: GREATER UNDERSTANDING ABOUT THE GENDERED AND INTERSECTIONAL FACTORS THAT IMPACT ON MIGRANT AND REFUGEE WOMEN AND GENDER DIVERSE PEOPLE'S MENTAL HEALTH.



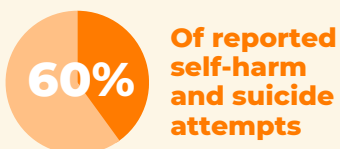
Migrant women make up **32%** of the Victorian female population

\*ABS (2021) The Census of Population and Housing, Australian Government / ABS Personal Safety 92016), Australia



People who frequently experience racism are almost **five times more likely** than those who do not experience racism to have **poor mental health**.

\*DHHS (Department of Health and Human Services) (2017). Racism in Victoria and what it means for the health of Victorians, State Government of Victoria, Melbourne.



**Two to three times more women than men experience depression and anxiety** and women make up **over 60%** of reported self-harm and attempted suicide.

\*Department of Premier and Cabinet. (2016). Safe and Strong: A Victorian Gender Equality Strategy State Government of Victoria, Melbourne.

### WHAT RESEARCH SHOWS

- Migrant and refugee women are impacted by intersecting race and gender inequality which in turn affects their mental wellbeing.
- Violence against women leads to poor mental health. Intimate partner violence impacts negatively on women's mental health outcomes.
- Depressive and anxiety disorders, suicide and self-harm are among the top ten leading causes of the overall burden in women aged 18-44.
- There is evidence that migrant women have higher rates of perinatal depression and anxiety, which are accentuated by settlement stress, financial hardship and social isolation.
- Migrant women do not have equitable access to perinatal mental health services. Key perinatal mental health services do not have the required resources, capacity and expertise to overcome language and other barriers and to provide a tailored service to migrant women.

### KEY RECOMMENDATIONS

- Invest and strengthen intersectional policy development and analysis to ensure that Victorian government policy impacts positively on migrant and refugee women's mental health. For example, analysis and evaluation of the mental health system and service delivery options should address the multiple forms of disadvantage and barriers to accessing services for migrant and refugee families, including racism and discrimination in service delivery, and language barriers.
- Provide ongoing investment to multilingual and ethno-specific organisations to facilitate innovative, tailored education and advocacy for mental health interventions. These programs would be delivered by trained bilingual health educators and work to promote gender and racial equality, increase understanding about women's mental wellbeing, and decrease stigma around women's mental health.
- Remove residency restrictions to ensure that all mental health prevention, support and treatment services and interpreting services are available to migrant women free of charge, regardless of migration status. Support services should be available to all migrant and refugee people on all visa categories in Australia to avoid a multi-tiered system in which certain groups of residents and citizens have access to more support than others.
- Train mental health service staff and the interpreting workforce in gendered, cross-cultural awareness.
- Provide ongoing investment to mental health services to offer comprehensive, culturally and linguistically appropriate support and case management to migrant women.
- Recognise that many technology-based modes of service delivery further exacerbate the digital divide as they exclude migrant and refugee women from accessing timely early intervention services.
- Ensure that migrant and refugee women have access to multilingual information about women's mental health and wellbeing related services.
- Co-design future support services with migrant and refugee women who may be experiencing mental illness and their carers: Engage migrant and refugee women in the co-design of service options through active outreach and consultation by bi-cultural staff.
- Develop innovative education and advocacy interventions that are specifically tailored for migrant and refugee women and involve representatives of migrant communities, and women in particular.
- Develop community-based initiatives to promote social cohesion and the development of social networks within migrant communities. Community groups that are accessible to migrant women and responsive to their needs have been shown to reduce the risk of developing mental health issues.
- Provide continuing funding and support for a peer-based, community-led, multilingual health educator workforce to enable them to deliver free, accessible, and culturally and linguistically responsive mental health information that meets the needs of migrant and refugee women and non-binary people in Australia.

### KEY POLICY FRAMEWORKS

- [Royal Commission into Victoria's Mental Health System 2021](#)



Read the **2020 Mental Health policy brief** from the Multicultural Centre for Women's Health.