



Fact sheet 20

Suicide prevention and people from culturally and linguistically diverse (CALD) backgrounds

The effect of migration, resettlement and integration on people can vary depending on a range of social, economic, environmental and personal factors.

This fact sheet provides information about the effect separation from culture and homeland has on people from culturally and linguistically diverse backgrounds.

The importance of understanding suicide in culturally and linguistically diverse communities

Culture shapes people's view of suicide; different cultures understand suicide and suicidal thinking in different ways. In some countries, thinking about suicide is believed to be caused by evil spirits, bad karma, bad deeds, the actions of ancestors or a previous bad life. In some cultures, there is a strong stigma attached to suicide and the families and carers associated with a suicidal person.

There is great diversity in the rate of suicide for immigrants:

- the rate generally mirrors the rate in their country of origin in the early stages of settlement; and
- the rate of suicide also reflects the different reasons that people may migrate and the effect that migration has on them. For some immigration is a very positive experience, including family reunion and better educational and employment opportunities. However, for others, immigration can be traumatic or fail to meet their expectations.

There are a number of reasons that it is important to consider suicide prevention in relation to people from culturally and linguistically diverse (CALD) backgrounds:

- The process of adapting to a new culture can in itself be a stressful experience particularly where there are wide differences in cultural beliefs, language, values and customs.
- Refugees may have experienced war and trauma, fled their home country, and lost their family, friends and the entire social fabric of their lives. Their experiences may put them at high risk for post-traumatic stress disorder or depression.
- For some who become socially isolated, suffer health problems or are elderly or unemployed, separation from their culture and land of birth may be a traumatic experience that places them at risk of suicide.

- A significant number of people from culturally and linguistically diverse backgrounds do not seek help for their mental health problem, or are reluctant to do so. Often, they miss out on suicide prevention services because information is not available in community languages, or there is no culturally appropriate service available. They may also find it difficult to use mainstream services because of language and cultural barriers. They may be confused about how services operate, or simply be unaware of the range of services and supports that are available.

Suicide risk and protective factors for people from culturally and linguistically diverse backgrounds

In addition to the suicide risk factors that exist irrespective of cultural background, the following factors may increase the risk of suicide for immigrants:

- decrease in socioeconomic status
- lack of recognition of overseas qualifications
- low levels of English language skills
- social isolation and lack of support
- separation from families, friends and culture
- prejudice and discrimination by the host population
- trauma and stress prior to or during immigration
- stress related to the settlement experience
- lack of control or choice in the decision to leave their country of origin
- language and cultural barriers to accessing mental health services
- stigma related to mental illness and use of mental health services; and
- breakdown of traditional and family support structures.

The following factors may reduce the risk of suicide among immigrants:

- family cohesiveness and support
- community support/connectedness
- religious beliefs
- negative beliefs about suicide
- help-seeking behaviour



- resilience (ability to cope/problem solving abilities)
- self-esteem and self-efficacy
- being a parent, having child-rearing responsibilities; and
- being married (for adult males).

Responding to someone from a CALD background who is at heightened risk of suicide

The following are some guidelines for providing suicide prevention interventions:

- If immediate safety is a concern, take the person to a 24 hour medical clinic or hospital emergency department. If the person sees a doctor, make sure a long appointment (also called a consultation) is booked. This means the doctor will have time to talk with the person.
- Ask the doctor or health worker to provide an interpreter. The interpreter should be a professional, not a friend or family member (except in cases of extreme emergency). Some mental health services have interpreter services available.
- If you cannot get an interpreter, ask the doctor or health worker to use the Telephone Interpreter Service (also called TIS) which is available 24 hours, 7 days per week. The phone number for the Telephone Interpreter Service is 131 450.

The best strategy for working with people from different cultures is to have someone from the same culture(s) there with them, to help to translate not only the language, but also the various cultural differences that may exist.

It is important to communicate clearly when helping a person at risk of suicide who speaks English as a second language or not at all. Encourage the person to use his or her preferred language, especially in stressful situations. Correctly answering simple and predictable information (name, age, date of birth) or having social conversation skills in English does not mean a person understands complex information spoken or written in English. Good verbal skills do not always equate with reading and writing skills and people often lose their skills in a second language in stressful situations.

When supporting a person from a CALD background who is suicidal, make sure you take into consideration the following:

- Try to establish a relationship and build a sense of trust. Trust, confidentiality and respect for individual beliefs and attitudes are paramount. Clearly explain your role and how the health system works.
- The first point of help and support may be a trusted person from the same cultural or religious group.
- The person may express themselves in ways you are not used to. People from different cultures interpret suicidal experiences through a range of cultural, spiritual and religious understandings. Be aware of different values and the way people express themselves.
- Allow as much time as possible, speak slowly and clearly, use short sentences, and repeat yourself regularly; and
- Acknowledge the importance of their family, community and kinship ties.

Interventions to increase resilience in people from CALD backgrounds

It is vital that services and support are culturally sensitive and tailored to the diverse needs of people from culturally and linguistically diverse backgrounds, since cultural understandings about stress, mental illness and suicide can be easily misunderstood by health and other professionals.

The following is a guide to assist in suicide prevention with people from culturally and linguistically diverse backgrounds:

- Assist in reducing stresses around housing, finances, work and family relationships;
- Support the individual to become involved with, and to feel part of, the community through positive cultural and religious connections and relationships with family and other community members;
- Provide culturally competent mental health programs;
- Provide programs that increase the capacity in CALD communities to support individuals and groups within their communities to deal with adverse life events;
- Promote traditional help-seeking pathways and culturally relevant recovery, including through people valued within the particular community, such as clergy and healers; and
- Work to remove language and communication barriers.

More information

- Multicultural Mental Health Australia fact sheets – community resources, education aids and research: www.mmha.org.au
- NSW Refugee Health Service – assistance for refugees and the health professionals who work with them: www.refugeehealth.org.au
- Commonwealth Department of Health and Ageing – Program of Assistance for Survivors of Trauma and Torture (PASTT) provides specialist recovery and support services : www.health.gov.au
- Queensland Transcultural Mental Health Centre – mental health and well being information and resources for culturally and linguistically diverse communities in Queensland: www.health.qld.gov.au/pahospital/qtmhc
- Transcultural Mental Health Centre – mental health information and resources for people from a culturally and linguistically diverse background: www.dhi.gov.au/tmhc
- Victorian Transcultural Psychiatry Unit – information and resources aimed towards providing effective, equitable and culturally appropriate services to Victoria's culturally and linguistically diverse population: www.vtput.org.au