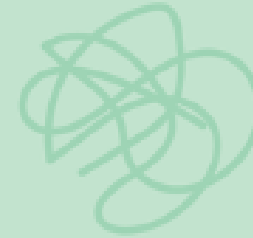




Health and
Social Care

Support Resources



The Practitioner's Toolkit

Mental Health and Ethnic Minority Groups

Introduction

Quick Tips

Barriers to Accessing
Services

Accessing the Appropriate
Support - List of Resources

Introduction

Health and Social Care in Northern Ireland (NI) is committed to removing barriers to health and addressing inequalities. This includes ensuring that anyone not proficient in English or new to NI can access culturally competent and responsive mental health services. This toolkit supports mental health practitioners in meeting that need.



Barriers such as language and cultural differences can create inequalities between service users and providers. NI has become more culturally diverse, with the 2021 Census reporting that 3.4% (65,600 people) of the population are from Ethnic Minority communities—double that of 2011 and four times that of 2001. Polish is now the most common language spoken after English. (Source: <http://www.nisra.gov.uk>). While this enriches NI, it also presents challenges for public services.

BME communities often face greater difficulties accessing health services, especially in mental health, where disparities are even more pronounced. These groups tend to experience higher rates of mental health issues and poorer service outcomes. Notably, BME groups under-use mental health services. (Source: Eoin Rooney, NHSCT and Ballymena Inter-ethnic Forum, 2013).

HSC services across NI are implementing cultural competency initiatives, including a province-wide Cultural Competency Framework. Training helps reduce inequalities by equipping healthcare providers with skills to recognise unconscious bias, communicate effectively, and build trust. This improves accessibility and support for ethnic minority communities, leading to better health outcomes. HSC staff can access online and in-person Cultural Competency Training through Learn HSCNI. Other organisations should contact their Learning and Development departments for external training options.

Quick Tips

✓ **Prepare** Take time before meeting a person to find out their country of origin and first language. Ensure that an interpreter has been arranged for those who are not proficient* in English. Allow extra time for meetings. (Refer to your Organisational guidance if Interpreting is required)

✓ **Learn** Develop your trauma awareness and cultural competency through training opportunities. Understand differences in help seeking patterns, support needs and sources of support. Be aware of body language and facial expressions for example: eye contact can be interpreted differently in different cultures

✓ **Ask** Tailor the interaction according to the person. For example ask the correct pronunciation of their name, ask about their understanding of mental health and their own cultural and religious practices in relation to health and social care.

✓ **Check** Verify regularly that you have been understood. Use short sentences to convey key messages

✓ **Seek** Consent - Involve families or friends in assessment, treatment and support only with consent

✓ **Include** Ensure feedback is sought by providing translated versions of documentation and evaluation. .

✗ Generalise - treat people as individuals

✗ Make assumptions about people on the basis of their ethnic group

✗ Ask a child to act as interpreter in any situation and only ask family members with consent**

✗ Use abbreviations, jargon or clinical terms.

* Proficiency is not just about getting by in a social situation but is measured in accordance with the complexity of vocabulary used or with how distressing a situation may be. Often the person may feel more comfortable expressing themselves in their native language

**It is not advised to use family members as interpreters because command of the language cannot be verified, and bias can be introduced. It is better to have an objective third party

Barriers

Increasing awareness and understanding of mental health may help to improve people from minority ethnic groups to access to mental health services leading to earlier interventions and thereby increase the likelihood of a positive therapeutic outcome. Some examples of barriers to accessing healthcare include:

Lack of information

Understanding, identifying or accessing what mental health services are available in the UK can be a challenge for people unfamiliar with mental health services.

Language barriers

Communication difficulties and issues of understanding are a key issue; including availability of and access to qualified interpreters and differences in language used to describe mental health.

Isolation

Many people have travelled alone or in small groups meaning they don't have support networks and lack social or family support, this can exacerbate feelings of failure and helplessness and make attending appointments more difficult for those with caring responsibilities.

Cultural differences

Unfamiliar with mental health services, cultural attitudes towards mental ill health, tradition of seeking familial help or reluctance to take medication.

Trauma

People travelling here may have experienced trauma, those experiences may isolate individuals further through fear and avoidance of triggering situations.

Status

Immigration and migration status can impact on access to services, many people will not have registered with GP or have no recourse to public funds.

Poverty

Poverty is an issue experienced by many people and has an impact on access to healthcare services through costs and time associated with attending appointments.

Access

Lack of local knowledge, access to and cost of transport, the location of services and distance from home may further impact access to services.

Stigma

Issues of stigma, discrimination and fear of mental ill-health from within and outside own groups can impact access to services and engagement with continued care.

*Intersectionality: It is also important to bear in mind that some groups suffer from multiple disadvantages, such as minority ethnic older people and asylum seekers, as well as multiple discriminations, for example because of the combination of race and mental health issues.

Further resources

HSC Resources

- [BHSCT Multi-Cultural and Beliefs Handbook](#)
- [Access to Health and Social Care](#)
- [AccessAble](#)
- [Mental Health Self Help guides](#)
- Self harm Information : [SHIP A5 client leaflet 24 final.pdf](#)
- [BOC VSS Regional leaflet copy \(victimsservice.org\)](#)

BSO Interpreting and Translation Services

- [BSO Interpreting Services](#)
- [Reachdeck Services](#)
- [Interpreting -1](#)

HSC Chaplaincy Services:

- [BHSCT](#)
- [NHSCT](#)
- [SEHSCT](#)
- [SHSCT](#)
- [WHSCT](#)

PHA Directory of services to help improve mental health and emotional wellbeing (Z Cards):

- [Belfast Area Card 02.23 final.pdf](#)
- [Northern Area Card 02.23 final.pdf](#)
- [SouthEastern Area Card 02.23 final.pdf](#)
- [Southern Area Card 02.23 final.pdf](#)
- [Western Area Card 02.23 final.pdf](#)

PHA Regional Mental Health Service

- [Minding.your.head](#)

Statutory and Community Support Organisations

- [Law Centre Northern Ireland](#)
- [Northern Ireland New Entrant Service \(NINES\)](#)
- [Northern Ireland Human Rights Commission](#)



Further resources

Click images to access Practitioner's Toolkit posters

Mental Health and Ethnic Minority Groups

What are some of the barriers to accessing healthcare?

Raising awareness and understanding mental health can help ethnic minority groups access services earlier, increasing the chances of positive therapeutic outcomes.

- Lack of information
- Language
- Isolation
- Cultural differences
- Trauma
- Immigration status

Scan QR code to access useful support resources for practitioners and patients

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Quick Tips

For Culturally Responsive Mental Health Support

Prepare

- ✓ Check the person's country of origin and first language.
- ✓ Arrange a registered BSO interpreter if needed and allow extra time for appointments.
- ✓ Build trauma awareness and cultural competence through training.

Ask

- ✓ Tailor the interaction according to the person.
- ✓ Check the correct pronunciation of their name.
- ✓ Ask about their understanding of mental health and relevant cultural or religious practices.

Consent

- ✓ Check understanding throughout the conversation, using clear sentences.
- ✓ Only involve families or friends in assessment, treatment and support with patient's consent.

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Accessing the Appropriate Support

Mental Health and Ethnic Minority Groups

- Can the individual communicate their support needs and do they understand English?
No → Arrange appropriate interpretation services:
 - Face-to-face: for longer, more complex cases.
 - The Big Word: telephone interpreting for short, straightforward appointments only.
 - Translation Device: if available, or in emergency cases.**Additional support:**
 - Reachcheck.
 - HSC website.
 - Ensure access to translation for any written follow-up or medication.
- Is there immediate concern for the health or safety of the individual?
No → Dial 999, refer to Emergency Department or phone Lifeline crisis helpline: 0808 808 8000.
- Does individual have recourse to public funds?
No → Direct to further support resources via QR code in the bottom right corner.
- Check if individual is known to services or registered to a GP.
Seek permission to check Encompass or relevant Database.
- Refer to relevant HSC service for advice and support.

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