Supporting Newcomer Mental and Emotional Well-Being Training

PRESENTERS

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YOUR MENTAL HEALTH MATTERS.



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MENTAL HEALTH IS JUST AS IMPORTANT AS PHYSICAL HEALTH.



ICEBREAKER

WHERE ARE YOU FROM, AND WHAT LANGUAGES DO YOU SPEAK?

AGENDA

1. **Introduction & Framing**
   - Emotional well-being and caregiver health
   - Cultural considerations and trust-building
2. **Approaching Mental Health Conversations**
   - Common beliefs and taboos
   - Everyday language for discussing well-being
   - Permission-based approaches to offering support
3. **Mental Health Supports & Referrals**
   - Mental health services and provider types
   - Community resources and referral pathways
   - Culturally responsive referrals
4. **Case Study Practice**
   - Applying skills to real-world scenarios
5. **Reflection & Closing**
   - Key takeaways and resources

EMOTIONAL WELL-BEING AS PART OF CAREGIVER HEALTH

Today's training is not about diagnosing mental health conditions or becoming mental health counselors. Instead, it is about recognizing emotional well-being as an important part of overall health and learning how to have culturally responsive conversations that support newcomer caregivers and connect them with resources when appropriate.

COMMON STRESSORS FOR NEWCOMER CAREGIVERS

- Resettlement and cultural adjustment
- Language barriers
- Financial stress
- Separation from family and support networks
- Experiences of migration, displacement, or trauma
- Navigating unfamiliar systems (healthcare, education, social services)



YOUR ROLE IS NOT TO DIAGNOSE OR FIX PROBLEMS, BUT TO:

Build trust

Listen with respect



Offer support

Connect families to resources when they are ready

POLL QUESTION:

WHICH CONCERN HAVE YOU ENCOUNTERED MOST OFTEN DURING HOME VISITS?

STRESS OR OVERWHELM – 1

SOCIAL ISOLATION – 2

ANXIETY OR WORRY – 3

FAMILY CONFLICT – 4

DIFFICULTY ADJUSTING TO LIFE IN THE U.S.– 5

CAREGIVER EXHAUSTION OR BURNOUT – 6

Meeting families where they are and using strengths-based, culturally responsive language builds trust and opens the door to meaningful support.

CHALLENGES FAMILIES MAY FACE SHARING SENSITIVE CONCERNS ACROSS CULTURES

Think about the following:

- Imagine you have recently arrived in a new country.
- What concerns might you keep private from people outside your family?
- What fears might you have about sharing personal or family struggles?
- What would need to happen before you felt comfortable discussing sensitive topics?
- What actions from a service provider would help you trust them?
- What actions might make you less likely to share?

CHAT ACTIVITY

TYPE A WORD OR PHRASE:

What might make someone hesitate to share emotional or personal concerns with a home visitor?

Examples:

- Fear
- Stigma
- Shame
- Language barriers
- Lack of trust
- Privacy concerns
- Fear of judgment
- Family reputation
- Immigration concerns
- Previous negative experiences
- Cultural expectations

FOR NEWCOMER FAMILIES, ADDITIONAL FACTORS MAY INCLUDE

Different cultural understandings of emotional distress and mental health.

Concerns about confidentiality.

Fear of being judged or misunderstood.

Past experiences with systems or institutions.

Language barriers and difficulty expressing emotions

Expectations about keeping family matters private.

Experiences of discrimination, migration stress, or trauma.

Trust is built through:

Consistency
Respect
Active listening
Cultural humility
Recognizing strengths
Offering choice and control

APPROACHING MENTAL HEALTH TOPICS WITH EVERYDAY LANGUAGE

How we can begin conversations about emotional well-being in ways that feel respectful, culturally responsive, and non-threatening



WHAT ARE SOME BELIEFS OR ATTITUDES ABOUT MENTAL HEALTH THAT YOU HAVE ENCOUNTERED AMONG THE FAMILIES YOU SERVE

It is important to remember that there is a power differential in many cultures in providing any kind of support/social service. The service provider may be seen as having more power or authority, which may mean families may be more hesitant to share emotional concerns or distress.

Two families from the same country, religion, or cultural background may have very different beliefs and experiences.

AVOID ASSUMPTIONS!

REMINDER

USING EVERYDAY LANGUAGE TO EXPLORE WELL-BEING

❌ "Are you struggling with depression or anxiety?" Consider asking:

✅ **"How have you been feeling lately?"**

✅ **"How are you managing all of your responsibilities and duties?"**

✅ **"How has your stress level been recently?"**

✅ **"What helps you get through difficult days?"**

AREAS TO EXPLORE

Sleep
How have you been sleeping lately?

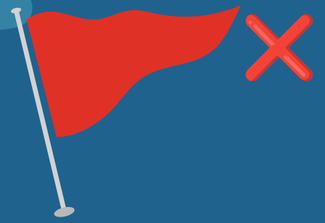
Daily Routines
What does a typical day look like for you?

Eating and Energy
How has your appetite been?

Relationships and Community
Who do you turn to when you need support?

Faith and Spirituality
Are there spiritual or cultural practices that help you during stressful times?

PERMISSION-BASED CONVERSATIONS ABOUT SUPPORT



❌ "I think you need mental health services."

❌ "You should see a counselor."

✅ "Would it be okay if I shared some resources that other caregivers have found helpful?"

✅ "Would you be interested in hearing about some support options available in the community?"

✅ "Some families appreciate learning about local programs that focus on stress management and well-being. Would you like more information?"

✅ "I have information about support groups and community resources. Would it be helpful if I shared those with you?"

Our role is to:

- **Build trust**
- **Listen carefully**
- **Share information respectfully**
- **Support informed choice**
- **Leave the door open for future conversations**

1. Start with trust.
2. Use everyday language.
3. Focus on strengths and well-being.
4. Explore support systems already in place.
5. Ask permission before sharing resources.
6. Respect the family's choices and readiness.

REMINDER

Our role is not to persuade or pressure.

MENTAL HEALTH SUPPORTS — UNDERSTANDING THE SYSTEM

Levels of Mental Health Support

Informal & Community Supports

Family and friends
Faith and spiritual communities
Cultural and community organizations
Peer support networks

Community-Based Psychosocial Support

Parenting support programs
Stress and wellness groups
Case management and newcomer programs
Resettlement support services
Community centers

Clinical Mental Health Services

Therapy and counseling
Psychiatric care
Crisis services

TYPES OF MENTAL HEALTH PROVIDERS

THERAPISTS / COUNSELORS — THERAPY FOR STRESS, TRAUMA, RELATIONSHIPS, MENTAL HEALTH DISORDERS, ETC

SOCIAL WORKERS — THERAPY, CASE MANAGEMENT, SYSTEM NAVIGATION

PSYCHOLOGISTS — PSYCHOLOGICAL DIAGNOSTIC ASSESSMENT AND THERAPY

PSYCHIATRISTS — MEDICAL DOCTORS WHO CAN PRESCRIBE MEDICATION

PEER SUPPORT SPECIALISTS — PEOPLE WITH LIVED EXPERIENCE SUPPORTING OTHERS



Community-Based Support & Statewide Resources

Examples of Support Options

- Newcomer and refugee support organizations
- Community centers and cultural associations
- Parenting and caregiver support programs
- Youth and family wellness programs
- Faith-based support networks
- Peer support and mentorship programs
- Stress reduction and wellness workshops



SCREENING, REFERRALS & WARM HAND-OFFS, HOW TO APPROACH THEM?

Screening is not diagnosing.

<u>It means:</u>

- Noticing possible signs of stress or distress
- Asking gentle, open-ended questions
- Understanding needs and readiness
- Deciding whether additional support may be helpful

CULTURALLY SENSITIVE APPROACH TO SCREENING

- Use everyday language (stress, sleep, energy, routines)
- Avoid clinical or diagnostic terms when possible
- Focus on strengths and coping strategies
- Normalize support (“many families find it helpful…”)
- Ask permission before going deeper

Instead of:

❌ **“I will refer you to a counselor.”**

Try:

✅ **“Would it be okay if I shared some support options that other families have found helpful?”**

✅ **“Some caregivers find it helpful to talk with someone about stress. Would you be open to hearing about that?”**

✅ **“There are community resources that support families with stress and adjustment—would you like more information?”**

Warm Hand-Off Principles

- **Explaining options clearly**
- **Offering choice, not pressure**
- **Supporting connection when ready**
- **Maintaining trust and follow-up**
  ***assess transportation access/support when working on the warm referral**

Referrals are most effective when they are:

- Respectful
- Permission-based
- Strengths-focused
- Grounded in trust





FOCUS SKILLS:



- Recognizing layered stress (acculturation + trauma + parenting)
- Supporting family connection and identity loss concerns
- Trauma-informed, non-clinical language
- Permission-based referral approach
- Cultural humility and avoiding assumptions

CASE STUDY & SCENARIOS CASE STUDY #1:

A family who arrived in the U.S. about 2–3 years ago is now fairly settled. Their older children are in school and are becoming more comfortable with American culture. They prefer speaking English and sometimes refuse to speak their parents' native language at home.

The parents are beginning to feel a growing emotional distance from their children and feel they are "losing connection" with them. At the same time, there is ongoing war in their home country. Many extended family members are still there, and the parents are constantly worried about their safety. They receive frequent distressing news from home. During home visits, the parents appear emotionally exhausted, anxious, and sometimes withdrawn. They may say things like:

"Everything is fine, just normal stress."

"We don't want to burden anyone."

"We are just trying to stay strong for the children."

Discussion Prompts:



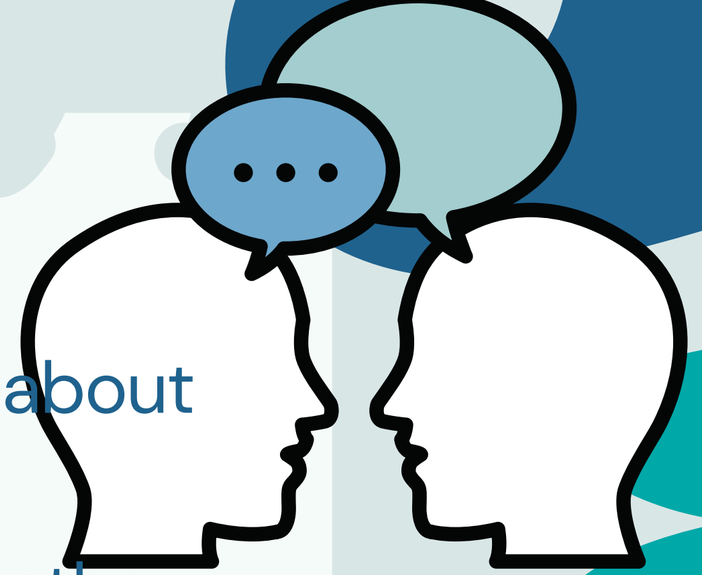
- How would you gently explore what is happening without pushing too quickly?
- What everyday language could help open space for conversation?
- How do you balance talking about parenting stress AND ongoing trauma from their home country?
- What permission-based language could you use to offer support?
- What community or cultural supports might be helpful for this family?

CASE STUDY & SCENARIOS CASE STUDY #2:

You are doing a routine home visit with a mother of three small children. Their family arrived in the US 6 months ago from central Africa. Her husband has been working 2 jobs to support the family, leading to long hours away from home. She stays home to care for the children and only has access to the city bus for transportatoin. They do not have any other family in the area for support.

During the visit, she says she is “fine,” but you notice she looks tired, withdrawn, and overwhelmed. She avoids talking about emotional stress, saying in her culture “strong people don’t share personal problems”.

Discussion Prompts:



- How would you build trust before talking about mental health?
- What words or actions would help this mother feel respected and understood before discussing emotional stress?
- How can you create a safe space where she feels comfortable sharing at her own pace?
- What additional supports might this mother need to engage additional services?

“What is one well-being question I will try during a home visit this week?”

As home visitors, you are often one of the most trusted connections for newcomer families. Small conversations, asked with care and respect, can open meaningful pathways to support and healing.

Thank you!