

A Scoping Review of Mental Health Issues and Concerns

among Immigrant and Refugee Youth in Canada:

Looking Back, Moving Forward

Key Details

KEY WORDS

Canada, immigrant youth, mental health, mental illness, refugee youth, scoping review

POPULATION GROUP

Newcomer youth

STEPPING UP THEMES

Health and Wellness; Strong, Supportive Friends & Families; Diversity, Social Inclusion & Safety; Coordinated & Youth Friendly Communities

RESEARCH ORIGIN

Canada

SOURCE

Academic article

"Although both groups
[immigrant and refugee
youth] may be affected
by the same postmigration determinants
of mental illness, refugees
may experience these
determinants in "acute and
unique ways," which may
result in more mental health
problems."

1. What is the research about?

According to Statistics Canada (2011), youth make up a large proportion of Canadian immigrants (12%) and refugees (21%). Mental health is a concern for all youth, but for immigrant and refugee youth their pre-migration experiences may affect their mental health outcomes. While both refugee and immigrant youth are impacted by their pre-migration experiences, there are important differences between the two. For example, youth who immigrate often do so with their families and they usually come by choice, directly. Refugee youth are forced to leave their home countries and often have witnessed and experienced violence and conflict. Their path to Canada may not be direct. They may have spent time in various refugee camps, potentially in multiple countries before coming to Canada. They may have also been separated from their families. The research on the different mental health needs of immigrant and refugee youth is underdeveloped. This study is a review of existing research in order to identify what is and is not known, as well as look for themes that can inform research, policy and practice.

2. Where did the research take place?

This is a review of research that took place in Canada.

3. Who is this research about?

This research is about youth (aged 13-29) who came to Canada as refugees or immigrants.

4. How was the research done?

This research is a scoping review. This means that the researchers reviewed and assessed Canadian research, published between 1990 and 2013, about immigrant and refugee youth and mental health. The researchers used a five-stage process: 1) to identify the research question; 2) identify appropriate studies; 3) select studies to include; 4) analyze the studies; and 5) synthesize and report the findings.

In total, 17 articles were selected, 11 originated in Quebec, 5 in Ontario and 1 in both of these two provinces. The majority of studies selected used both survey and interview research techniques. Eight studies were about refugee youth and 6 were about immigrant youth. Three studies were about both refugee and immigrant youth. Fifteen of the studies included men and women. Two studies were gender specific. Eleven studies included a mix of youth from different origins and 6 studies focused on youth from a

particular origin. The most common origin was Cambodia (5), followed by Central America (3), Caribbean (3), Somalia (2), and the Philippines (2).

5. What are the key findings?

The review found that current research can be grouped into three types: research on determinants of mental health (preand post-migration); rates of mental illness (self-reported problems); and, evaluations of program inventions.

Determinants of mental health

Pre-migration determinants include experience of violence, war, ethnic discrimination, and life struggles in refugee camps. Post-migration determinants include number of years since immigration to Canada, family structure, and failure to integrate into the new society.

Rates of mental illness

Rates of mental illness differ according to gender, ethnicity and immigration status. Research on the health of refugee and immigrant youth in relation to Canadian-born youth is inconclusive. For example, one study found that refugee youth suffer from higher rates of emotional and behavioral problems and engage in more risky behaviours compared to some Canadian-born youth, while two other studies found the opposite to be true.

Program intervention evaluation

The authors reviewed two studies of school-based drama therapy program interventions aimed at improving the mental health of refugee and immigrant youth. Both interventions produced positive outcomes. While one program did not improve self-esteem, the mathematics performance of participants improved.

The researchers advise that the findings should be taken with caution because of limitations in the methodology of the studies they analyzed (i.e. small sample size, unrepresentativeness, geographical specificity, lack of comparison data, and different research questions).

6. Why does this research matter for youth work?

Youth mental health needs differ depending on a variety of factors, including immigration experiences, gender, religion, race, language, ethnicity, and time in Canada. Therefore, in designing intervention programs, it is important to understand the migration experiences of the participants. The study suggests that families should be engaged to support positive mental health outcomes. Individual level interventions may be ineffective. The study additionally suggests that schools are a good site for intervention programs. Furthermore, arts-based approaches have promise for addressing the mental health needs of refugee and immigrant youth.

It is important to proactively outreach to refugee youth as soon as possible when they arrive in Canada. Moreover, a holistic approach that responds in an integrated way to a range of health, social, and settlement needs may be more effective than siloed services. Finally, the authors conclude that much more research is needed and that comprehensive policies need to be developed to address structural racism and discrimination.



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