# FACILITATORS AND BARRIERS OF E-MENTAL HEALTH RESOURCES: PERSPECTIVES FROM CULTURALLY DIVERSE POPULATIONS

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# Introduction

Evidence-based eMH approaches are available and apply to the general population; however, the literature demonstrates a relative paucity of research on eMH strategies tailored to culturally diverse populations. Technology can improve quality and access to this underserved population through e-mental health. However, these services must be culturally tailored for peak effectiveness.

# **Methods**

In this mixed-methods study, participants (N=136) responded to an online survey to inquire about their e-mental health use, the severity of their depression and anxiety symptoms, and sociodemographic characteristics. Interested survey participants (N=14) shared their experience at one of four semi-structured focus group discussions to further ask about their needs for future resources. Qualitative data was analyzed through coding and thematic categorization using NVivo. Quantitative data was analyzed using descriptive statistics.

#### **Results**

Participants' ages ranged from 19 to 55+ years with 43% within the young adult ages of 19 to 24. Of the respondents, 65% were women, 22% were men, and 3% identified as Trans Male, Non-Binary or Other. Participants identified as South Asian (40%), Chinese (28%), White (6%), West Asian/Arab (6%), South East Asian (4%), and Filipino (3%).

Participants (68%) indicated that the eMH resources they used, overall, were not culturally tailored.



# **FACILITATORS**

- Free, accessible
- Convenient, flexible
- · Access to health data
- Sense of control and empowerment
- Monitors health progress
- Low-commitment
- Private
- Full of relevant information

# **BARRIERS**

- · Lack of personal connection
- Too much work
- Lack of credible information
- Too much promotional content
- Does not recognize unique needs
- General information
- Wordy/Scientific jargon
- Need motivation to use
- No accountability
- Lack of cultural relevance
- Culturally linked stigma
- Rare inclusion of minority languages
- Lack of representation

"...Like, I'm South Asian and I don't see any, you know, like proper representation of South Asian community in these resources. I think in our community there is a general stigma around mental health." - Participant 'Neil' 61-year-old South Asian male named Gary said that flexibility in accessing resources allows users to "not be constricted by office hours or availability of a person who's going to provide those resources" by choosing when "you want to get those resources" while "in the safety of [your] safe environment."

# Conclusion

The implications from this study have the potential to benefit culturally diverse communities by improving CDP's access to effective treatment for anxiety and depressive disorders using technology. It provides health care professionals with recognition of treatment needs of CDP in addition to supporting the development of culturally relevant e-mental health resources and services. Lastly, we hope to add to the limited literature on cultural responsiveness of e-mental health and overall, to the paucity of multicultural e-health research.

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