BUILDING BRIDGES: PSYCHOLOGY, COMMUNITY AND FAITH GROUPS IN TOWER HAMLETS

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- Aims to make talking therapies more accessible and more culturally relevant to local communities
- Works in partnership with community organisations
- Tower Hamlets has the largest Muslim population in the UK (35%), primarily within the Bangladeshi & Somali communities
Talking Therapies – BME Communities Underrepresented

- Myths & misconceptions “hard to reach” – locates the problem in the communities
  - “we’re not hard to reach, we’re just easy to ignore”
- Hard to access services
- Cultural relevance of services
  - Interdependence; Spirituality; Discrimination
- ‘Circles of fear’ (Keating et al., 2002)
Circles of Fear (Keating et al. 2002)

- Formulation of the relationship between African and Caribbean communities and mental health services
- Context: over-representation of Black people in MH services, negative experiences, institutional racism
- New ‘circles of fear’ between Muslim communities and MH services (Byrne, Mustafa & Miah, 2016)

NEW ‘circles of fear’?: Muslim communities and MH services

- Key ingredients for ‘circles of fear’ present
- ‘Othering’ of Muslim communities, seeing them as a threat
- Policing of Muslim communities and focus on radicalisation seen as a cause of mental distress, esp. among young people
- Impact on trust and relationships
- “Their houses have been raided, they have been questioned under the Terrorism Act but you say that to a therapist - would you see that as a delusion or would you see that as paranoia or would you see that as reality?”
  - (Focus group participant, Muir, 2016)
BREAKING THE CIRCLES OF FEAR

- Working in partnership with community groups and faith leaders
- Building trust based on mutual respect and appreciation of each other’s expertise
- Understanding and valuing Islam as a core aspect of people’s identity and preferred way of coping
- Bringing the learning back into the statutory services; creating space for dialogue
'WORKING TOGETHER'

- Joint work with Department of Spiritual, Religious & Cultural Care
- Working with local Imams & ruqyah healers
- Building Trust and Understanding
- Mutual exchange of learning
COMMUNITY ENGAGEMENT

- Raising awareness, challenging stigma
- Community meetings & mental health awareness sessions, e.g. Bangladeshi Mental Health Awareness Day, Somali Health Conference
- Appearance on local Bangladeshi TV
- Bangladeshi & Somali Mental Health Forums
Partnership with Tower Hamlets Mind to provide talking therapy in a way that is accessible and culturally relevant to Bangladeshi and Somali groups

‘Tree of Life’ (Ncube, 2006):
A collective narrative therapy approach

- Participants as experts;
  developing preferred stories of strength, hope and recovery
Adapting the Tree of Life to Incorporate Faith in Recovery

- Co-facilitated by Imam Qamruz Zaman Miah, of our Department of Spiritual, Religious and Cultural Care
- Included Islamic ideas of wellbeing and dealing with trials and tribulations – ‘storms of life’
- Making sense of experiences using culturally relevant teachings
- Concept of Al-Qadr: challenges self blame and punishment which may hinder recovery

Muslim Worldview Degrees of Faith

Islam

Emaan

Ihsaan
Linking the 5 Pillars to Mental Wellbeing

- Integrating ideas from ‘mainstream’ psychology with familiar Islamic / Cultural teachings – 5 ways to wellbeing (to connect, be active, keep learning, give to others and to take notice)
DEALING WITH TRIALS AND TRIBULATIONS
– QURANIC REFERENCE

Surah Adh Dhuha (The Morning Hours) and Surah Ash Shahr (The Relief)

- Participants found this especially helpful when thinking of their own struggles.
- Themes within chapters include - the importance on focusing on the blessings each individual has in their life,
- Knowing that we are not alone in our suffering
- Importance of hope.

Did We not expand for you, [O Muhammad], your chest? And We removed from you your burden. Which had weighed upon your back. And raised high for you your repute. For indeed, with hardship [will be] ease. Indeed, with hardship [will be] ease. So when you have finished [your duties], then stand up [for worship]. And to your Lord direct [your] longing.
Shared experiences of using coping techniques
OUTCOMES

- Sessions well attended and positively evaluated
- Focus group themes: importance of the group and shared understandings; faith as central to wellbeing and recovery; hope and the importance of a safe space
- Participants requested
  - faith to be incorporated in future interventions
  - support around how to bring up ideas of faith in sessions with mental health professionals
  - MH professionals to be trained to understand Islam better & the centrality of faith in recovery
- Positive ‘word of mouth’ from Bangladeshi group led to the Somali community project
GEEDKA NOLOSHA: SOMALI TREE OF LIFE

- Inspired by the Bangladeshi men’s group
- Also run in partnership with Mind in Tower Hamlets and attended by 20 men and women
- Incorporated Faith in Recovery & Somali Poetry
- Flourishing Minds project: Somali women trained to deliver it in their community
CONCLUSIONS

- It is possible to develop a positive spiral driven by trust and collaboration.
- But, these are small projects in the context of continuing inequalities, many of which we have little control over.
- Challenge of sustainability.
- Importance of partnership working.
- One size doesn’t fit all: consult with communities & tailor interventions.
- Utilise the strengths and resources of communities.
- Involve people with lived experience at every stage.
- Stop seeing communities as ‘hard to reach’!