Arabic Mindfulness Intervention Project

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Tuesday 13 December 2016
Primary Integrated and Community Health Research Forum
Background

- Arabic speaking community members have poor engagement with mental health services and high levels of psychological distress.
- Mindfulness: psychological practice, based on Buddhist traditions, that focuses on “paying attention in a particular way: on purpose, in the present moment, and non-judgmentally.”
- Current treatment resources are almost exclusively available in English.
Phase 1 Research

- Translation of an evidence-based Mindfulness Intervention into Arabic (CD and electronically)
- Systematically testing cultural acceptability and clinical utility of the intervention in the Arabic speaking community in St George
- First study of this type in the world with Arabic speakers
- Intervention – 5 week program of guided mindfulness exercises which participants undertook in their own homes (3 x 30 minutes per week)
- 70 Arabic speaking community members participated in the research
- Ethics approval (HREC reference no. 14/155)
Intervention – 5 week program of guided mindfulness exercises which participants undertook in their own homes (3 x 30 minutes per week)

**Week 1:**
Track 1 Introduction  
Track 2 Breathing exercises  
Track 4 Leaves on the Stream  

**Week 2:**
Track 2 Breathing exercises  
Track 4 Leaves on the Stream  

**Week 3:**
Track 4 Leaves on the Stream  
Track 5 The Observing Self  

**Week 4:**
Track 4 Leaves on the Stream  
Track 5 The Observing Self  

**Week 5:**
Track 3 Mindfulness of Emotions

[Link to Mindfulness audio track]
Key Outcomes

• Was the Arabic Mindfulness CD culturally acceptable to members of the Arabic speaking community? (compliance with intervention; survey re. attitudes)

• Did the use of the exercises on the CD reduce psychological distress over a five week period? (K10 and DASS21 – Arabic translations)

• Was the reduction in psychological distress maintained over a 12 week period? (K10 and DASS21 – Arabic translations)
Indicators of clinical utility (K10 and DASS21)

Mean change in K10 scores

Mean change in DASS21 subscale scores

(p<0.001)  (p<0.01)
Indicators of cultural acceptability

Evaluation results showed that Mindfulness is connected to familiar spiritual ideology and cultural practices of Arabic speaking Muslims and Christians:

- Compliance with the protocol was high: 64 of 70 participants (91%) reported using the CD 15 times or more during the period.
- The majority (94%) of participants practiced Mindfulness after the intervention period.
- At 12 weeks follow up all participants (100%) agreed or strongly agreed that:
  - Mindfulness was suitable to their way of life.
  - Mindfulness was compatible with their cultural and religious practices
Quotes from participants

“Thank you for the opportunity to participate. This experience made me feel as if I am performing a religious act of worship.”

(Female, 26-35 years, Christian)

“[It] helps with dealing and coping with emotional distress and ways of not being affected by negative feelings. And this is good for the physical and mental health.”

(Female, 18-25 years, Christian)

“I felt that it helped me so I don’t get distracted with thoughts while I am carrying out an activity. Especially activities that require focus such as prayers.”

(Male, 36-45 years, Muslim)

“Mindfulness is important and is considered as part of Islamic practices. Imam Ali (pbuh) said: “To be mindful one hour is better that an act of worship practiced in 60 years“

(Female, 26-35 years, Muslim)
Critical success factors

Engagement of community was evident. 70% of participants were recruited directly from the community. This was attributed mainly to:

- established connection with the Arabic speaking community
- word-of-mouth and Snowballing sampling

Other success factors include:

- rapport build with participants, engaging in conversations and gaining their trust
- high level of participation in the Arabic Wellbeing Forum indicating willingness to learn about ways to improve wellbeing
- positive feedback received from participants about the Mindfulness research and the forum
Scalability and Sustainability

• **Effective, low cost** intervention

• **Uploaded** onto the SESLHD intranet and internet sites

• Suitable across a **range of settings** including:
  - individual self-management
  - community groups
  - adjunct to primary mental health care

• **Translation** into current practice:
  - **adjunct to clinical care** for Arabic speaking clients of the St George Community Mental Health Service
  - delivered as a **group program** through the Mental Health Service Recovery College and community groups
Phase 2 Research

- **Research question:** can the results be replicated in a group setting?
- **Research design:** intervention group and wait list control group
- **Participants:** high number recently arrived women from refugee/trauma backgrounds
- **Experience so far:**
  - Very engaged in the intervention
  - Longer time to understand concepts of mindfulness
  - Report intervention very helpful
  - Social aspect of group setting very helpful
Future Directions

• Discussions with CESPHN:
  – Roll out group program to Arabic and Bengali speaking communities as part of their low intensity mental health interventions for vulnerable communities
  – Train GPs
• Submitted manuscript for publication Transcultural Psychiatry
Questions

Acknowledgments

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Dr Julie McDonald, University of NSW