



## Supporting the Pre and Postnatal Emotional Wellbeing of Women from the Mongolian Community in Bayside LGA

Evaluation Report 2022

This report was prepared for Multicultural Health Service (MHS), South Eastern Sydney Local Health District (SESLHD) in 2022.

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## Summary

The Mongolian community is a new and emerging community in South Eastern Sydney that have been identified as needing health access assistance since population numbers increased in 2016. Health and community service providers identified low mental health help seeking and access to child and family services to be of great concern for the Mongolian community. To address these needs, Kogarah Storehouse, Aus-Mon Community Services and SESLHD Mental Health received funding from Bayside Clubs Grants (through Kingsgrove RSL) in 2022 to deliver a 20-week Mongolian Mothers and Children's Group. It aimed to improve the mental health, wellbeing and social contact of women in pregnancy and early parenthood while building knowledge and skills to access community and health services. Services provided information to mothers via an accredited interpreter while children engaged in play time with childcare workers.

Multicultural Health Service (MHS) in SESLHD commissioned the CPHCE at UNSW to conduct an evaluation of the group. This involved assessing the impact of the program on the participants' emotional wellbeing, knowledge of health information and skills in accessing health services. It also assessed the effectiveness of the group format in meeting the needs of the mothers in isolation and in improving their health literacy. Information about the program was gathered from the women in Mongolian through surveys and a focus group, and feedback was provided from service providers through surveys. This report outlines the project, its implementation, the outcomes, and recommendations.

The findings revealed that:

- The program reached newly arrived women through its continued open attendance to new participants.
- The information presented was useful, culturally appropriate, and easy to understand.
- The mothers' knowledge and skills were enhanced regarding child development, accessing child services and their own physical and emotional health.
- The women gained insight into free health services provided in the area.
- The group format allowed social contact between the mothers, which facilitated discussion on sensitive health topics.
- Participants were successfully referred to women's health, domestic violence and peri and post-natal mental health services.

### Recommendations

- Continue to develop strategies to improve the mental health, wellbeing, and social contact of women in the Mongolian community in pregnancy and early parenthood.
- Continue to develop strategies to improve the women's health knowledge and skills in accessing health services, especially those that are free of charge.
- Provide more information regarding access to child and family services as well as techniques to manage child emotional health.
- Promote the face-to-face group more widely to new participants, and explore additional ways to disseminate information with the community.

## 1. Background

The formation of the Mongolian Mothers and Children's Group was in response to a range of assessments with the community regarding their mental health since the population numbers increased in 2016 (ABS 2016).

In 2020, Aus-Mon conducted a survey to understand psychological wellbeing among Mongolian people in Sydney, Australia. The survey revealed that, of the respondents, 69% felt distressed and 16% had experienced suicidal thoughts whilst living in Australia (Aus-Mon 2000). These feelings were mainly attributed to financial stress, family conflict, and parenting issues. When becoming distressed, some respondents preferred to be alone, while others got advice from family members and friends. The Mongolian community identified that young women who are pregnant or in the post-natal period (child under 2 years) were those requiring the most urgent attention. It was found that many Mongolian women were not accessing health supports due to stigma and language barriers.

To further assess the needs of the Mongolian community, CPHCE conducted a needs and assets assessment with the Mongolian community in 2021, commissioned by MHS in SESLHD (CPHCE 2022). The project involved conducting consultations with community workers, service providers and community members (through a Bilingual Research Assistant). Community and health workers confirmed mental health issues were of concern for the community as indicated in the Aus-Mon surveys. Mental health service providers explained that the community has a limited understanding of mental health issues, how to access associated support services and if they were eligible. As a small community, the Mongolian community faced language barriers, financial distress, distance from family and a lack of Mongolian health workers. The level of mental health distress within the community was mild to moderate with some groups of high-level distress for those who have been unable to access services early. Private health insurance to cover mental health conditions is not considered before childbearing and, for some, there was a fear that mental health status may affect permanent residency. Perinatal services had also conducted community focus groups around disclosure of a mental illness which confirmed stigma in the community to accessing mental health services, using interpreters, and even disclosure to partners. There was differing understanding about the term 'mental health' which was associated with severe mental illness. Having a baby was shown to put some at higher risk of mental health issues, especially if there was some genetic family history. Individuals may not recognise the warning signs, be engaged in screening processes, and appear late to services and in more acute situations. In the community survey for the needs assessment, 27% of the community rated 'emotional health' as the third highest health issue of concern after 'dental health' and 'women's health' (SESLHD 2022). In the focus group consultation, mental health issues were also raised by women with children who were interested in attending a mothers' group and discussing mental health issues (CPHCE 2022).

These needs assessments and consultation findings influenced the content and delivery of the Mothers Group.

## 2. Project aims

Through the format of the Mongolian Mothers and Children's group, the project sought to:

- Improve the mental health literacy, wellbeing and social connections of women in the Mongolian community in the Bayside Local Government Area;
- Provide targeted information on pregnancy and early parenthood, and an overview of available services and programs; and
- Improve health literacy on a range of health issues including access to health and community services.

Scope of the project

- Health clinicians would present health topics to mothers to facilitate access to support services while childcare workers run activities with children.
- The group would be held at Kogarah Storehouse, utilising existing play equipment.
- The project would provide printed and translated mental health information in Mongolian.
- The project would be overseen by a Project Working Committee consisting of project leads and health representatives meeting monthly to discuss the program format and progress.

Evaluation of the program sought to assess the:

1. Reach of program to intended participants;
2. Appropriateness of content and information provided in the sessions;
3. Impact of participation on improving the emotional wellbeing of the parents;
4. Impact of participation on enhancing knowledge towards health information and skills in accessing health services;
5. Effectiveness of the Mothers and Children's group format for meeting the needs of the women in isolation.

Evaluation methods consisted of:

- Details of participants at each session;
- Individual session evaluations;
- Pre and post questionnaires of participant knowledge and skills;
- Informal participant feedback to group facilitators and organisers
- Focus group with participants; and
- Survey to service providers who presented to the group regarding follow up and referrals.

The program content evaluation methods were modified and adapted based on the ongoing monitoring, engagement, and co-design of the project with participants and organisers.

The focus group and survey results from the community, and notes from the service providers, were analysed to understand the impact of the project on participants. Findings were then presented to the Project Working Committee and further refined to enhance validity.

**Table 1: Measuring the Impact of the Mongolian Mothers and Children's Group**

| Supporting the Pre and Postnatal Emotional Wellbeing of Women from the Mongolian Community |   |   |
|--|---|---|
|  | Project plan  | Evaluation measures   |
| Aim  | Improve the emotional wellbeing of women in the Mongolian community in the Bayside local area through a mothers and children's group  |   |
| Objectives   | <p>Improve the mental health wellbeing of women in pregnancy and early parenthood</p> <p>Improve the degree of health knowledge and confidence/skills in accessing health services</p>  | <p><i>Effectiveness - impact evaluation</i></p> <ul style="list-style-type: none"> <li>- Pre and post program measures of health knowledge and access to services (survey)</li> <li>- Questions after each session for participants (survey)</li> <li>- Focus group with participants to assess impact</li> <li>- Feedback from participants, organisers and service providers of increased access</li> </ul> |
| Activities/<br>strategies  | Establish a Project Working Committee with key partners   | <ul style="list-style-type: none"> <li>- Committee is established, and group is planned and progressing.</li> <li>- Minutes of Committee meetings</li> <li>- Engagement of relevant organisation representatives including community involvement</li> </ul>   |
|  | Run a mothers and children's group for Mongolian women for up to 20 weeks with relevant health topics   | -Collect information on demographics and attendance of participants   |
|  | Engage women who would otherwise not access the group or health supports.   | <p>Reach of promotional material to target community assessed through:</p> <ul style="list-style-type: none"> <li>- Demographics of participants</li> <li>- Focus group report from women</li> </ul>  |
|  | Program content on improving wellbeing is adapted to pregnancy/early parenthood and is culturally appropriate.  | Course content is adapted based on feedback to be culturally appropriate for community for 20 weeks content.  |
|  | Wellbeing content is delivered in a way which is understandable and helpful to women.   | Feedback survey from women assessing whether content is easy to understand and relevant.  |
|  | Partnerships formed between mothers and children's group and Kogarah Storehouse, SESLHD Mental Health, Perinatal and Early Childhood Services, Women's Health, Health Promotion, Diabetes NSW, Domestic Violence Services, Marrickville Legal Centre and Legal Aid NSW. | Minutes, correspondence and presentations at group  |

### 3. Program evaluation

#### 3.1 Mothers and children's group program

Health and wellbeing topics were presented at each session based on consultations with the Committee and feedback from participants. The format of the sessions changed over the course of the program from being online (due to the COVID-19 situation) to face-to-face. Presentations were in English and interpreted into Mongolian through an accredited interpreter who was also a member of the Committee. Sometimes presentations were in Mongolian depending on the presenter. Information, regarding mental health (from the *WayAhead* translation series) and child development, was given to the women in English and Mongolian, and posted on social media/the Aus-Mon website.

An assessment of the program content, participants, reach and satisfaction occurred periodically throughout the program (see the survey in Appendix 2). Comments from the women for each session presented in the table below demonstrate that they enjoyed the sessions and learnt about mental health, and women's and children's health. Participants also found it valuable to get to know other mothers. Attendance changed regularly, although there were some regular women and children who attended. Suggestions for change from the women during the program included that they wanted greater involvement of participants and choice of a more convenient location. While the mothers attended information sessions and participated in tea and chat, the children participated in activities with a qualified childcare worker. Approximately 10-15 women attended each session with their children.

**Table 2: Mothers and Children's group program**

| Week            | Program for mothers 10.00-12.00            | Feedback from participants through surveys and feedback to facilitators   |
|-----------------|--|---|
| Week 1<br>8 Feb | <b>Topic: Anxiety</b><br>STG Mental Health | <b>Learnt?</b> "Techniques to deal with anxiety" & "I have a better understanding of depression"<br><b>Liked?</b> "It was informative", "Time to get to know the mothers"<br><b>Not liked?</b> "I prefer face to face", "We didn't get to know each other as we were online"<br><b>Information in future sessions?</b> "How to deal with young children's anxiety and mental issues", "Child rearing", "Crucial information about anxiety", "Women's mental health" |



|  |   |  |   |   |
|--|---|--|---|---|
| Week 2<br>22 Feb   | <b>Topic: Anxiety</b> (and relaxation)<br>STG Mental Health | <b>Topic: Transition to School</b><br>Rockdale Children and Families Hub                   | Feedback from facilitators indicate women that would prefer to meet in person.<br><b>Liked?</b> “It was informative”  |   |
| Week 3<br>8 March  | <b>Topic: Building Resilience</b><br>STG Mental Health      |  |   |   |
| The program moved to a face-to-face format at the Kogarah Storehouse including a charity market; free food parcels distributed to families; and morning tea. The program for children included playgroup activities such as dancing, playing and hand crafting with a facilitator/ childcare worker. |   |  |   |   |
| <b>Week</b>  | <b>Program for Mothers 10.00-12.00</b>                      |  |   | <b>Feedback from participants</b>   |
|  | <b>Health topics</b>  |  | <b>Tea and talk</b>   |   |
| Week 4<br>22 March   | Opening of the Mother’s and Children’s group program        | <b>Topic: Building Resilience</b><br>STG Mental Health                                     | Tea and talk: Greeting each other<br>Facilitator: Odontungalag<br>Information about The Kogarah Storehouse and interest free loans<br>Teacher from Mongolian School | <b>Learnt?</b> “Yes. I learned about building resilience”<br><b>Liked?</b> “Meet and talk with mums”, “The teaching quality and responsibility”<br><b>Future?</b> “Crucial information about anxiety”, “Women’s psychological health” |
| Week 5<br>5 April  | <b>Topic: Depression</b><br>STG mental health               |  | Tea and talk: <b>Living with children in Australia</b><br>Facilitator: Odontungalag   | Positive feedback to facilitators about course content  |
| Week 6<br>19 April   | <b>Topic: Positive Parenting</b><br>STG mental health       | <b>Munch and Move</b><br>children’s activities/ resources<br>Nadine Cronan<br>Siena Gamble | Tea and talk: <b>Parenting &amp; a self-help workbook from the Triple P parenting program</b><br>Facilitator: Odontungalag  | <b>Learnt?</b> “Positive parenting”<br><b>Liked?</b> “Connection with each other”, “New knowledge”<br><b>Future:</b> “Self-development”, “Mental health”<br><br>Registrations indicate new attendees continue to come.                |



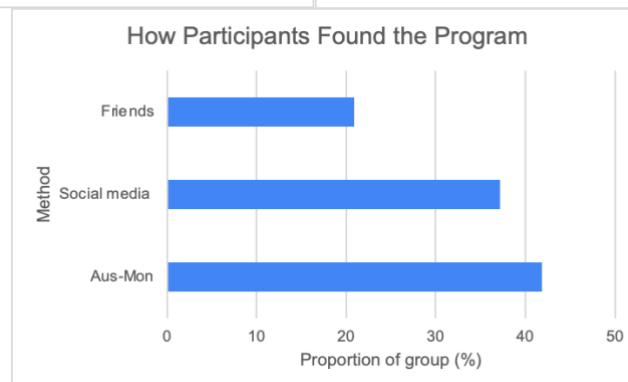
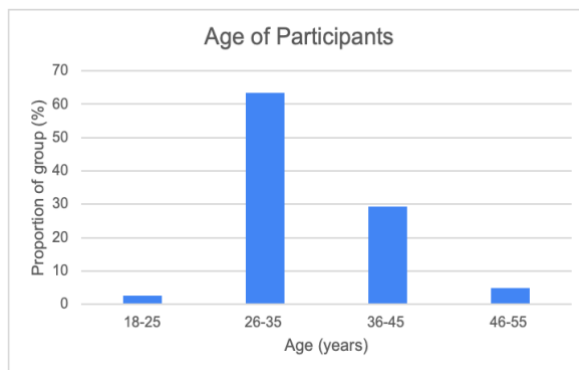
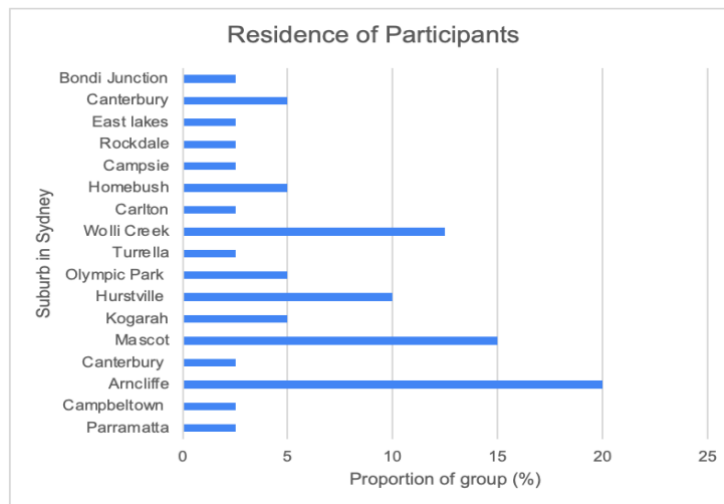
| From week 7, tea and chat occurred first according to the availabilities of the mothers |   |   |  |   |
|---|---|---|--|---|
| Week  | Tea and chat 10:00-11:00am                                | Activity (30 mins)  | Lesson (30 mins)   |   |
|   |   | 11.00-12.00pm   |  |   |
| Week 7<br>3 May   | <b>Topic: Child Development</b><br>Aus-Mon & Odontungalag | <b>Topic: Child &amp; Family nurse</b><br>Child and Family Health Nurse SESLHD with STG Mental Health & interpreter |  | <b>Liked?</b> “I liked the session”, “Everything was good”, “The most liked topic is how to communicate with children”.<br>-Feedback provided indicated that tea and chat had generated meaningful discussion.<br>-Participants were interested in information about how to communicate with children.  |
| Week 8<br>17 May  | Facilitator: Khaliun                                      | Activity: Yoga Session<br>STG Recovery and Well Being College   | <b>Topic: Domestic and Family Violence</b><br>St George Domestic Violence service<br>STG Mental Health | Positive feedback was provided to facilitators. Participants said they wanted more information about family and relationship breakdown and how women can be supported in financial crisis. These are sensitive topics that needs to be introduced through generalised information first. Focus was on legal and visa issues.  |
| Week 9<br>31 May  | Free talk<br>Aus-Mon & Odontungalag                       | <b>Topic: Legal Aid</b><br>Legal Aid and STG Mental Health  | <b>Topic: Mental Health Care for Immigrants</b><br>STG Mental Health & interpreter                     | <b>Liked?</b> “Useful information”, “topics very good”.<br><b>Future?</b> “If possible, change location as it takes me a long time to get there”.   |
| Week 10<br>14 June  | Free talk. Aus-Mon  | <b>Topic: Grief and Loss</b><br>STG mental health & interpreter   |  | <b>Learnt?</b> “Grief and loss stages”, “Many different things”; “Teaching children Mongolian alphabet”, “Ways to overcome grief”.<br><b>Liked?</b> “Compact session, delivered in short period”, “Session, tea break and comfortable venue”, “It gives opportunity for both mothers and children to socialise”, “I like everything, whenever I go here I learn new things” |

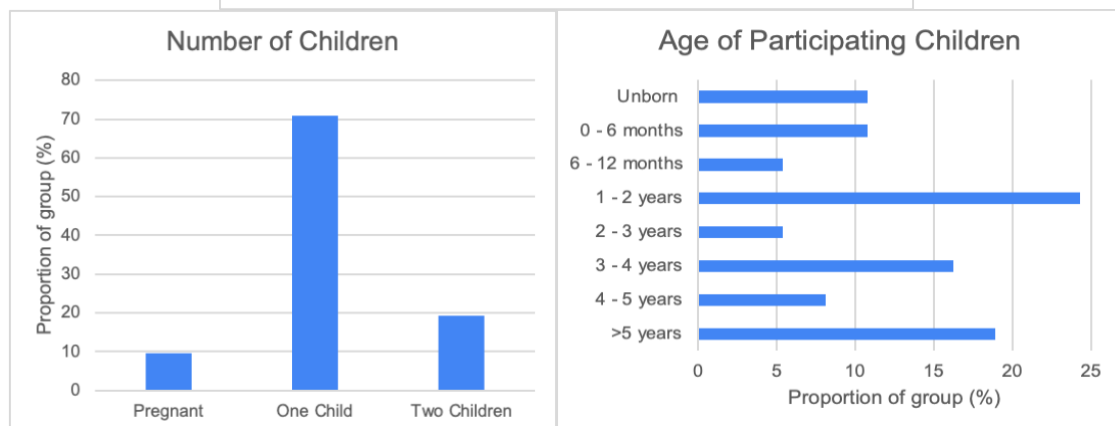
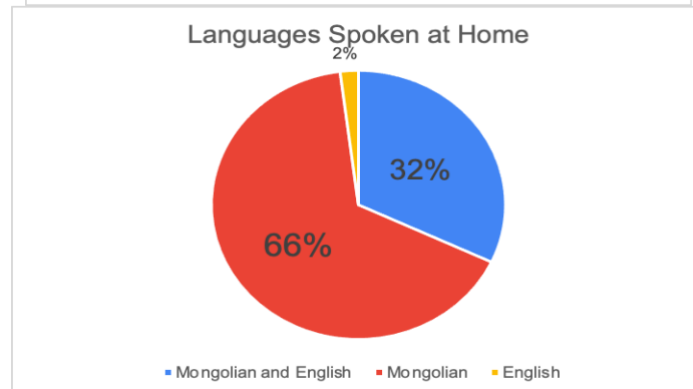
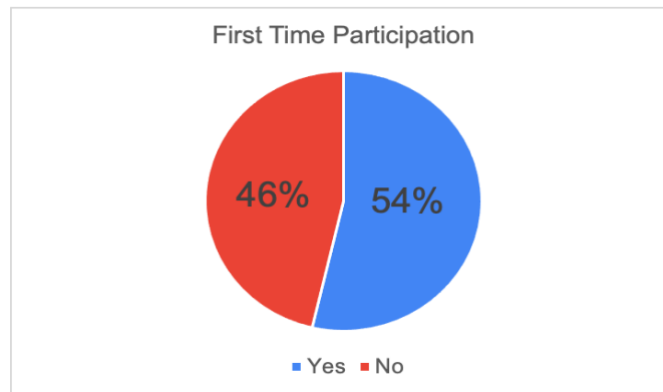
|                    |   |  |  |
|--------------------|---|--|--|
|                    |   |  | <p><b>Change</b> “I wish mothers got involved more actively”, “In order to reach more people, run the sessions after work hours, in that case many people might come”</p> <p><b>Future?</b> “Psychology”, “Information session on child psychology and junior youth behaviours”, “I would like more information on a child who is born in Australia and how to get services for them.”</p>   |
| Week 11<br>28 June | Free talk.<br>Facilitator: Odontungalag                               | <b>Topic: Breast Screen</b> and interpreter  | <p><b>Learnt?</b> “Yes, information about breast screening service”</p> <p><b>Liked?</b> “It discusses the most urgent issues,”</p> <p><b>Change?</b> “To promote to other mothers”</p>  |
| Week12<br>26 July  | <b>Topic: Healthy food on a budget</b><br>Odontungalag                | <b>Topic: Women’s Health</b><br>SESLHD Women’s health, STG Mental Health & interpreter                                     | <p><b>Leant?</b> “Yes about pelvic exercises and pelvic screening”.</p> <p><b>Liked?</b> “It was helpful to get information from the professionals”. “The information session was useful”, “Well organised, safe environment for children” , “The information session was valuable and informative”, “Presentation of the professional nurse”.</p> <p><b>Change?</b> “Registration took a long time”.</p> <p><b>Future?</b> “I want to get more information on mental health”, “Skin cancer”, “children's skin conditions,” “About infertility”.</p> |
| Week 13<br>9 Aug   | <b>Topic: Skin Care Tips</b><br>Mongolian beauty Salon & Munkhtsetseg | <b>Topic: Australian Legal System</b><br>Marrickville Legal Centre, STG Mental Health, Aus-Mon & interpreter               | <p>The facilitators reported that some women were surprised domestic violence was discussed as part of legal advice as it is a ‘very heavy topic’.</p> <p><b>Liked?</b> “Information was useful”.</p>  |
| Week 14<br>23 Aug  | Free talk   | <b>Topic: Post-natal depression</b><br>Perinatal and Infant Mental Health Service SESLHD, STG Mental Health & interpreter: |  |

|                   |   |   |  |
|-------------------|---|---|--|
| WEEK 15<br>6 Sep  | <b>Topic: Hepatitis B</b> (10 mins) Multicultural HIV Service and Mongolian Cultural Support Worker from SLHD, STG Mental Health, Aus-Mon and interpreter   | <b>Topic: Release, Respond, Rethink</b> STG Mental Health and interpreter   | <b>Liked?</b> "I like the session because it gives useful information"<br><br>Facilitators reported that the women enjoyed the session, gave great feedback and volunteered their own experiences. |
| Week 16<br>20 Sep | <b>Topic: Child development</b><br>Munkhtsetseg, Plumtree (child development services) & Odontungalag   | <b>Topic: Self Harm</b><br>STG Mental Health and interpreter  |  |
| Week 17<br>4 Oct  | <b>Topic: Children and Mother activity</b><br>Mongol School (language) & Odontungalag   | <b>Topic: Sleep and Mental Health</b><br>STG Mental Health and interpreter  |  |
| Wek 18<br>18 Oct  | <b>Topic: Diabetes in pregnancy</b><br>Katie Allison, Aus-Mon   | <b>Topic: Australian Law for Domestic Violence</b><br>Marrickville Legal Centre, STG Mental Health, Aus-Mon and interpreter |  |
| Week 19<br>1 Nov  | <b>Topic: Fitness, exercise and healthy body</b><br>Women's health<br>SESLHD & Aus- Mon   | Focus group, CPHCE, UNSW<br>STG Mental Health, Aus-Mon and interpreter  | <b>Future?</b> mental health   |
| Week 20<br>15 Nov | Graduation ceremony: feedback reflection from all attendees; closing remarks by collaborating organisations; performance by children's contortionists and Mongolian Dance group; certificate of appreciation to facilitators; Mongolian children concert and art exhibition |   |  |

### 3.2 Overall assessment of program sessions

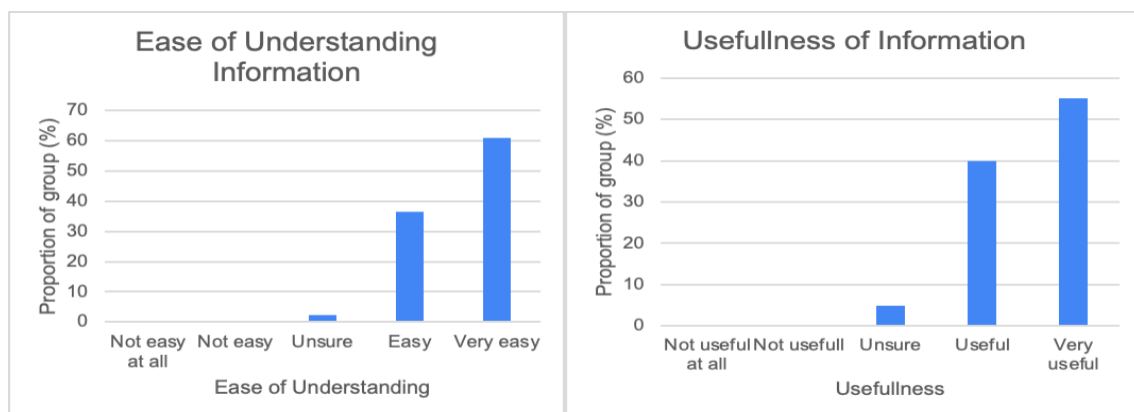
From the individual survey results taken periodically through the program and feedback from facilitators, the women attending were from the right target group with the majority living in South Eastern Sydney and being newly arrived in Australia. Most of the women had attended the session once and had mainly heard about the group through Aus-Mon. The women usually brought one child in the age category of 1-2 years.





### Understanding and usefulness

The survey responses revealed approximately 95% of women found the information easy to understand and useful. The participants also commented they liked the quality and professionalism of the speakers. The length and timing of the group sessions were also continually monitored to ensure they met the needs of the women.



### **Mental health knowledge and skills**

The individual surveys indicate increased understanding of depression, skills to deal with anxiety and how to build resilience with participants wanting to know more about the topics. Participants also learnt about women's health and health promotion techniques.

### **Women's health and screening**

The women indicated they gained important information about accessing women's health services and the most urgent health concerns for which to be screened.

### **Children's health**

Individual surveys revealed women wanted to know more about children's anxiety and behaviour which was covered later in the program with the child and family nurses. The participants also commented that they learnt about positive parenting techniques.

### **Legal advice and domestic violence**

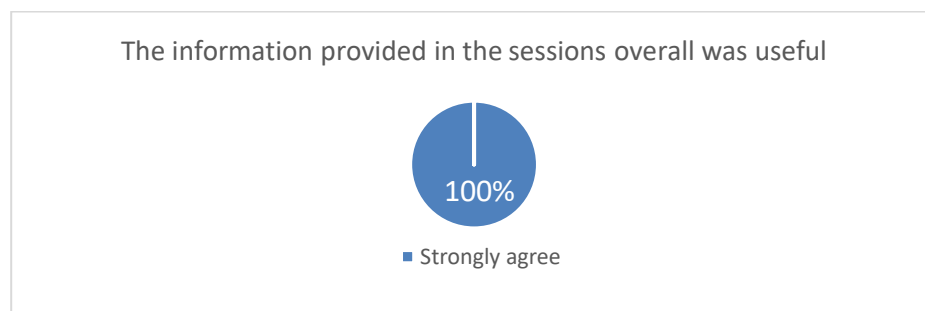
Information was provided about family and relationship breakdown and how women can be supported in financial crisis and with visa issues. Positive feedback was provided to facilitators about the topic of legal and domestic violence but that it was a sensitive and heavy topic that needed to be introduced through general information first.

### **Mothers and children's group format**

Participants reported that they liked the format of sessions as they were able to get to know each other. They also commented that the children could also socialise with each other in a safe and comfortable environment.

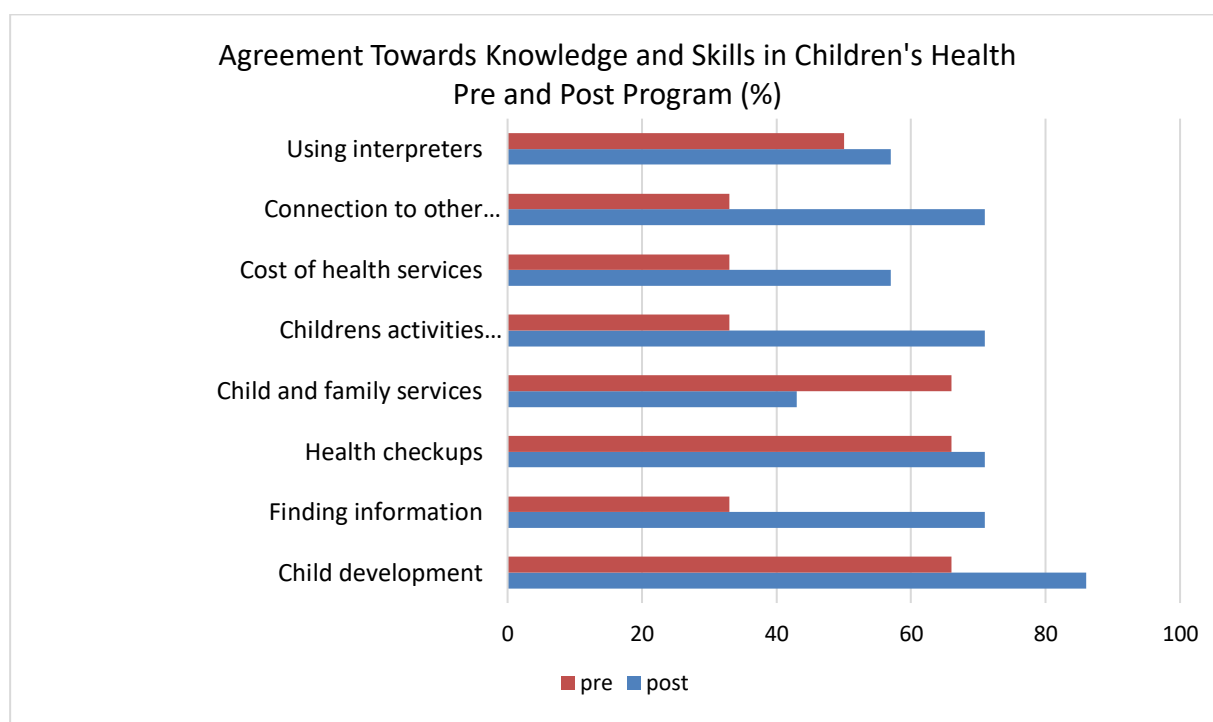
## **3.3 Pre and post evaluation**

An assessment of the knowledge and skills generated in child and mother's health was conducted after the first two sessions in the program and at the conclusion of the program (at the graduation). The women who completed the pre and post survey assessments were not the same, reflecting the changing nature of the group structure. Small numbers of participants (pre and post, n=7) mean generalisations cannot be applied to everyone who attended the sessions, but results provide some indication of the positive program impact. At the conclusion of the program, 100% of participants strongly agreed the information presented in the program sessions overall were useful.

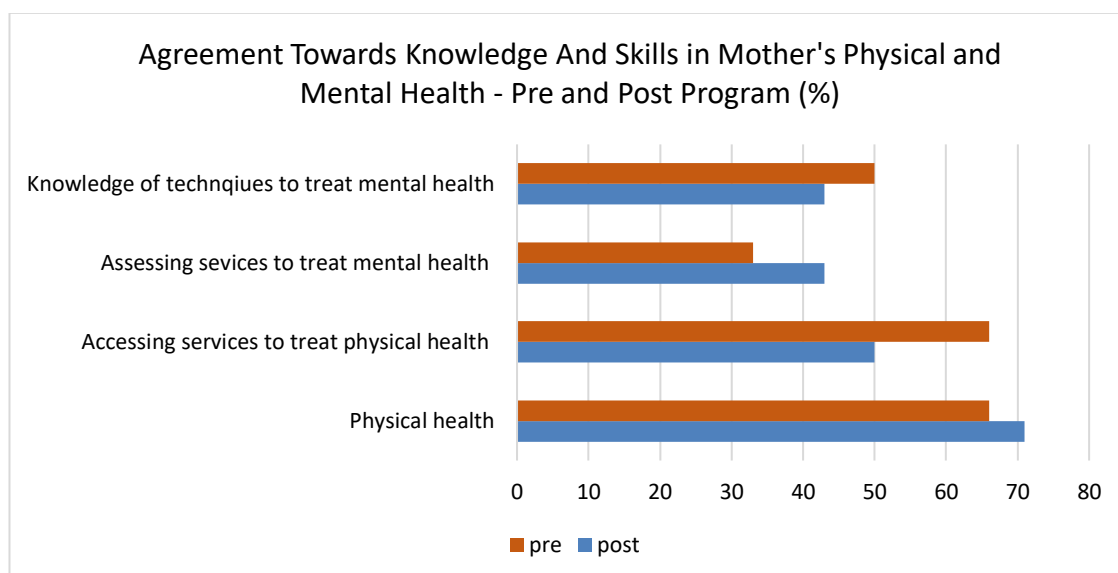


In relation to child health, the surveys indicated that participants' overall knowledge and skills improved in the use of interpreters, knowledge of child development, connection to

other mums and families, understanding the cost of health services, children's activities/ support groups, health check-ups and finding health information. Only the area of understanding about accessing child and family services could be improved.



Regarding knowledge and skills in the women's health, there was increased understanding about physical health and access to services for mental health issues. Less agreement was found with accessing services to treat physical health and knowledge of techniques to assist when feeling emotionally unwell.





### 3.4 Focus group with women

A focus group was organised to assess the impact of participation in the program on: emotional wellbeing, health knowledge and skills in accessing services; reducing social isolation; and recommendations. A small group of women attended the focus group after filling in a consent form for their voluntary participation. Participants were notified about the occurrence of the focus group on social media and at the prior session.

Results indicated the importance of the group for reaching women who are isolated, improving their mental health. and providing information in their language especially for those who do not speak English.

*This is my first time coming here. I saw the post on the Facebook all the time. I feel this is the only community who's actually doing something for the mothers. Because I know for a fact that Mongolian mothers are really vulnerable here, especially who don't speak English. So I think it's really good for them to get information in Mongolian language, especially about their mental health and domestic violence.*

The group format provided support for the women to meet each other in a safe environment and to form meaningful connections.

*After each session there is time women to come together and talk, and to have more deep, more bonding and respect to each other and love each other and to know each other better; they open up more. And just outside, if I met one of them, because we are here and we know each other. Now, unlike before, we have a deeper friendship.*

Participants discussed the importance of information being provided in the group regarding child health and developmental screening checks.

*On Facebook, information about screening, I got the information and after that I got a referral for the screening ... booking for one month free. I got that valuable information for my three-year-old which is important, and he just started to talk in Mongolian language, and we were worried about his speaking. We got it, it was very good.*

The group also provided information on how to access the free health services that are available.

*I didn't even know there is free screening and I need to reach out to them. Sometimes I think about getting this information, but it's expensive, and I don't have much money to spend and then I find out that clinics offer free services. That's very helpful.*

### 3.5 Connections with health services

Contributors to the group sessions included a range of health and community services that provided ways to increase the women's knowledge and skills in accessing services. Services included:

- St George Mental Health
- St George Recovery College
- Pre and post-natal mental health service
- Better Connected (disability care and children's support)

- Women's health nurse, SESLHD
- Child and family health nurse, SESLHD
- St George Domestic Violence service
- Domestic violence service, The Kogarah Storehouse
- Breastscreen
- Diabetes NSW
- Hepatitis B
- Marrickville Legal Centre/ Legal Aid
- Mongolian School
- Munch and Move
- Plumtree (child development services)

### Follow up with services

Some service providers were contacted after they presented to the group to assess if there was any follow up with the Mongolian community. Follow up occurred through email and informally. Feedback from service providers was positive with follow up referrals in all areas. Services also made recommendations that there should be more promotion of health activities beyond the group which reinforces the need for other ways to reach out to women and the community. Referrals to services were assessed in the following areas:

**Table 3: Service provider presentations, feedback and follow up**

| Speaker organisations                     | Follow up or questions   | Nature of queries  | Increased access?  | Enhance future access?  |
|---|--|--|--|---|
| Aus-Mon                                   | Yes  | Domestic violence related  |  |   |
| Child and family health, SESLHD           | Yes, 3 referrals   | ADHD concerns for children   |  |   |
| Breastscreen                              | Yes, on the day and appointments booked. Small group on the day was appropriate for asking questions and connecting. | Breast awareness and screening, free screenings                            |  | More approaches to educate and empower women beyond the group format                              |
| Women's health nurse, SESLHD              | A few women  | Interpretation of results, future action and requests for health check ups | Women have used services for 4 years including cervical screening, postnatal checks, contraception advice and symptoms requiring a referral and doctor's review. Women sometimes think the service can provide medical treatment and referral for ultrasounds which needs to be clarified. | Women are well informed by Aus-Mon  |
| St George Domestic Violence service       | Yes  | Questions about domestic violence and visa issues                          | Data not available   | Promote access to free information LawAccess NSW 1300 888 529 and TIS 131450                      |
| Pre and post natal mental health services | Yes  | Questions about diagnosis of postnatal anxiety and depression.             |  | Provide more translated perinatal mental health resources and culturally sensitive presentations. |

Partnerships with services have continued and will be fostered in future mothers and children's groups.

## 4. Conclusions

The Mothers and Children's group provided a safe and welcoming environment for newly arrived Mongolian women and children to Australia to discuss women's mental health and child and family health. 100% of women surveyed at the completion of the program found the information useful and their knowledge and skills were enhanced regarding child development, accessing child services and their own physical and emotional health.

The information presented was useful, culturally appropriate, easy to understand and presented in the Mongolian language through presenters or through an interpreter and translations. The mothers and children's format allowed social contact with the other mothers in the group so sensitive topics could be easily discussed and child socialisation promoted. Service referrals were made to participants regarding women's health, child development support, domestic violence, and peri and post-natal mental health services.

As a new community, the Mongolian mothers and children have needs which were addressed through the group but continue to exist. To continue to improve the health and wellbeing of the community, it is recommended that the group continues to be run to improve the mental health wellbeing and social contact of women in pregnancy and early parenthood. This includes improving health knowledge, and developing skills in accessing health services especially those services that are free of charge. Further techniques and strategies could be provided to women in managing mental health especially when unwell. More information could be promoted about accessing child and family services as well as techniques to manage child emotional and behavioural health through contact with child and family nurses and child development support agencies. Information discussed could also be promoted more widely with the community to compliment the face-to-face format of the group.

## 5. References

Australian Bureau of Statistics (2016) *3412.0 - Migration, Australia, 2014-15* 2016

Aus-Mon (2000) *Mental Health Survey Report of Mongolians in Australia 2020*, Aus-Mon Community Services & Development Inc.

CPCHE (2022) *SESLHD Mongolian Community Needs and Assets Assessment*, Report 2022, CPCHCE, UNSW and SESLHD.

SESLHD (2021) *Mongolian Health Needs Survey Report: Mongolian Community in South Eastern Sydney*.

## Appendix 1: Banner

Supporting the Pre and Postnatal  
Mental Health of Women  
from the Mongolian Community  
in Bayside LGA

### Mongolian Mothers & Children Group



#### Organisers:



Funding and supporting organisation: Multicultural Health Service  
Duration: 22/01/2022 - 25/10/2022 (Fortnightly)

#### This project is supported by:

- Better Connected
- Munch and Move
- Early Childhood Support team - Cross culture
- Mongolian School
- Plumtree
- Women's Health Clinics at Rockdale - Community health centre
- Early childhood - Children and family program
- Early Childhood - Early parenting program
- Ozzz Octagon
- Yogis

#### Surveys:

General



After each session



## Appendix 2: Individual session survey

### Монгол ээжүүдэд зориулсан хөтөлбөрт үнэлгээ хийх судалгаа Individual Mongolian mothers' group session evaluation

Хөтөлбөрийн огноо .....  
Date of the mothers' group session

#### Хүн амзүйн мэдээлэл Demographic information

- Таны нас? 18-25 26-35 36-45 46-55 56-65  
Age in years?
- Та аль дүүрэгт амьдардаг вэ?  
In which suburb do you live?  
*Уолай Крик /Рокдэйл /Когарах /Арнклиф / Рандвик /Маскот /Хомбуш / бусад*  
.....  
*Wollie Creek/ Rockdale/ Kogarah/ Arncliffe/ Randwick/ Mascot/ Homebus/ other.....*
- Гэртээ ямар хэлээр ярьдаг вэ?  
Language spoken at home?  
*Монгол / Англи /Монгол болон Англи /бусад .....*  
*Mongolian/ English / Mongolian and English / other.....*
- Та Австральд хэдэн жил амьдарч байна вэ?  
How many years have you been living in Australia?  
0-3 4-5 6-8 9-12 13-15 16 ба түүнээс дээш  
and over

#### Бүлгийн талаарх санал асуулга Playgroup details

- Анх удаа оролцож байна уу Тийм /Үгүй  
First time attending? No/Yes
- Ээжүүдийн хөтөлбөрийн тухай хаанаас сонссон бэ?  
How did you hear about the mothers' group?  
*Найзууд Нийгмийн сүлжээ AusMon бусад .....*  
*Friends Social media AusMon other .....*
- Таны хэдэн хүүхэд оролцож байна вэ?  
Number of children attending? 1 2 3
- Оролцож буй хүүхдийн нас  
Age of child/ren attending?  
*Жижгэмсэн 0-6 сар 6-12 сар 1-2 нас*  
*2-3 нас 3-4 нас 4-5 нас*  
*In vitro 0- 6mths 6-12mths 1-2 years*  
*2-3 years 3-4 years 4-5 years*

**Хөтөлбөрийн хэрэгцээт байдлын талаарх асуулга**  
**Playgroup usefulness**

9. Мэдээлэл ойлгоход хэр хялбар байсныг үнэлнэ үү?  
 Please rate the degree to which the information was easy to understand?

|                |            |          |        |            |
|----------------|------------|----------|--------|------------|
| 1              | 2          | 3        | 4      | 5          |
| Огт хялбар биш | Хялбар биш | Мэдэхгүй | Хялбар | Маш хялбар |
| Not very easy  | not easy   | unsure   | easy   | very easy  |

10. Уг хөтөлбөрөөр олгосон мэдээлэл хэр хэрэгцээтэй байсан бэ?  
 How would you rate the usefulness of the information given?

|               |          |          |          |                 |
|---------------|----------|----------|----------|-----------------|
| 1             | 2        | 3        | 4        | 5               |
| Огт хэрэггүй  | Хэрэггүй | Мэдэхгүй | Хэрэгтэй | Маш их хэрэгтэй |
| Not very good | not good | unsure   | good     | very good       |

11. Танилцуулсан мэдээллээс ямар нэгэн шинэ зүйл сурсан уу?  
 Did you learn anything new from the presentation/information presented?

.....

12. Ээжүүдийн хөтөлбөрийн юу нь таалагдсан бэ?  
 What did you like about the mothers' group?

.....

13. Ээжүүдийн хөтөлбөрийн юу нь танд таалагдаагүй вэ?  
 What didn't you like about the mothers' group?

.....

14. Ээжүүдийн хөтөлбөрийн юуг нь та өөрчилмөөр байна вэ? (цаг, илтгэгч, сэдэв, зохион байгуулах хэлбэр)  
 What would you change about the mothers' group? (timing, speakers, topic, format)

.....

15. Танд ээжүүдийн хөтөлбөрөөс цаашид олох авахыг хүсч буй мэдээлэл бий юу?  
 Are there any information you would like provided in future mothers' groups?

.....

Энэхүү асуулгыг бөглөсөнд баярлалаа. Хэрвээ танд өөр мэдээлэл хэрэгтэй бол бидэнтэй  
 0420 663 018, 0415 674 556 дугаараар болон [ausmon.cadi@gmail.com](mailto:ausmon.cadi@gmail.com) имэйлээр холбогдоно уу.  
 Thank you for completing this questionnaire. If you would like any further information, please contact Aus-Mon Community  
 Services & Development Inc. on 0420 663 018 and 0415 674 556, or send us an email via [ausmon.cadi@gmail.com](mailto:ausmon.cadi@gmail.com).

## Appendix 3: Overall program assessment survey (pre and post sessions)

### *Evaluation of Mongolian mothers' group 2022 (beginning)*

This questionnaire is designed to understand about you and your family's health, and your experience of the Mongolian mothers' group. All information is confidential, and your name will not be recorded. Your decision whether to fill in this form will not affect your participation in the playgroup.

#### **Participant code:**

Please create a participant code for your responses using the questions below. This will let the organisers compare your answers between surveys, while maintaining your privacy.

What are the last two letters of your first name: .....  
What are the last two letters of your family name: .....  
What is the last number of the year you were born: .....  
For example, John Smith born in 1979 is: HN TH 9  
Your participant code: .....

#### **Some questions about you, please select the correct answer**

1. Age?  
18-25 yrs   26-35 yrs   36-45 yrs   46-55 yrs   56-65 yrs
2. In which suburb do you live?  
Wolli Creek/ Rockdale/ Kogarah / Arncliffe / Randwick / Mascot / Homebush/  
other .....
3. Language Spoken at Home?  
Mongolian/ English / Mongolian and English / other .....
4. How many years have you been living in Australia?  
0-3   4-5   6-8   9-12   13-15   >16
5. What is the highest level of education you completed?  
Primary school   High school   TAFE or College   University
6. Number of children at playgroup?                      1                      2                      3
7. Age of child/ren attending (approximately)  
I am pregnant   0- 6mths   6-12mths   1- 2 years  
2-3 years   3-4 years   4-5 years



**Some questions about you and your family's health, and accessing services:**

| How much do you agree or disagree with the following statements? <i>select your answer</i>                               |                   |          |                            |       |                |            |
|--|-------------------|----------|----------------------------|-------|----------------|------------|
| <b>My child/children</b>   |                   |          |                            |       |                |            |
| 1. I have good knowledge about my baby/child's development.  | Strongly disagree | Disagree | Neither agree nor disagree | Agree | Strongly Agree | Don't know |
| 2. I know how to get information about my child/children's health.   | Strongly disagree | Disagree | Neither agree nor disagree | Agree | Strongly Agree | Don't know |
| 3. I know where to go to get health check-ups for my child/children.   | Strongly disagree | Disagree | Neither agree nor disagree | Agree | Strongly Agree | Don't know |
| 4. I have good knowledge about child and family services in my area and how to access them                               | Strongly disagree | Disagree | Neither agree nor disagree | Agree | Strongly Agree | Don't know |
| 5. I have good knowledge about baby/children's activities and support groups   | Strongly disagree | Disagree | Neither agree nor disagree | Agree | Strongly Agree | Don't know |
| 6. I have good knowledge about the cost of health services including those that are free and covered by health insurance | Strongly disagree | Disagree | Neither agree nor disagree | Agree | Strongly Agree | Don't know |
| 7. I feel connected to other mums and families in my community.  | Strongly disagree | Disagree | Neither agree nor disagree | Agree | Strongly Agree | Don't know |
| 8. I know how to use interpreters if I need them when using services.  | Strongly disagree | Disagree | Neither agree nor disagree | Agree | Strongly Agree | Don't know |
| <b>My health</b>   |                   |          |                            |       |                |            |
| 9. My overall physical health is good  | Strongly disagree | Disagree | Neither agree nor disagree | Agree | Strongly Agree | Don't know |
| 10. I know how to access services to check/treat my own physical health  | Strongly disagree | Disagree | Neither agree nor disagree | Agree | Strongly Agree | Don't know |
| 11. I know where to go for help if my emotional health becomes unwell  | Strongly disagree | Disagree | Neither agree nor disagree | Agree | Strongly Agree | Don't know |
| 12. I know some good techniques to assist me if I feel emotionally unwell  | Strongly disagree | Disagree | Neither agree nor disagree | Agree | Strongly Agree | Don't know |
| 13. Any further comments   |                   |          |                            |       |                |            |
| .....  |                   |          |                            |       |                |            |

**Thank you for completing this questionnaire.**

**If you would like any further information, please contact.....**

## Appendix 4: Focus group with community

### Mongolian Mothers' Group 2022- Focus group question guide for mothers

#### Overall experience

1. What has been your overall experience with the mothers' group? *[For your children? For you?]*
2. How effective has the mothers and children group format been for meeting your health needs and the needs of your family? *[combination of talks, mothers meet up and children play]*
3. Which health talks have been most useful? Why?

#### Child and family

4. What are some of the benefits for your family in attending the mothers group? *[eg. Dealing with behaviour of children? Being attentive to children's needs. Healthy physical and emotional development of children? Readiness for school?]*

#### Connection with others

5. What has been the impact of participation in the mothers' group and connecting with others? *[Any friendships formed? Information shared? Learn from each other? Any examples?]*

#### Accessing services

6. To what extent has your knowledge of health information / health services changed? Have you used any of the services discussed? *[What has been your experience?]*
- 7.

#### Emotional health

7. What has been the impact of participation in the program on your emotional wellbeing and mental health? *[Any topics particularly helpful? Eg. anxiety, depression]*
- 8.

#### Future and further assistance

8. How do you think the mothers group program could be enhanced in the future? *(Was there anything you found that the group couldn't assist with or could have done better?)*
9. Anything else you would like to add? Future groups/activities? Feedback?