

# Subgroup Report

## Tigrinya Speaking Newcomer Women

This report summarizes data from the Tigrinya-speaking HEAL subgroup. Delivered in partnership with Art + Health implemented from June 2024 to February 2025 with a total of 6 participants.



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### Participant Profile

All participants identified as heterosexual women of Black-African origin. 4 women were from Ethiopia and 2 from Eritrea.

All of the women were in rental housing. 5 women voiced that they did not have sufficient funds to meet daily needs (e.g. nutritious food, paying rent, buying clothes, buying medicine etc.) while 1 preferred not to answer.

4 women reported their income less than \$14,999, 1 woman reported \$30,000 to \$34,999, and 1 woman did not disclose her income.

50% of the participants were permanent residents, 17% refugee claimants and Non-status, and 33% who did not disclose their immigration status.

Two women were in the age group 25-44, and two were 45-64. One woman did not disclose any information relating to their age.

17% of the participants were working full-time (35 or more hours per week). 33% of participants were unemployed, but looking for work.

17% of participants were students attending full-time school and not working, and 17% of participants did not disclose their employment status.

### Referrals and Support Needs

The women in the Tigrinya speaking HEAL subgroup were all in vulnerable circumstances requiring English language learning classes, employment support, and financial support to meet their day to day needs.



# Quantitative Findings

## Tigrinya Speaking Newcomer Women

Quantitative data were collected using pre and post-program surveys. It measured changes in participants' self-efficacy and knowledge of available support services using a 5-point Likert scale. Results reflect group averages and overall outcomes.

### Self-Efficacy:

- 34% of participants noted an improved score in a sense of belonging in their community. 40% of participants noted a greater sense of safety and trust in their current relationships in the post-program survey.
- Post-program, 15% more participants indicated low self-esteem about themselves. Anxiety from past traumas decreased by 10%, whereas stress due to relationships increased by 4%.
- Fewer participants indicated being able to address violence in their lives, with feelings of helplessness decreasing by 9% in the post-program survey.

### Knowledge of Rights & Services:

- Understanding of rights and services in Canada decreased by 24% in the post-program survey, along with a 33% decrease in participants who are aware of support services and resources that they can access in their community.
- There was an 18% increase in participants taking action to access support services and resources to improve their situation.

## Impact Summary

The program significantly enhanced participants' knowledge, skills, and well-being. All participants reported increased understanding of their rights, available services, and mental health strategies. Data indicate that the program had a positive impact on participants' well-being, social connections, and satisfaction with the program. Key outcomes:

- In the post-program survey, fewer participants are blaming themselves for things that have happened.
- There was a 12% decrease in participants who found it challenging to communicate their needs, and a 21% decrease in those trying to view their situation more positively.

## Takeaways

The quantitative data show that the participants experienced greatest improvement in their sense of belonging, and safety and trust in their current relationships. Many still struggled with ongoing mental health and housing insecurity.

*"I feel more confident and kinder to myself. I am learning to take care of myself and prioritize my mental health, which makes me feel better about who I am. I have faith thing always works out for me." – Participant*



# Qualitative Findings

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Qualitative data were collected through pre- and post-program surveys, in-program feedback surveys, focus group discussions, and follow-up interviews at 3 and 6 months. The purpose was to explore participants' experiences of the HEAL program.

**Knowledge & Wellbeing:** The women have learned the benefits of prioritizing self-care and self-regulating by pacing themselves when faced with challenging situations in life. The breathing exercises and the walks in nature were helping them to stay calm and balanced. They have developed a positive mindset and learned about different tools and techniques, which were noted to be helpful to manage stress and anxiety in life.

*"I know about new community, we have bigger community, I only knew the church community, now I meet these women (HEAL team and participants) its bigger, they are professionals, they help me."- Participant*



**Community and Connection:** The program helped to address participant state of isolation due to being in shelters and having limited English literacy. Meeting other women who spoke Tigrinya and were going through similar challenges, helped to create a support system. HEAL helped to create a community where they could share and learn from each other's experience.

*"Since completing the program, I've noticed improvements in my mental health. I feel more peaceful and hopeful about my future. I'm learning to be patient with myself and take small steps to improve my wellbeing. Even when things are hard, I feel proud of the progress I've made."*  
- Participant

**Building Healthy Relationships:** Initially, participants defined healthy relationships as understanding and good communication with each other. Post program, participants shared that they are deeply isolated, with little to no connections in the country. Their focus is on staying strong, settling, and building stability for their children. Some shared that they've learned the importance of boundaries and that healthy relationships include support—whether near or far.

## Takeaways

Participants shared improved knowledge and wellbeing, as they learned how to prioritize self-care and developed techniques to deal with stress. They shared being able to build community and connection, along with developing and better understanding healthy relationships.

*"I have been getting good at self care, I do facial at home, take care of my physical and mental care as much as I can. - I go to long walks listening to music, gospel and motivational speakers in Tigrinya and English. I am slowly getting into Yoga too."* - Participant

# Future Considerations

## Tigrinya Speaking Newcomer Women



### Addressing Economic Insecurity and Basic Needs

Most participants reported limited financial resources and challenges meeting basic needs such as food and housing. Providing financial navigation, employment readiness support, and referrals to income assistance and food security programs can help reduce stress and enable fuller participation in wellbeing-focused activities.

### Supporting Newcomer Women with Complex Immigration Experiences

Participants included permanent residents, citizens, refugee claimants, and non-status women, which contributed to fear, uncertainty, and hesitation in accessing formal services. Programs that reinforce confidentiality, education on human rights, and offer culturally sensitive guidance on navigating legal, settlement, and safety supports are essential and helpful for mixed immigrant status groups.

### Expanding Trauma-Informed and Body-Based Wellbeing Practices

Participants reported reduced stress and improved emotional regulation using breathing exercises, nature walks, and engaging in traditional buna coffee ceremonies. Embedding trauma-informed, body-based, and non-verbal practices within programming can support emotional safety for women who may find verbal disclosure difficult due to trauma, cultural norms, or language limitations.

### Reframing Healthy Relationships Through a Settlement and Safety Lens

Participants' understanding of healthy relationships expanded to include boundaries, support, and personal safety, while recognizing their current priorities of survival, settlement, and caregiving. Program content should continue to frame healthy relationships in ways that reflect participants' realities, emphasizing self-worth, harm reduction, boundary-setting, and accessing support rather than pressuring them to form new relationships.

### Sustaining Trust Through Consistent and Long-Term Engagement

Participants' knowledge of their rights and available services grew gradually, underscoring the importance of time and consistent relationships. Longer-term programming, follow-up sessions, and stable facilitator support can reinforce learning, build trust, and sustain progress as participants navigate ongoing settlement challenges.



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Access Alliance Multicultural Health and Community Services  
[arts@accessalliance.ca](mailto:arts@accessalliance.ca)

Art + Health  
<https://arthealth.ca/>

