



From vulnerability to resilience: Strengthening the mental health of Muslim migrant families in Auckland, New Zealand

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Abstract

The high suicide rate in Auckland, New Zealand, poses a significant challenge for Muslim migrant families facing cultural pressures. This community Service program aims to strengthen their mental health through a structured series of workshops and psychoeducation sessions. The initial workshop focused on the basic understanding of mental health, risk factors for psychological disorders, and the family's role in resilience. Subsequent psychoeducation sessions presented practical strategies for stress management, emotion regulation, and coping mechanisms aligned with the cultural and religious values of the participants. Evaluation results demonstrated a significant increase in participants' understanding of mental health and awareness of the risks of psychological disorders. Furthermore, participants showed improved ability to apply stress management strategies. This program contributes to enhancing the psychological well-being of Muslim migrant families while strengthening support systems within the community. The success of this activity is expected to serve as a foundation for broader and more sustainable similar interventions.

Keywords: Migrant families; Suicide; Muslim families

Dari kerentanan menuju ketahanan: Penguatan kesehatan mental keluarga muslim migran di Auckland, New Zealand

Abstrak

Tingginya angka bunuh diri di Auckland, New Zealand, merupakan tantangan signifikan bagi keluarga muslim migran yang menghadapi tekanan budaya. Program Pengabdian kepada Masyarakat (PkM) ini bertujuan memperkuat kesehatan mental keluarga muslim migran melalui serangkaian workshop dan sesi psikoedukasi yang terstruktur. Workshop awal berfokus pada pemahaman dasar kesehatan mental, faktor risiko psikologis, dan peran keluarga dalam resiliensi. Sesi psikoedukasi berikutnya menyajikan strategi praktis manajemen stres, regulasi emosi, dan mekanisme koping yang selaras dengan nilai budaya dan agama peserta. Hasil evaluasi menunjukkan peningkatan signifikan dalam pemahaman peserta mengenai kesehatan mental dan kesadaran akan risiko gangguan psikologis. Selain itu, peserta menunjukkan kemampuan yang lebih baik dalam menerapkan strategi pengelolaan stres. Program ini berkontribusi pada peningkatan kesejahteraan psikologis keluarga muslim migran sekaligus memperkuat sistem dukungan di dalam komunitas. Keberhasilan kegiatan ini diharapkan menjadi dasar bagi intervensi serupa yang lebih luas dan berkelanjutan.

Kata Kunci: Keluarga migran; Bunuh diri; Keluarga muslim

Contributions to
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1. Introduction

New Zealand is an island country in the southwest Pacific Ocean, with a population predominantly of European descent. Although Christianity remains the main religion, there has been a significant increase in the non-religious population and adherents of non-Christian faiths. The growth of religions such as Hinduism, Islam, and Sikhism has been driven by immigration from Asia, which has contributed to the increasing diversity of beliefs.

This diversity is also reflected in the culture of the indigenous population. The Māori people, the original inhabitants of New Zealand who arrived around 1300 AD from Eastern Polynesia, possess a rich cultural heritage and exert a significant influence on modern life. The official recognition of the *Te Reo Māori* language and including Māori culture in national events exemplify this influence. The Treaty of Waitangi guarantees Māori rights, and they have active representation in Parliament. Additionally, the Māori economy is thriving, supported by sectors such as tourism and industry.

In this rich religious and cultural diversity, organizations such as the Pimpinan Cabang Istimewa Muhammadiyah (PCIM) New Zealand become increasingly relevant. Although Muhammadiyah is less well-known among New Zealanders, both non-Indonesian Muslims and non-Muslims, the organization is familiar to Indonesians living there. PCIM New Zealand, established in Auckland on January 22, 2023, aims to promote Muhammadiyah's da'wah and social activities, emphasizing inclusive Islamic values such as peace, tolerance, and humanity (Hairit, 2020). PCIM New Zealand fosters interfaith understanding, introduces Islam to the broader community through social and educational initiatives, and helps Indonesian Muslims connect with their religious identity.

However, the Muslim community in New Zealand faces ongoing challenges, including increased Islamophobia and discrimination following the 2019 Christchurch attacks (Besley & Peters, 2020; Poynting, 2020; Pratt, 2010). This tragic event heightened public awareness of the discrimination experienced by Muslims (Boamah & Salahshour, 2022; Salahshour & Boamah, 2020). Surveys indicate that over 50% of Muslims in New Zealand face discrimination, particularly women who wear hijabs. A general lack of public understanding of Islam exacerbates these issues (Ash et al., 2020; Rahman, 2022). Additional challenges include low Muslim participation in national leadership, limited positive media representation (Drury & Pratt, 2021), and opposition to LGBT practices perceived as incompatible with Islamic values (Fenaughty et al., 2023; Lisy et al., 2022).

Furthermore, the high suicide rate in Auckland is a serious concern (Barak et al., 2020; Snowdon, 2020; Stubbing & Gibson, 2019). This underscores the urgent need for improved mental health support, especially for vulnerable migrant families. These families often face cultural differences, loneliness, and economic hardships (Chang, 2019; Dut, 2021; Sangalang et al., 2019; Shah & Lerche, 2020).

Mental health has now become a key focus at the global level, recognized as essential for fostering individuals capable of functioning optimally. Efforts to improve mental health encompass psychological, moral, and religious approaches (Kao et al., 2020; Lucchetti et al., 2021; Malinakova et al., 2020). These initiatives provide practical training and support to help individuals manage stress and enhance their well-being.

This community service activity focuses on strengthening the mental health of migrant families in Auckland, New Zealand. Migrant families, especially Muslim ones, often encounter additional challenges in adapting to new cultures and environments, such as social isolation, economic pressures, and difficulties maintaining their cultural and religious identities (Chan, 2020). Therefore, developing resilience and accessing resources to reduce mental health stigma within their communities is crucial.

2. Method

This community service targets non-economic partner groups and focuses on mental health issues, specifically addressing New Zealand's alarmingly high suicide rate. Structured stages are designed to have a significant impact on community service partners. The program to strengthen mental health among migrant families in Auckland was developed in response to New Zealand's high suicide rate, particularly among migrant communities. It aims to enhance mental well-being through psychoeducational interventions that increase understanding and develop skills for maintaining mental health. Psychoeducation is a widely used and effective strategy in educational initiatives (Wardani et al., 2022). Through this activity, it is hoped that migrant families will be better prepared to face psychosocial challenges such as cultural pressures, adaptation difficulties, and limited access to mental health services.

The activity was conducted in two sessions at the Beach Haven Community House in Auckland, New Zealand. The first session took place on November 29, 2024, with the theme of mental health in Muslim migrant families. The second session was held on December 6, 2024, focusing on psychoeducation related to the mental health of Muslim migrant families. These stages of activity expected to enhance partner empowerment, particularly by increasing their knowledge. This increase in knowledge is measured through a comprehension test on mental health management consisting of five items.

3. Results and Discussion

3.1. Mental health workshop for Muslim migrant families

The initial mental health workshop, specifically tailored for Muslim migrant families residing in Auckland, New Zealand (as illustrated in Figure 1), served as the foundational activity of this initiative. Recognizing the unique stressors and challenges often faced by migrant communities, the workshop curriculum was carefully designed to address key aspects of mental well-being. The sessions delved into the multifaceted nature of mental health, presenting both the theoretical underpinnings and relevant empirical research findings. Furthermore, the workshop provided a comprehensive overview of various forms of mental health disorders, aiming to enhance participants' understanding and reduce potential stigma. Crucially, it explored the complex interplay of factors that can contribute to mental health issues within a migrant context, encompassing cultural adjustment, social isolation, and potential experiences of discrimination. Beyond identifying challenges, a significant portion of the workshop focused on empowerment, emphasizing the vital role of family members in fostering resilience and cultivating genuine happiness within their familial units.

The initial session of the workshop was marked by a palpable sense of engagement and receptiveness among the participants. Their enthusiasm manifested in active participation in the presented material, lively involvement in group discussions, and a willingness to openly share their perspectives and experiences related to the specific topics under consideration. This interactive environment fostered a sense of community and mutual learning. As further detailed in the qualitative data presented in [Table 1](#), the participants themselves reported a range of significant and positive changes in their awareness, understanding, and attitudes towards mental health as a direct result of their participation in this initial workshop. These self-reported changes provide preliminary evidence of the workshop's effectiveness in achieving its objectives.



Figure 1. Mental health workshop activity

Table 1. Participant conditions before and after the mental health workshop

No	Before Training	After Training
1	Unaware that New Zealand ranks second globally in terms of its citizens facing mental health challenges.	Aware that New Zealand ranks second globally in terms of its citizens facing mental health challenges.
2	Unaware of the mental health threats faced by Muslim migrant families.	Aware of the mental health threats faced by Muslim migrant families.
3	Lacked understanding and awareness that negative thoughts influence mental health issues about the past, present, and future.	Understands and is aware that negative thoughts about the past, present, and future are correlated with mental health issues.

3.2. Psychoeducation on mental health for Muslim migrant families

The second activity was a psychoeducation session focusing on the mental health of Muslim migrant families in Auckland, New Zealand ([Figure 2](#)). This activity was designed as a follow-up to the mental health workshop, where participants gained a basic understanding of the mental health issues commonly faced by migrant communities. In this session, participants not only gained deeper insights but were also equipped with practical strategies and methods to help themselves cope with and

manage potential mental health issues. The approach included techniques for emotion regulation, stress management, and coping strategies aligned with their cultural and religious values. This training aimed to empower participants to independently maintain their psychological well-being and build stronger support systems within their families and communities.

During the second session, participants learned several important lessons that they can use to protect themselves from mental health issues. The practical approaches learned during the psychoeducation session provided participants with tools to foster mentally healthy Muslim families. [Table 2](#) presents the achievements of this activity.



Figure 2. Mental health psychoeducation activity

Table 2. Comparison before and after the mental health workshop

No	Before Training	After Training
1	Unaware that mental disorders are caused by negative thought patterns about the past, present, and future.	Aware that mental disorders are caused by negative thought patterns about the past, present, and future.
2	Unaware that every human has negative thoughts about the past, present, and future.	Aware that every human has negative thoughts about the past, present, and future.
3	Lacked operational knowledge of combatting negative thoughts about the past, present, and future.	Has operational knowledge of combatting negative thoughts about the past, present, and future.

3.3. Discussion

This community service program, focusing on strengthening the mental health of Muslim migrant families in Auckland, New Zealand, addresses the psychosocial challenges faced by this community. The high suicide rate in New Zealand, including among migrants, indicates an urgent need for intervention programs to improve the mental resilience of individuals and families ([Labiq et al., 2024](#)). Furthermore, cultural differences, economic pressures, and limited access to mental health services add to the complexity of the challenges faced by Muslim migrant families ([Iqbal, 2020](#)). Therefore,

this program was designed to equip them with the knowledge and skills to maintain their mental health while strengthening social support among community members.

The program was conducted in two sessions: a workshop and psychoeducation on mental health. The workshop aimed to provide a basic understanding of mental health, risk factors that can cause mental disorders, and the role of families in building psychological resilience. Through an interactive approach, participants engaged in discussions encouraging personal reflection and a deeper understanding of their psychological conditions (K. Chen, 2022; Gardner, 2019; Jenita et al., 2023).

The second session, psychoeducation, focused more on providing concrete strategies for dealing with mental and emotional stress. Psychoeducation is a promising strategy for addressing individual problems (Purnamasari & Dinni, 2025). Participants were equipped with coping strategies aligned with their cultural and religious values. During this session, participants were encouraged to understand how negative thoughts about the past, present, and future can contribute to mental health disorders. In addition, a community-based approach was implemented to build stronger social support among Muslim migrant families (Hoefinger et al., 2019; Yani et al., 2024). Through discussion forums and experience sharing, participants felt more connected to each other, which ultimately helped them cope with existing psychosocial challenges.

The evaluation results showed an increased participants' understanding and awareness of mental health. Before participating in the program, many participants were unaware that New Zealand has a high rate of mental health threats (Kapeli et al., 2020). In addition, they did not understand the importance of the family's role in creating an environment that supports mental health (Mas'udah et al., 2023; Rosida, 2022). After participating in the program, participants showed an increased understanding of mental health risk factors and strategies to overcome them. They were also better able to identify early signs of mental disorders and knew what steps could be taken to prevent them.

This program has important implications for the Muslim migrant community in Auckland. With an increased understanding of mental health, it is hoped that Muslim migrant families will be better prepared to face life's challenges in a new environment (W. Chen et al., 2019; Jensen et al., 2019; Martuti & Kusumaningtyas, 2025). In addition, the psychoeducation-based approach proved effective in increasing individual mental resilience, which in turn contributes to the overall well-being of families (Alizioti et al., 2021; Buizza et al., 2019; Jafar & Wahyuni, 2023; Lestari & Wahyudianto, 2022). This program can also serve as a model for similar interventions in other migrant communities facing similar challenges (Saleh et al., 2022).

However, there were some limitations in the implementation of this program. One was the limited number of participants who could participate in the activities, so the impact was still limited to a relatively small community scope. In addition, the program's short duration posed a challenge in ensuring sustainable changes in participants' thinking patterns and behavior. Therefore, efforts are needed to expand the program's coverage and hold more intensive and sustainable follow-up activities. Collaboration with various parties, such as community organizations, mental health institutions, and academic institutions, can be a strategy to increase the effectiveness and impact of this program.

As follow-up, developing a more comprehensive intervention model with a sustainable approach is important. Follow-up programs involving mentoring sessions, support groups, and more in-depth psychological skills training can help participants apply the

knowledge they have acquired daily. In addition, efforts need to be made to increase public awareness of mental health among Muslim migrant communities through social media, seminars, and broader educational programs.

Overall, the mental health strengthening program for Muslim migrant families in Auckland, New Zealand, has made a positive contribution to the community involved. Despite its limitations, the impact achieved shows that psychoeducation-based interventions can be a practical first step in improving the mental well-being of migrant individuals and families. With broader support and collaboration, this program will continue growing and benefit the target community more.

4. Conclusion

The mental health strengthening program for Muslim migrant families in Auckland, New Zealand, has successfully enhanced participants' awareness and understanding of the importance of maintaining mental well-being when facing various psychosocial challenges. Through two sessions comprising a workshop and psychoeducation, participants gained insights into the risk factors for mental health disorders and effective strategies for managing stress, regulating emotions, and implementing coping mechanisms that align with their cultural and religious values.

The implications of this activity indicate that psychoeducation-based interventions are essential for enhancing the mental resilience of Muslim migrant families, particularly in environments with complex social and cultural challenges. The success of this program can serve as a model for similar efforts in other communities with comparable characteristics. However, limitations in participant reach and intervention duration pose challenges that can be addressed through broader and more sustainable follow-up activities. Therefore, collaboration with various stakeholders is recommended to expand the reach and ensure a more significant impact on the target population.

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Conflict of Interest

All authors declare no financial or non-financial conflicts of interest related to this article.

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