UNDERSTANDING THE IMPACTS OF EMOTIONAL WELL-BEING FOR HUMAN FLOURISHING AMONG BLACK, INDIGENOUS AND PEOPLE OF COLOUR (BIPOC) COMMUNITIES

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Abstract

Emotional well-being contributes to overall happiness, fulfilment, and the ability to thrive in various aspects of life. Emotional well-being is not merely the absence of negative emotions but encompasses the cultivation of positive emotions, resilience, self-awareness, and the development of strong interpersonal relationships. There has been gaps in the literature on emotional well-being, especially among Black, Indigenous and People of Colour (BIPOC) communities. With the objectives of identifying their challenges and strategic interventions in achieving emotional well-being through a social justice and equity lens, a scoping review of literature was undertaken, utilizing databases namely, PubMed, PsycINFO, and Social Sciences Abstracts. We extracted 23 peer-reviewed articles as selected out of 170 articles in the literature search. The review findings highlighted the need to delve deeper into understanding the distinct components of emotional

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well-being within BIPOC populations: (1) Protective and risk factors, (2) Land tenure/ownership, (3) School climate, (4) Racism as determinants of health, (5) Nature-based health and well-being practices, (6) Healthy dose of nature, yoga, and meditation, (7) Indigenous approaches and inter-cultural diversity, (8) East Kimberly concept of health and illness, (9) Deficit-based mental health and paleo-deficit disease and, (10) Strategies for promoting emotional well-being. Our findings suggest that the systemic challenges the BIPOC communities encounter significantly impede their capacity to achieve and sustain optimal emotional well-being, ultimately resulting in adverse outcomes for their overall health and quality of life. We conclude that culturally informed community care and intervention can promote emotional well-being and contribute to human flourishing.

Keywords: Emotional well-being, mental wellness, BIPOC population, human flourishing, traditional health, healing practices

Introduction

Many people generally believe that wealth can increase their happiness and emotional well-being, and poverty is the root cause of their unhappiness and worries. A study by Heady et al. (2005) revealed that more advanced material measures, such as household financial assets, provide a stronger correlation between happiness and one's material circumstances. While high income can enhance an individual's sense of life satisfaction, it does not necessarily lead to greater happiness. In this chapter, life satisfaction refers to how people assess their overall lives, which is often influenced by material conditions, especially income. However, happiness involves a more immediate emotional state that may not be directly tied to financial status. This distinction highlights that although money can provide material comfort, it does not automatically translate into deeper emotional fulfilment or joy in life.

On the other hand, low income is correlated with both a diminished evaluation of one's life and lower emotional well-being (Heady et al., 2005). Individuals with lower income often face financial stress, which can lead to negative feelings and a lack of re-

sources for positive experiences. This situation can create a cycle where low income negatively impacts overall life satisfaction and emotional health, further exacerbating feelings of unhappiness and discontent. Thus, happiness in life is generally considered akin to emotional well-being; however, the latter could mean different things to different people. Among numerous definitions of emotional well-being reported in the literature, Kahneman and Deaton (2010) provided a comprehensive definition of emotional well-being referring to the emotional quality of an individual's everyday experience – the frequency and intensity of experiences of joy, stress, sadness, anger, and affection that make one's life pleasant or unpleasant. The U.S. Centres for Disease Control and Prevention (CDC, n.d.) define well-being as a subjective measure that "can be described as judging life positively and feeling good" (para. 1). This definition highlights that a strong sense of meaning and purpose can enhance emotional well-being by providing individuals with direction and motivation in life. The assertion is that positive emotional well-being can lower the risk of disease, sickness, and injury.

In this chapter, emotional well-being is conceptualized within the context of human flourishing, which refers to the state of optimal mental and emotional health that allows individuals to experience a sense of fulfilment and cultivate positive relationships. It encompasses the ability to understand, regulate, and respond to emotions in a healthy and adaptive manner and pursue personal growth and resilience. Research emphasizes that emotional well-being is crucial for reducing one's own stress level, which is directly linked to better physical health (Fredrickson & Joiner, 2002; Frijters et al., 2020). Chronic stress, if unaddressed, can lead to severe health issues such as heart disease, stroke, and diabetes through a pathway of neuronal and hormonal imbalance, a condition called "allostatic load" in the body (Szanton et al., 2005). On the other hand, emotional well-being positively influences social well-being by enhancing social skills such as effective communication and cooperation (Sancassiani et al., 2015). These skills, in turn, help individuals build and maintain strong social support networks, leading to a greater sense of belonging and connection.

In the intricate tapestry of the human experiences, emotional well-being emerges as a cornerstone, representing optimal mental and emotional health, thereby cultivating resilience, fostering self-awareness, and embracing personal growth (le Brasseur, 2022). The crux of emotional well-being lies in its pivotal role within the broader framework of human flourishing, the capacity to thrive across various dimensions of life. This involves not only the capacity to comprehend and regulate emotions in a healthy and adaptive manner but also the mere absence of negative emotions. It encompasses the active cultivation of positive emotions, the development of resilience, the nurturing of self-awareness, and social interactions. Promoting social skills through emotional well-being facilitates effective communication and cooperation, enabling individuals to cultivate positive relationships and sustain robust social support networks. In a multicultural country such as Canada, the dimensions of immigration, diversity, and culture are important to address because even though the problem of unsustainability is global, the solutions to it must be local and concrete – they must be tailored to people's specific historical and cultural conceptions of prosperity, happiness, and wellbeing and their transformations (Deneulin and McGregor, 2010; Mintchew & Moore, 2018; Moore, 2015). The resulting sense of belonging and connection is intricately linked to heightened life satisfaction and happiness.

Emotional well-being is a critical component of human flourishing, as it allows us to cope with life challenges and enjoy life pleasures. However, not all individuals have equal opportunities to enjoy emotional well-being. In particular, the minoritized communities, including Black, Indigenous, and People of Colour (BIPOC) communities, face significant barriers to emotional well-being due to systemic racism, oppression, and descent-based discrimination (Hingwe, 2021). Systemic barriers not only undermine the emotional well-being of individuals but also limit their access to crucial resources and support systems. At the core of this problem lies the imperative to address and dismantle the systemic factors contributing to emotional distress within BIPOC communities (Jean et al., 2023). By confronting and dismantling these barriers, it becomes possible to pave the way for the development of strategies

and interventions that foster emotional well-being and facilitate human flourishing among BIPOC communities. This chapter explores these disparities, investigating the unique challenges BIPOC individuals face in attaining optimal emotional well-being and how addressing these challenges is paramount for promoting equity and justice in society. Exploring these issues can contribute to a more comprehensive understanding of the challenges faced by BIPOC populations in attaining optimal emotional well-being and propose actionable steps toward dismantling systemic barriers that impede their ability to thrive emotionally. The specific objectives of the chapter are as follows:

1. To identify the unique challenges faced by BIPOC communities that impact their emotional well-being.

2. To identify strategies and interventions to promote emotional well-being and human flourishing among BIPOC communities.

3. To advocate for social justice and equity as essential components of achieving optimal emotional well-being and human flourishing within BIPOC communities.

Knowledge gaps in the existing literature

The existing literature on mental health predominantly adopts a medical-model approach, often emphasizing deficit-based mental illness, diagnosis, and treatment. While this perspective is undeniably crucial for understanding and addressing immediate mental health concerns, there is a noticeable gap in the literature regarding a more holistic exploration of emotional well-being or mental well-being. The broader spectrum of mental health, including positive aspects such as emotional flourishing, resilience, and personal growth, remains underexplored in comparison with the prevalent focus on mental illness. The emotional well-being of BIPOC communities is significantly impacted by systemic racism, oppression, and discrimination, creating barriers to their flourishing. The problem lies in the need to address and dismantle the systemic factors that contribute to emotional distress and limited access to resources and support systems to foster emotional well-being and promote human flourishing within BIPOC communities. There is a need for research that transcends the

contemporary medical model and considers the socio-cultural nuances inherent in BIPOC communities, offering a more comprehensive understanding of emotional well-being beyond pathology.

Emotional well-being is a complex interplay of various factors, including cultural identity, community dynamics, and historical contexts, and understanding these elements is crucial for developing effective interventions that address the root causes of emotional distress. While the literature acknowledges the impact of systemic racism, oppression, and discrimination on mental health, few studies have focused explicitly on how these factors affect emotional well-being within BIPOC communities. The scarcity of literature addressing emotional well-being within Black, Indigenous, and People of Colour (BIPOC) communities further accentuates this gap. Furthermore, the literature often centres on exploring negative outcomes and mental health disparities within BIPOC communities, leaving a gap in the understanding of the protective factors and resilience that contribute to positive emotional well-being. Investigating and highlighting these strengths can inform interventions that build upon existing resources within these communities, fostering emotional well-being and resilience.

Research has shown that engaging with and strengthening the connectedness to culture is proven to be a protective factor and a significant component of suicide prevention (Shin et al., 2022; Sjoblom et al., 2022; Wu et al., 2019). Wu et al. (2019) argued that for the well-being of youth to improve, contemporary interventions and a historical-cultural context need to be collaborative and taken through a holistic approach. While some studies discuss strategies for addressing mental health disparities, there is a limited exploration of culturally tailored interventions specifically designed to promote positive emotional well-being. A holistic approach is a culture-based or culturally inclusive intervention that includes traditional teachings and knowledge, storytelling, personal narratives, traditional healers, language programs, land-based activities, feasts, pow-wows, harvesting medicine, drumming, singing, and dancing, especially in the context of Indigenous communities in Canada and the United States of America. The literature lacks a comprehensive understanding of culturally informed approaches that consider the unique needs and strengths of BIPOC individ-

uals, which is essential for developing effective and sustainable interventions. A culturally informed framework can address the unique challenges faced by BIPOC communities, which hinder their ability to achieve and maintain optimal emotional well-being and quality of life. To explore these knowledge gaps, this chapter explores the following questions:

1. What are the key components of community empowerment within BIPOC communities that influence emotional well-being and contribute to human flourishing?

2. How can community empowerment and engagement improve emotional well-being and foster human flourishing within BIPOC communities?

Methodological approach

This chapter utilizes a systematic scoping review approach to gather, assess, and synthesize literature on emotional well-being within BIPOC communities. The methodology integrates a comprehensive search strategy, inclusion criteria, and a qualitative appraisal process. The systematic review follows a predefined protocol to ensure transparency and reproducibility. The Medical Subject Headings (MeSH) search strategy was developed through consultation among the research team members with expertise in systematic review searching, using an iterative process of preliminary searches, testing search terms and incorporating new search terms as relevant papers are identified. Databases were searched using date restrictions 2000–2023 for the most up-to-date literature, titles and abstracts were searched, and subject headings were mapped specifically to each platform. The language used in the literature search was limited to English. The search terms were grouped according to three core concepts: ("Emotional well*being" AND ("Human flourishing" OR prosperity OR happiness) AND (Traditional OR Indigenous OR Non-medical OR Non-colonial OR Multi-cultural) AND (BIPOC OR IBPOC OR (Black AND Indigenous AND People of (Color OR Colour)") AND Communities)). As demonstrated in Figure 1 below, we obtained 170 hits from peer-reviewed articles. After removing the duplicates and relevancies, 72 articles were retained, and we proceeded with the title and abstract review.

Once the search results were collated, three researchers independently and collaboratively screened the titles and abstracts to determine whether a study met the general inclusion criteria. Three research team members accessed each article abstract independently and rated it as 'include,' 'exclude,' or 'unclear.' The full texts of all the articles classified as included or unclear were retrieved for formal review. Next, the research team met virtually to compare and contrast the selected articles. Finally, the team agreed to select 23 articles for the final analysis according to the predetermined inclusion criteria. The three members of the team extracted the data by reading each of the selected 23 selected articles. Using a deductive approach for data analysis, the extracted data were imported into an Excel spreadsheet. The team regularly met on Zoom to analyse the extracted data. In the subsequent sections, we discuss the major themes and sub-themes that emerged in the selected studies.

Figure 1. PRISMA flow diagram
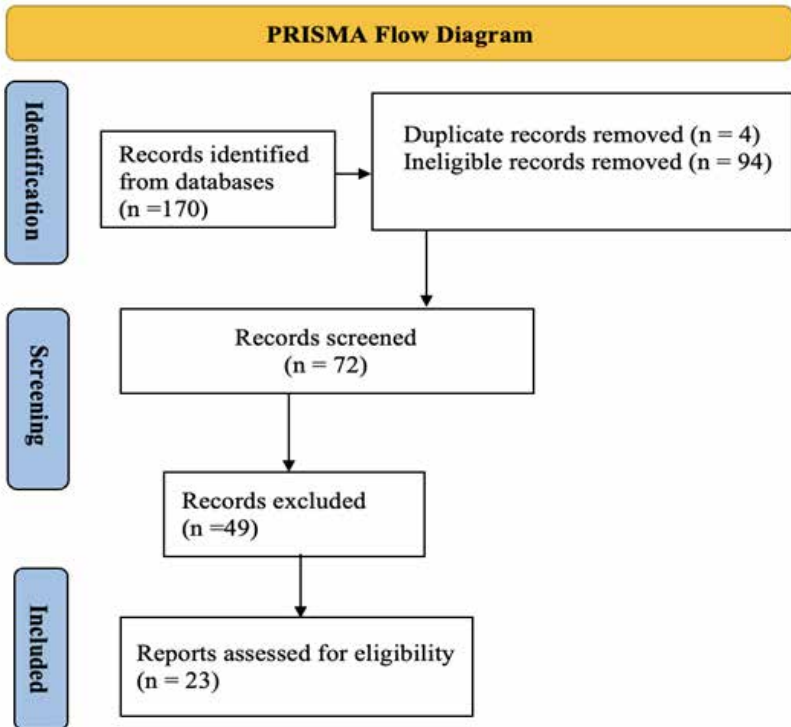
Discussion of major findings

This section discusses the major findings that emerged from the data analysis.

Protective and risk factors

In the context of emotional well-being among racialized or Black, Indigenous, and People of Colour (BIOPC) communities, protective and risk factors play a critical role in shaping mental health outcomes (Hunter et al., 2021). Protective factors include strong cultural identity, community support, and resilience rooted in shared experiences. Cultural traditions and practices can provide a sense of belonging and foster emotional strength, helping individuals navigate systemic challenges (Zubrick et al., 2014). For example, Walker et al. (2019) asserted that "valuing customs and cultural beliefs, local community involvement to promote Indigenous wellbeing and empowerment have been proposed as potentially effective in addressing some of these health determinants" (p. 539). Support networks, including family ties and community organizations, often serve as vital resources, offering emotional assistance and facilitating coping strategies during difficult times. These protective factors can mitigate the negative impacts of discrimination and socio-economic stressors, promoting greater emotional resilience within these communities.

Conversely, risk factors for emotional well-being in racialized communities often stem from systemic inequalities and historical trauma. Experiences of racism, descent-based discrimination, and marginalization can lead to chronic stress, contributing to higher rates of anxiety, depression, and other mental health issues (Judd et al., 2020). Additionally, socio-economic challenges, such as limited access to healthcare, education, and employment opportunities, further exacerbate these risks. The stigma surrounding mental health within some communities may also deter individuals from seeking help, compounding the negative effects on emotional well-being (Drissi et al., 2020). Understanding the interplay between these protective and risk factors is essential for developing targeted interventions that support the emotional health of BIOPC communities, fostering resilience and promoting overall well-being.

Land tenure/ownership

Land ownership emerged as a significant protective factor for emotional well-being within BIPOC communities. Studies have highlighted the positive impact of ancestral land ownership on community identity and mental health resilience. Securing land ownership can foster a sense of belonging and autonomy, providing individuals with a place to establish roots and build communities. A study by Kollamparambil (2021) found that land ownership improves social well-being with respect to psychological and emotional benefits. Land ownership allows for the cultivation of traditions, sustainable practices, and intergenerational ties, which are crucial for emotional resilience and collective identity. However, historical and ongoing disparities in land access—often rooted in systemic racism and colonial policies—have disproportionately affected BIPOC communities, resulting in feelings of disenfranchisement and loss. Moreover, a lack of secure land tenure can exacerbate stress and anxiety as individuals face the threat of displacement and the uncertainty of housing stability. The emotional toll of navigating these challenges is compounded by the historical trauma associated with land dispossession and the ongoing struggle for rights and recognition (Cunningham & Paradise, 2012).

School climate

The school environment plays a crucial role in shaping emotional well-being, with a positive and inclusive school climate being a protective factor. In particular, in terms of cultural representation, the school environment plays a crucial role in the mental and emotional well-being of students. For example, a study by Mayorga and Rosales (2019) revealed that the participants in the study were "appreciative of their school, they recognized the tiered education system they were experiencing and that this approach was rooted in a culturally deficient framing of Latinx youth and their communities" (p. 574). As such, the promises of individual success cloaked the emotional and material effects of a highly intense deficit-rooted approach. When schools reflect the diverse backgrounds of their student populations through curricula, staff, and cultural events, it fosters a sense of belonging and

validation. For example, Aldridge et al. (2016) reported that "positive peer relationships (mediated by resilience) and a sense of belonging influenced students' sense of life satisfaction and well-being, provide implications for developing a school culture that fosters these elements" (p.20). This representation helps students from marginalized communities feel seen and valued, reducing feelings of isolation and alienation. Culturally responsive mental health practices and resources are urgently needed for racialized students (Mayorga & Rosales, 2019). Additionally, a culturally inclusive environment promotes positive self-identity and self-esteem, empowering students to engage more fully in their education. Conversely, instances of discrimination or lack of cultural representation were associated with increased emotional distress among students. A lack of representation can lead to disconnection, lower motivation, and increased stress, highlighting the importance of culturally responsive practices in supporting the emotional health of all students.

Racism as determinant of health

Racism was identified as a pervasive determinant of emotional well-being within BIPOC communities. Experiences of racism were consistently associated with heightened emotional distress and adverse mental health outcomes. These barriers can exacerbate stress and negatively impact mental health, making it more challenging for individuals in these communities to attain the same level of emotional well-being as others. Priest et al. (2017) argue that systemic racism stems from "historical and contemporary issues related to colonization, oppression, and racism, widely acknowledged as critical contributors to inequalities in health and well-being experienced by Indigenous peoples throughout the world" (p. 642). The prevalence of systemic racism, oppression, and discrimination erect formidable barriers to the emotional well-being of BIPOC communities. For example, le Brasseur (2022) states,

The African-Canadian community has and continues to confront racism and environmental challenges, both spatially and culturally. Culturally, marginalization and discrimination are still present. Spatially, the continued urbanization of Dartmouth's pre-

dominately White communities create constant pressures for land-scape change and community fragmentation (p. 25).

Emotional well-being plays a crucial role in reducing stress, which, in turn, has significant positive effects on physical health. Chronic stress is known to be a contributing factor to serious health conditions such as heart disease, stroke, and diabetes. Individuals can mitigate these risks by fostering emotional well-being, leading to better overall health outcomes. Paradise et al. (2015) conducted a meta-analysis reviewing the literature focusing on the relationship between reported racism and mental and physical health outcomes. They found,

Ethnicity significantly moderated the effect of racism on negative mental health and physical health: the association between racism and negative mental health was significantly stronger for Asian American and Latino(a) American participants compared with African American participants, and the association between racism and physical health was significantly stronger for Latino(a) American participants compared with African American participants (p. 1).

The relationship between emotional well-being and these broader societal factors highlights its importance as a critical component of human flourishing. Efforts to increase emotional well-being must consider these disparities to effectively promote mental health and overall life satisfaction across all communities. Addressing these disparities is crucial for promoting equity and ensuring that everyone has the opportunity to experience the benefits of emotional well-being.

Nature-based health and well-being practices

Nature-based health and well-being practices have gained recognition for their profound impact on mental and physical health. Green spaces, such as parks and gardens, provide individuals with accessible environments that foster relaxation, stress reduction, and social interaction. Studies have shown that spending time in these natural settings can lower cortisol levels, enhance mood, and improve overall well-being (le Brasseur, 2022). Green space is also associated with higher levels of social contact and increased

feelings of social support among neighbours, as well as social interaction between multicultural individuals (Rasidi et al. 2010).

Natural sites, such as forests and mountains, offer unique opportunities for immersive experiences that not only refresh the mind but also encourage physical activity, contributing to a more active and healthier lifestyle (Jennings & Bamkole 2019). Informed by connections to the community and the land and seas of their environments, Indigenous groups commonly hold holistic and collectivist conceptions of health and wellbeing (Anderson et al., 2022; Stephens et al., 2005). The integration of biophilia—the innate human connection to nature—underscores the idea that exposure to natural elements, such as soil, water, plants, and wildlife, can cultivate feelings of peace and contentment, ultimately promoting healthier lifestyles. In their research, Walker et al. (2019) argued that establishing connections and dialogue with other community members is critically important to increase empowerment, particularly emotional support for young people's health, is critically important for increasing empowerment.

Healthy dose of nature, yoga, and meditation

In addition to physical environments, engagement with nature-based practices such as a healthy dose of nature, yoga and meditation emerged as effective strategies for promoting emotional well-being. The incorporation of a "healthy dose of nature" into daily routines can significantly enhance well-being (Bell et al., 2018). An increasing number of epidemiological studies have consistently found that traditional dietary patterns, including, but not limited to, cocoa polyphenols, green tea, coffee, grapes, and various spices, have also been linked to positive mood, cognitive efficiency, and a decreased risk of depressive symptoms (Krikorian et al., 2012; Logan et al., 2015; Pase et al., 2013; Pham et al., 2014).

Similarly, activities such as walking, jogging, or simply sitting in a natural setting allow individuals to disconnect from urban stressors and reconnect with the tranquillity of the natural world. Research indicates that even short periods spent in nature can lead to improved cognitive function and increased creativity. For example, positive leisure activities are a core ingredient of overall

well-being (Gotfredsen et al., 2020; Kuykendall et al., 2015). Practices such as meditation and yoga further enhance the benefits of nature-based health strategies. Engaging in mindfulness meditation in a serene outdoor setting can deepen the meditative experience, allowing individuals to tune into their surroundings and foster a greater sense of connection to nature. Similarly, yoga practices conducted in green spaces can enhance physical flexibility and strength while promoting mental clarity and emotional balance. These combined practices emphasize the importance of creating environments that encourage both movement and stillness, harnessing the restorative power of nature to support holistic health and well-being. Culturally tailored interventions incorporating these practices have shown promising results.

Indigenous approaches and intercultural diversity

Indigenous approaches and intercultural diversity highlight the integral role of traditional practices and cultural frameworks in promoting emotional well-being and health among Indigenous populations. These approaches often contrast with Western medical paradigms, which tend to focus on biomedical treatments. Indigenous health systems emphasize holistic well-being, intertwining physical, mental, emotional, and spiritual health. Chamberlain et al. (2019) suggest the need for Indigenous models of well-being that incorporate compassion, culture (and spirituality) and a holistic approach to care, which is consistent with Aboriginal understandings of social and emotional well-being. This perspective fosters a deeper understanding of how interconnected these aspects are in the context of individual and community health, illustrating that emotional well-being is not merely the absence of mental illness but also a state of balance and harmony within oneself and with the environment. Anderson et al. (2022) found that Indigenous youth in Australia strengthened their well-being while engaging in a range of recreational activities, such as sports and cultural recreational activities, such as fishing, dancing, and art. These activities provide them with opportunities to learn about healthy lifestyles and connect with the country, identity, community and culture (Crowe et al., 2017; Povey et al., 2020; Priest et al., 2012). In discussing Indigenous culture and identity, Anderson et at (2022) argue,

The transmission of cultural knowledge from one generation to the next was a key component of youths' experience of well-being, with common incursions on this transmission including being away from traditional lands and Country, experiences of poor mental health or substance abuse, and the impact of societal pressures (p.29).

The significance of intercultural diversity in health practices cannot be overstated. Indigenous healing methods often incorporate rituals, community support, and traditional knowledge that reflect unique cultural identities (Shay & Sarra, 2021). These practices not only are vital for maintaining health but also serve to strengthen community bonds and cultural continuity. By embracing intercultural diversity, health practitioners can foster an inclusive environment that recognizes and values different healing traditions, ultimately leading to more effective and culturally appropriate health interventions. This approach promotes mutual respect and understanding, bridging gaps between Indigenous and non-Indigenous health systems. Studies have also revealed that active participation in the arts, particularly in dance and music, has the potential to affect outcomes related to the domains of life impact, including social, emotional, and physical functioning, and cognitive functioning (Dodd et al., 2018; Pesata et al., 2022).

Furthermore, the incorporation of Indigenous knowledge into contemporary health frameworks can enhance overall well-being and resilience among Indigenous communities (Priest et al., 2017). Many Indigenous practices focus on preventive care and emphasize the importance of land, community, and ancestral wisdom. By integrating these practices into broader health policies and programs, there is potential for improved health outcomes and emotional well-being among Indigenous populations. This collaboration can also empower Indigenous voices in health discussions, ensuring that their perspectives and needs are central to the development of effective health solutions that respect cultural heritage and promote holistic wellness.

East Kimberly concept of health and illness

The unique East Kimberly concept of health and illness provides insights into how cultural frameworks shape emotional well-being

(McDonald, 2006). This concept of health and illness emphasizes a holistic understanding of well-being that integrates physical, emotional, social, and spiritual dimensions. In this framework, health is not merely the absence of disease but also a state of balance and harmony within the individual and their community. For example, Priest et al. (2017) reported that "family and community relationship are core components of Indigenous well-being, with individual and community well-being inextricably linked and indivisible" (p. 638). Traditional beliefs play a crucial role, with a strong connection to land, culture, and ancestral practices guiding health behaviours. Illness is often viewed as a disruption in this balance, influenced by social relationships and environmental factors. Consequently, healing practices in East Kimberly prioritize community support, connection to the land, and cultural continuity, highlighting the importance of collective well-being alongside individual health (Mcdonald, 2006). Recognizing diverse Indigenous perspectives is essential for fostering inclusive and effective mental health interventions.

Deficit-based mental health, paleo-deficit disease, and the COVID-19 pandemic

Deficit-based mental health approaches focus primarily on identifying and addressing deficiencies or pathologies within individuals, often framing mental health issues in terms of what is lacking or abnormal. This perspective can lead to a narrow understanding of emotional well-being, as it tends to overlook strengths, resilience, and the broader context of individuals' lives. The COVID-19 pandemic intensified existing mental health challenges within BIPOC communities. Several studies have shown that pandemic loneliness has been linked to decrements in mental health and well-being just as lower social connections (Hussong et al., 2021; Nitschke et al., 2021), less time spent with friends, lower quality friendships (Bernasco et al., 2021), and smaller social networks (Ellis et al., 2020) have been linked with greater distress and anxiety. Studies have also highlighted that Black, Latina/o/ex, and Indigenous individuals, as well as those in poverty, experience higher rates of COVID-19 infections, hospitalizations, and deaths compared to White and Asian American individuals (Goldstein & Ather-wood, 2020).

Additionally, immigrants and refugees from conflict zones face increased mortality risks due to lack of insurance, limited healthcare access, and language barriers that hinder their ability to follow health guidelines (Browne et al., 2021). These disparities stem from deep structural issues, resulting in greater health impacts on racial/ethnic minority youth and low-income or immigrant families during the pandemic. Disparities in access to healthcare, economic instability, and increased discrimination during the pandemic exacerbated emotional distress. As people experience isolation, uncertainty, and fear, traditional frameworks often fail to address the complex emotional responses arising from these circumstances. The COVID-19 pandemic highlighted the importance of community, connection, and proactive coping strategies that foster resilience. Instead of merely focusing on deficits, there is a growing recognition of the need to cultivate strengths and resources that promote emotional well-being, such as social support networks and adaptive coping mechanisms. This shift encourages a more holistic view of mental health that integrates both individual and community strengths. The pandemic has catalysed discussions around re-evaluating mental healthcare practices to emphasize preventive measures and wellness-oriented approaches.

A novel concept of "paleo-deficit disease" was introduced, highlighting the impact of cultural disconnection and the loss of traditional practices on mental health outcomes within BIPOC populations. By integrating insights from Paleo-deficit disease, mental health practitioners can advocate for environments that support emotional well-being, drawing on practices that foster a connection to nature, community engagement, and cultural heritage. This holistic approach encourages individuals to reclaim their emotional health by building resilience and embracing strengths rather than solely focusing on their struggles. As societies emerge from the pandemic, there is an opportunity to reshape mental health frameworks, emphasizing flourishing and well-being alongside managing deficits.

Strategies for promoting emotional well-being

Strategies for promoting emotional well-being have increasingly recognized the importance of integrating arts into health and

wellness initiatives. Artistic expression—whether through music, visual arts, dance, or storytelling—serves as a powerful tool for individuals to process emotions, share experiences, and foster connections. Engaging with the arts can enhance emotional resilience, reduce symptoms of anxiety and depression, and create a sense of community. However, the effectiveness of these strategies is often contingent on cultural relevance and accessibility, necessitating a thoughtful approach that considers the diverse backgrounds and experiences of individuals, particularly within BIPOC populations.

Traditional practices of health and well-being among BIPOC communities offer rich insights into holistic approaches that prioritize emotional well-being. These practices often emphasize community, spirituality, and interconnectedness, reflecting a deep understanding of the social determinants of health. For instance, Indigenous healing practices frequently involve community gatherings, storytelling, and rituals that promote collective healing and emotional support. The incorporation of these traditional approaches into contemporary wellness strategies can provide a culturally grounded framework that resonates with individuals' lived experiences. It is crucial that mental health initiatives honour and elevate these practices, ensuring that they are not merely tokenized but integrated meaningfully into health services.

A culturally informed framework for promoting emotional well-being requires collaboration and engagement with BIPOC communities to co-create inclusive and effective strategies (Ridani et al., 2014). This involves not only recognizing the unique cultural strengths and healing practices of these populations but also addressing systemic barriers that have historically marginalized their voices in the health discourse. By fostering partnerships that prioritize cultural competence and community engagement, mental health practitioners can develop more holistic interventions that resonate with the values and beliefs of diverse populations. Ultimately, promoting emotional well-being through the arts and traditional practices necessitates a commitment to equity, respect, and genuine collaboration, paving the way for more effective and culturally relevant mental health support.

Conclusion

In conclusion, the examination of emotional well-being within Black, Indigenous, and People of Colour (BIPOC) communities reveals a nuanced landscape shaped by a multitude of factors. Our discussion has illuminated protective and risk factors, deficit-based mental health narratives, nature-based practices, Indigenous perspectives, and strategies for promoting emotional well-being. The findings underscore the need for a holistic understanding of emotional well-being that transcends deficit-based models, acknowledging the strengths, resilience, and cultural assets present within BIPOC communities. From the influence of land tenure and school climate to the impact of social media and the experiences of adolescents, the intricate interplay of factors influencing emotional health has been revealed.

Moreover, our exploration of nature-based practices emphasizes the importance of incorporating cultural relevance in interventions, recognizing the therapeutic potential of green spaces, natural diets, and practices such as yoga and meditation. The Indigenous perspectives highlight the interconnectedness of cultural identity, education, and community engagement, offering valuable insights into the role of socio-demographic factors and the East Kimberly concept of health and illness (Heather, 2006; McDonald, 2006). Strategies for promoting emotional well-being, ranging from arts and leisure participation to suicide prevention, underscore the importance of community engagement, cultural sensitivity, and destigmatizing mental health discussions. As we navigate the complex terrain of emotional well-being, interventions must be tailored, inclusive, and rooted in an appreciation of the diverse cultural contexts within BIPOC communities. The convergence of themes and sub-themes provided a comprehensive foundation for future research, policy development, and community-based interventions aimed at fostering emotional well-being within BIPOC populations.

In moving forward, it is imperative to recognize the heterogeneity within BIPOC communities and the importance of intersectionality in understanding emotional well-being. By addressing the unique challenges, strengths, and cultural assets of each community, we can pave the way for more effective and culturally informed

interventions that promote emotional well-being and contribute to the flourishing of individuals within BIPOC communities.

Acknowledgement

References

Aldridge, J. M., Fraser, B. J., Fozdar, F., Ala'i, K., Earnest, J., & Afari, E. (2016). Students' perceptions of school climate as determinants of wellbeing, resilience, and identity. Improving Schools, 19(1), 5–26. https://doi.org/10.1177/1365480215612616

Anderson, K., Elder-Robinson, E., Gall, A., Ngampromwongse, K., Connolly, M., Letendre, A., Willing, E., Akuhata-Huntington, Z., Howard, K., Dickson, M., & Garvey, G. (2022). Aspects of wellbeing for Indigenous youth in CANZUS countries: A systematic review. International Journal of Environmental Research and Public Health, 19(20). https://doi.org/10.3390/ijerph192013688

Bell, S. L., Leyshon, C., Foley, R., & Kearns, R. A. (2019). The "healthy dose" of nature: A cautionary tale. Geography Compass, 13(1). https://doi.org/10.1111/gec3.12415

Bernasco, E., Nelemans, S., van der Graaff, J., & Branje, S. (2021). Friend support and internalizing symptoms in early adolescence during COVID-19. Journal of Research on Adolescence, 31(3), 692–702. https://doi.org/10.1111/jora.12662

Brondolo, E., Gallo, L. C., & Myers, H. F. (2009). Race, racism, and health: Disparities, mechanisms, and interventions. Journal of Behavioural Medicine, 32(1), 1–8.

Browne, D. T., Smith, J. A., & Basabose, J. D. D. (2021). Refugee children and families during the COVID-19 crisis: A resilience framework for mental health. Journal of Refugee Studies, 34(1), 1138–1149. https://doi.org/10.1093/jrs/feaa113

Carta, M. G., & Lindert, J. (2015). Enhancing the emo-

tional and social skills of youth to promote their wellbeing and positive development: A systematic review of universal school-based randomized controlled trials. Clinical Practice and Epidemiology in Mental Health, 11(Suppl 1 M2), 21–40. https://doi.org/10.2174/1745017901511010021

Centres for Disease Control and Prevention (CDC). (n.d.). Emotional well-being. Retrieved from https://www.cdc.gov/emotional-well-being/about/index.html

Chamberlain, C., Ralph, N., Hokke, S., Clark, Y., Gee, G., Stansfield, C., Sutcliffe, K., Brown, S. J., & Brennan, S. (2019). Healing the past by nurturing the future: A qualitative systematic review and meta-synthesis of pregnancy, birth, and early postpartum experiences and views of parents with a history of childhood maltreatment. PLoS ONE, 14(12), 1–52. https://doi.org/10.1371/journal.pone.0225441

Cohen, S., Kamarck, T., & Mermelstein, R. (1983). A global measure of perceived stress. Journal of Health and Social Behaviour, 24(4), 385–396.

Crowe, R., Stanley, R., Probst, Y., & McMahon, A. (2017). Culture and healthy lifestyles: A qualitative exploration of the role of food and physical activity in three urban Australian Indigenous communities. Aust. N. Z. J. Public Health, 41(4), 411–416.

Cunningham, J., & Paradies, Y. C. (2012). Socio-demographic factors and psychological distress in Indigenous and non-Indigenous Australian adults aged 18–64 years: Analysis of national survey data. BMC Public Health, 12(1), 95. https://doi.org/10.1186/1471-2458-12-95

Deneulin, S., & McGregor, J. A. (2010). The capability approach and the politics of a social conception of wellbeing. European Journal of Social Theory, 13(4), 501–519.

Diener, E., & Diener, M. (2009). Cross-cultural correlates of life satisfaction and self-esteem. Journal of Personality and Social Psychology, 101(3), 657–677.

Dodd, S., Clarke, M., Becker, L., Mavergames, C., Fish, R.,

& Williamson, P. R. (2018). A taxonomy has been developed for outcomes in medical research to help improve knowledge discovery. Journal of Clinical Epidemiology, 96, 84–92. https://doi.org/10.1016/j.jclinepi.2017.12.020

Drissi, N., Ouhbi, S., Janati Idrissi, M. A., Fernandez-Luque, L., & Ghogho, M. (2020). Connected mental health: Systematic mapping study. Journal of Medical Internet Research, 22(8), e19950. https://doi.org/10.2196/19950

Ellis, W. E., Dumas, T. M., & Forbes, L. M. (2020). Physically isolated but socially connected: Psychological adjustment and stress among adolescents during the initial COVID-19 crisis. Canadian Journal of Behavioural Science, 52, 177–187. https://doi.org/10.1037/cbs0000215

Fredrickson, B. L. (2001). The role of positive emotions in positive psychology: The broaden-and-build theory of positive emotions. American Psychologist, 56(3), 218–226.

Fredrickson, B. L., & Joiner, T. (2002). Positive emotions trigger upward spirals toward emotional well-being. Psychological Science, 13(2), 172–175.

Frijters, P., Clark, A. E., Krekel, C., & Layard, R. (2020). A happy choice: Wellbeing as the goal of government. Behavioural Public Policy, 4(2), 126–165.

Goldstein, J. R., & Atherwood, S. (2020). Improved measurement of racial/ethnic disparities in COVID-19 mortality in the United States. MedRxiv. https://doi.org/10.1101/2020.05.21.20109116

Gotfredsen, A. C., Goicolea, I., & Landstedt, E. (2020). Carving out space for collective action: A study on how girls respond to everyday stressors within leisure participation. International Journal of Qualitative Studies on Health & Well-Being, 15(1), 1–11. https://doi.org/10.1080/17482631.2020.1815486

Heady, B., Muffels, R., & Wooden, M. (2005). Money and happiness: The combined effects of wealth, income and consumption. Schmollers Jahrbuch, 125, 131–144.

Hingwe, S. (2021). Mental health considerations for Black, In-

digenous, and People of Colour: Trends, barriers, and recommendations for collegiate mental health. In Riba, M. B., & Menon, M. (Eds.), College Psychiatry (Vol. 1, pp. 1–10). Springer. https://doi.org/10.1007/978-3-030-69468-5_6

Hunter, S.-A., Skouteris, H., & Morris, H. (2021). A conceptual model of protective factors within Aboriginal and Torres Strait Islander culture that build strength. Journal of Cross-Cultural Psychology, 52(8/9), 726–751. https://doi.org/10.1177/00220221211046310

Hussong, A. M., Benner, A. D., Erdem, G., Lansford, J. E., Makila, L. M., & Petrie, R. C. (2021). Adolescence amid a pandemic: Short- and long-term implications. Journal of Research on Adolescence, 31(3), 820–835. https://doi.org/10.1111/jora.12671

Jennings, V., & Omoshalewa, B. (2019). The relationship between social cohesion and urban green space: An avenue for health promotion. International Journal of Environmental Research and Public Health, 16(452).

Judd, B., & Ellinghaus, K. (2020). F. W. Albrecht, assimilation policy and the education of Aboriginal girls in Central Australia: Overcoming disciplinary decadence in Australian history. Journal of Australian Studies, 44(2), 167–181. https://doi.org/10.1080/14443058.2020.1754275

Kollamparambil, U. (2021). Non-income effect of land ownership and tenure on subjective wellbeing in South Africa. South African Journal of Economics, 89(2), 301–323.

Krikorian, R., Boespflug, E. L., Fleck, D. E., Stein, A. L., Wightman, J. D., Shidler, M. D., et al. (2012). Concord grape juice supplementation and neurocognitive function in human aging. Journal of Agricultural and Food Chemistry, 60, 5736–5742.

Kuykendall, L., Tay, L., & Ng, V. (2015). Leisure engagement and subjective well-being: A meta-analysis. Psychological Bulletin, 141(2), 364–403. https://doi.org/10.1037/a0038508

leBrasseur, R. (2022). Cultural greenspaces: Synthesizing knowledge and experience in Nova Scotia's African-Canadian

communities through participatory research and softGIS. Social Sciences, 11(7), Article 281. https://doi.org/10.3390/socsci 11070281

Logan, A. C., Katzman, M. A., & Balanzá-Martínez, V. (2015). Natural environments, ancestral diets, and microbial ecology: Is there a modern "paleo-deficit disorder"? Part II. Journal of Physiological Anthropology, 34(1), Article 4. https://doi.org/10.1186/s40101-014-0040-4

Mayorga, E., & Rosales, A. (2019). Conocimiento, colectividad y curación: Understanding and addressing Latinx youth mental health and wellness through PAR entremundos. The Urban Review, 51(4), 559–581. https://doi.org/10.1007/s11256-019-00532-3

McDonald, H. (2006). East Kimberley concepts of health and illness: A contribution to intercultural health programs in Northern Australia. Australian Aboriginal Studies, 2, 86–97. https://doi.org/10.3316/informit.429992484938647

Mintchev, N., & Moore, H. L. (2018). Super-diversity and the prosperous society. European Journal of Social Theory, 21(1), 117–134. https://doi.org/10.1177/1368431016678629

Moore, H. (2015). Global prosperity and sustainable development goals. Journal of International Development, 27(6), 801–815.

Munro, G., & Sareen, J. (2019). Qualitative case study investigating the pax-good behaviour game in First Nations communities: Insight into school personnel's perspectives in implementing a whole school approach to promote youth mental health. BMJ Open, 9(9), 1–10. https://doi.org/10.1136/bmjopen-2019-030728

Nitschke, J. P., Forbes, P. A. G., Ali, N., Cutler, J., Apps, M. A. J., Lockwood, P. L., & Lamm, C. (2021). Resilience during uncertainty? Greater social connectedness during COVID-19 lockdown is associated with reduced distress and fatigue. British Journal of Health Psychology, 26, 553–569. https://doi.org/10.1111/bjhp.12485

Paradies, Y., Ben, J., Denson, N., Elias, A., Priest, N., Pieterse,

A., Gupta, A., Kelaher, M., & Gee, G. (2015). Racism as a determinant of health: A systematic review and meta-analysis. PLoS ONE, 10(9), e0138511. https://doi.org/10.1371/journal.pone.0138511

Pase, M. P., Scholey, A. B., Pipingas, A., Kras, M., Nolidin, K., Gibbs, A., et al. (2013). Cocoa polyphenols enhance positive mood states but not cognitive performance: A randomized, placebo-controlled trial. Psychopharmacology, 27, 451–458.

Pesata, V., Colverson, A., Sonke, J., Morgan-Daniel, J., Schaefer, N., Sams, K., Carrion, F. M.-E., & Hanson, S. (2022). Engaging the arts for wellbeing in the United States of America: A scoping review. Frontiers in Psychology, 12. https://doi.org/10.3389/fpsyg.2021.791773

Pham, N. M., Nanri, A., Kurotani, K., Kuwahara, K., Kume, A., Sato, M., et al. (2014). Green tea and coffee consumption is inversely associated with depressive symptoms in a Japanese working population. Public Health Nutrition, 17, 625–633.

Povey, J., Sweet, M., Nagel, T., Mills, P. P. J. R., Stassi, C. P., Puruntatameri, A. M. A., Lowell, A., Shand, F., & Dingwall, K. (2020). Drafting the Aboriginal and Islander Mental Health Initiative for Youth (AIMhi-Y) App: Results of a formative mixed methods study. Internet Interventions, 21, 100318. https://doi.org/10.1016/j.invent.2020.100318

Priest, N., Mackean, T., Davis, E., Briggs, L., & Waters, E. (2012). Aboriginal perspectives of child health and wellbeing in an urban setting: Developing a conceptual framework. Health Sociology Review, 21(2), 180–195. https://doi.org/10.5172/hesr.2012.21.2.180

Priest, N., Thompson, L., Mackean, T., Baker, A., & Waters, E. (2017). "Yarning up with Koori kids"—Hearing the voices of Australian urban Indigenous children about their health and well-being. Ethnicity & Health, 22(6), 631–647. https://doi.org/10.1080/13557858.2016.1246418

Rasidi, M. H., Nurzuliza, J., & Ismail, S. (2010). Urban green space design affects urban residents' social interaction. Procedia—Social and Behavioural Sciences, 68, 464–480. https://doi.

org/10.1016/j.sbspro.2012.12.189

Ridani, R., Shand, F. L., Christensen, H., McKay, K., Tighe, J., Burns, J., & Hunter, E. (2015). Suicide prevention in Australian Aboriginal communities: A review of past and present programs. Suicide & Life-Threatening Behaviour, 45(1), 111–140. https://doi.org/10.1111/sltb.12121

Shay, M., & Sarra, G. (2021). Locating the voices of Indigenous young people on identity in Australia: An Indigenist analysis. Diaspora, Indigenous, and Minority Education, 15(3), 166–179. https://doi.org/10.1080/15595692.2021.1907330

Shin, H. D., Carrier, L., Curran, J., & Rothfus, M. (2022). Protective or resilience factors to promote mental health among Indigenous youth in Canada: A scoping review protocol. BMJ Open, 1–6. https://doi.org/10.31219/osf.io/at5sy

Sjoblom, E., Ghidei, W., Leslie, M., James, A., Bartel, R., Campbell, S., & Montesanti, S. (2022). Centring Indigenous knowledge in suicide prevention: A critical scoping review. BMC Public Health, 22, Article 1374. https://doi.org/10.1186/s12889-022-14580-0

Stephens, C., Nettleton, C., Porter, J., Willis, R., & Clark, S. (2005). Indigenous peoples' health—Why are they behind everyone, everywhere? Lancet, 366, 10–13. https://doi.org/10.1016/S0140-6736(05)66801-0

Szanton, S. L., Gill, J. M., & Allen, J. K. (2005). Allostatic load: A mechanism of socioeconomic health disparities? Biological Research for Nursing, 7(1), 7–15. https://doi.org/10.1177/1099800405278216

Walker, T., Molenaar, A., Palermo, C., & Smith, J. (2021). A qualitative study exploring what it means to be healthy for young Indigenous Australians and the role of social media in influencing health behaviour. Health Promotion Journal of Australia, 32(3), 532–540. https://doi.org/10.1002/hpja.391

Williams, D. R., & Mohammed, S. A. (2009). Discrimination and racial disparities in health: Evidence and needed research.

Journal of Behavioral Medicine, 32(1), 20–47.

Wu, Y. Q., Chartier, M., Ly, G., Phanlouvong, A., Thomas, S., Weenusk, J., Murdock, N., Sancassiani, F., Pintus, E., Holte, A., Paulus, P., Moro, M. F., Cossu, G., Angermeyer, M. C., Jean, P. L., Lockett, G. M., Bridges, B., & Mosley, D. V. (2023). Addressing the impact of racial trauma on Black, Indigenous, and People of Colour's (BIPOC) mental, emotional, and physical health through critical consciousness and radical healing: Recommendations for mental health providers. Current Treatment Options in Psychiatry, 10, 372–382. https://doi.org/10.1007/s40501-023-00304-7

Zubrick, S. R., Shepherd, C. C., Dudgeon, P., Gee, G., Paradies, Y., Scrine, C., & Walker, R. (2014). Social determinants of social and emotional wellbeing. In P. Dudgeon, H. Milroy, & R. Walker (Eds.), Working together: Aboriginal and Torres Strait Islander mental health and wellbeing principles and practice (Vol. 2, pp. 93–112). Australian Government Department of the Prime Minister and Cabinet.