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Tolulope Ola: Understanding culture is key to improving mental health

by **Andy Steiner** 07/08/2019



Tolulope Ola: "I want to help people rediscover their roots, uncover their culture and learn how cultural practices can help them heal." Credit: MinnPost photo by Andy Steiner

Tolulope Ola, Ph.D., has only been in Minnesota for a few years, but she's already made her mark.

Since moving to the state in 2014 to complete her <u>postdoc</u> in population studies at the <u>University of</u> <u>Minnesota</u>, the Nigerian native has become deeply involved in the local African community. She organized

the <u>African Mental Health Summit</u> her first year here; since then the event, which draws health care professionals and community members to discuss issues around mental health equity, inclusivity and cultural sensitivity, has more than doubled in size.

This year's summit, titled "Seeing the Past But Not Captured by it: The Need for Cultural Healing," will be held July 11 at the Minneapolis Institute of Art (Mia). <u>Tickets are still available</u>. Attendees will hear from a range of speakers, including Linda James Myers, Ph.D., professor of psychology, psychiatry and African American studies at <u>The Ohio State University</u>; and Oliver J. Williams Ph.D., executive director of the <u>Institute on Domestic Violence in the African American Community</u> at the <u>University of Minnesota School of Social Work</u>.

Ola believes that different communities require different approaches to mental health care. She will present a paper on the topic at the summit, titled "Beyond Race," and facilitate a cultural dialogue.

"We need to align the mind, the body and the spirit in healing," she explained. "Not everyone heals their mental health in the same way."

Because so many mental health professionals in the United States have been trained to take a Western approach to therapy, Ola believes that people of African descent struggle to make progress in treatment. In her typical take-charge style, Ola, who also has a master's degree in public health, decided to tackle the problem herself, working toward a third master's degree, in marriage and family therapy from <u>Adler Graduate School</u> in Minnetonka.

"I wanted to do something that had to do with counseling families," Ola said. "I want to help people rediscover their roots, uncover their culture and learn how cultural practices can help them heal."

On a warm summer afternoon, I met with Ola at the St. Paul office of Restoration for All, the nonprofit she launched last year. When she came to the state, Ola brought along her four children while her husband, an electrical engineer, stayed behind in Nigeria to run the family business. She plans to return home for good sometime in the next five to 10 years, but she hopes that her influence in Minnesota's African community will last much longer than that.

"There are so many important things that can be done here," she said. "I want to help expand the way we approach healing. I want to help expand our understanding of culture and the role it has in improving mental health."

MinnPost: You already have a Ph.D. and two master's degrees. That's a big accomplishment. But then you signed up for another master's program, this time in marriage and family therapy. What inspired you to go back to school yet again?

TO: I see challenges all over. I educate myself to be able to help others. Before I started studying marriage and family therapy, I had been thinking a lot about the way that people heal from mental health challenges. Public health is more about promotion of health and prevention of diseases. I wanted to look at ways of healing mental illnesses for people of African descent.

MP: Should treatment of mental illness be culturally specific? Some people might believe that therapy is therapy, kind of a "one size fits all" approach.

TO: When I started the marriage and family therapy program, I discovered that most of the people I was in class with had gone through therapy before in their lives. I have not done therapy before, so it was foreign to me. I think that the reason I have not had traditional therapy is because I have an alternative way that I heal, and this approach is something that I learned growing up in Nigeria. This is the approach that many Nigerians, many people of African descent, feel most comfortable with.

It's not that I don't have my mental health issues. One issue I face is anxiety. I get anxious about things going on back in Nigeria because I have family there. There is also the issue of belonging, of feeling like an outsider in this country and this state, which also causes anxiety. Like everyone, I have my own issues with my mental health, but I choose to heal myself in a way that feels more culturally appropriate to me.

MP: Is it your goal to become a licensed therapist and provide mental health services to members of the African community?

TO: It wasn't my goal at first. At first I was more interested in learning more about how families work. But now my hope is to become a marriage and family therapist. A month after I started the program, I had a change of heart because I realized that if we don't have enough culturally specific providers as therapists, people in the community will not be getting the kind of mental health services they heed.

MP: It sounds like you feel that traditional mental health care doesn't always work for people of African descent. Why is that?

TO: If you are getting a service that is not making you feel better it is better to not get any services at all. I believe I could create a niche to fill the care gap that exists in mental health care for people of African descent. I see the need because of my own personal experience and because of the personal experience of other people

that I have talked to here. It is important to say, though, that I'm not practicing yet. I'm not licensed yet. I'm not done with school. But when I am finished, I will be licensed and I will be able to provide counseling.

MP: Last year, you founded a nonprofit called Restoration for All. Can you tell me more about its goals?

TO: The mission of Restoration for All is to help people rediscover and reconnect with their roots, especially people who are of African descent. There is a strong African cultural identity. We want people of African descent to reconnect with their African cultural heritage. We also want to look at the gender aspect of healing, too, because I think there is a difference in how women and men heal. I believe that strongly.

The most important thing that this organization wants to work on is for people to be restored. When we talk about *restoration* we are talking about people being healed culturally and strengthening their psychosocial well-being from the inside out. This is key to restoring overall health, both physical and mental.

MP: Will Restoration for All focus on mental health issues that are specific to the African immigrant community?

TO: There are many issues related to immigration that are important for us to pay attention to. Recently I was reading an article that talked about immigration being a social determinant of mental health. I agree totally with that. You need to talk about the environmental issues that can impact people's mental health. Some of those issues are integration and inclusion.

I know a lot of people that are doing really well back in Africa and then they come here and they struggle. They are not able to integrate here just because they see less of themselves here. They think they don't know enough to succeed in a new culture. They think they cannot meet the standard. I don't think that is true. There is a need for people to rediscover themselves, to understand their home culture and how people in that culture survive and thrive. I think self-discovery is really key to people making their way in a new environment. They need to bring those discoveries into their life here. Then they can thrive.

But we won't only be working with people of African descent in this organization. We will also work with other ethnic groups, and with members of the majority culture. One of our biggest programs will be holding interventions.

MP: When you say "intervention," I can't help but think of sobriety interventions — but that's not what you're talking about, is it?

TO: [laughs] Not that kind of intervention. From the perspective of Restoration for All, interventions are activities that help people rediscover themselves and their culture. One very important activity that we want to engage in is "circles," where we talk about people's circles of concern and then about people's circles of control. We want to host circles where people get together to talk about what is bothering them. But we don't just want to listen to people's problems or challenges. We want to be able to provide solutions during the interventions. This is important.

I've attended so many workshops and conferences in Minnesota where we open up a lot of tough things and people go home crying. Then they come back the following year to talk about what made them sad. No. It shouldn't be that way. There should always be a way out. It's our responsibility to provide people with solutions, and we will do that.

MP: How will this focus inform the way you run your programs?

TO: When we have people come together to talk about mental health issues in their community there should be always room where we do self-care. At a lot of these events people's emotions run high. They shouldn't go home like that. There should be a way to give them something that can help them heal and give them assurance that things are under control. This approach is part of African culture. This is the approach that is healthy for our people. We will do that.

MP: Is cultural awareness as a top priority in your approach to healing?

TO: It is the most important. I know it is very possible to win with culture. I wrote a book that I titled, "Winning With Culture." If you want to become an agent of change and a resource for healing, you need to win with culture. If you want to make a change, you need to look at culture as it impacts us as a people, as a community, as a nation.

If you want to be a resource in the community, if you want to teach other people, you need to win with culture, too. For example, if you have a problem and you have tried about 20 ways of solving that problem and it is not working, you need to look at it another way. I think that looking at the way to do it culturally might likely be the way to win. That is what cultural well-being is all about — the ability of people to know their culture, to practice their culture, to heal from the inside out.

MP: Is it difficult to practice cultural well-being for a person who is living in an unfamiliar culture?

TO: It is very difficult. If my way of practicing my spiritual, my cultural well-being is for me to go into a room and then make some rituals, a space like that is not often available in a hospital setting. This is

something we really want people to know. Most of the chapels we have in the hospitals here are white-informed. For American Indians, for instance whenever they do their programs, they do their rituals. There is a way they do their self-care. It is important for them.

I think we should make this work across all cultures and let others know, "This is my culture. This is how I practice it. This is what helps me heal." For some people it is prayers and fasting. For others it is drumming. If you don't have an environment that's conducive for saying prayers, you might not be well culturally.

MP: Do you think that it's best to be treated by people with a deep understanding of your own culture?

TO: If you don't experience something you don't have a language for it. For instance, someone who hasn't experienced war does not have a language for war. They cannot really know what it means. They cannot know what the impact is on a person who experienced it. I know someone who experienced war who if you cough they jump up because they would be so scared. If you close the door they will hide. But people don't always understand that.

With a doctor in this country, you spend about 15 minutes max. Then they don't look at the whole aspect. They don't always understand where a patient's symptoms are really coming from. Including cultural healers in mental health programs is important to fully serve people of different cultures.

MP: Can you give me an example of the power of cultural knowledge for healing?

TO: When my son was 9 years old, he had <u>Ewing's Sarcoma</u>. I took him to Italy for treatment and the doctors there wanted to amputate his arm, but I refused.

The reason why I refused is because there was a Bible passage I was using to pray and I believed so much in that. I didn't want his arm to be cut. It became a big issue and the hospital brought in a psychologist to see me.

I speak British English from Nigeria. I did not speak Italian. It was very difficult for me to communicate. I was full of confusion. When I met with the psychologist, she asked, "If it were your little finger that was paining you and we said we needed to cut it off in order for you to be well, what would you do?" I asked her, "If it were to be your head, would you allow them to cut it off?" She said, "My head? If they cut it off I would die." I said, "That's exactly how I feel. My child will die if they cut off his arm." She wrote a report and said I wasn't mad (mentally ill). Because I refused the amputation, they changed my son's treatment plan. They did everything they needed to do to treat him but they did not cut off his arm. I knew what I was talking about. He is alive and well today.

MP: Do you credit your son's recovery to your spiritual and cultural beliefs?

TO: I think the reason the treatment worked for my son was because there was something else that happened to support it. That thing was prayer. For me, that is a very culturally ingrained, spiritual approach.

MP: Did this experience change your perspective on life and wellness?

TO: Everything I think I'm doing now started from him. It changed my outlook on life. It changed my attitude toward the world. It was a practical example of how people can heal culturally.

Since then my approach has worked so many ways for me. It's very practical. I've tried it. If you believe very strongly, 'I'm not going to die. I'm not going to have this disease," you can be well. I've not been to the hospital for the past five years. Even a flu shot, I don't take it. It's not that I'm opposed to the flu shot, but I think something else is working for me.

MP: This year's African Mental Health Summit has an exciting lineup of speakers and activities. Is there any aspect that you're particularly excited about?

TO: I'm excited about this year's location. We chose to be at Mia because we want people to take a tour of the <u>African gallery</u> there. Just going to that gallery is healing. If you've not been to Africa, looking at African art, pictures and images — that can help you build a stronger connection to that culture. For people of African descent, building those kinds of connections can be a truly healing experience.

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