

Information om Transkulturel Psykiatri, september 2004

GENERELT

Flere indvandrere på narko

Jyllandspostens netavis 22. september 2004

Stadig flere indvandrere og flygtninge i Århus bliver afhængige af narkotika, skønner iagttagere ifølge Urban Århus

Men misbrugerne lever et ængsteligt dobbeltliv, hvor de risikerer at blive udstødt af familien, hvis deres hemmelighed ser dagens lys, lyder advarslen fra en nystartet misbrugsrådgivning i Gellerup.

»Alle de steder, vi kommer i Gellerup, hører vi, at misbrug af stoffer er et stigende problem. I klubberne, i beboerforeningen, hos nærpoltiet. Derfor er det utrolig vigtigt, at vi får ændret holdningerne til misbrug i indvandremiljøet,« siger Nemat Gavvani, en af rådgivningens medarbejdere, til Urban Århus.

Indvandrerbørn mangler plejefamilier

Kristeligt Dagblads netavis, 13. september 2004 / af Britta Søndergaard

Indvandrerbørn, der anbringes uden for hjemmet, risikerer at blive ladt i stikken, fordi kommunerne har svært ved at skaffe de rigtige plejefamilier

Fra artiklen

...Vi får i disse år et stigende antal børn med anden etnisk baggrund end dansk, som skal anbringes uden for hjemmet, for eksempel fordi en af forældrene har psykiske problemer. Hos nogle af familierne møder det stor modstand, at de skal anbringes i en dansk familie. Kan vi derfor finde familier fra børnenes egen kultur, vil det gøre anbringelsen nemmere. Det har også stor betydning for børnene, at familien forstår barnets kulturelle baggrund, og det er helt afgørende, at barnet kan bevare sit sprog samtidig med, at det bliver integreret i det danske samfund, siger socialrådgiver Ulla Sundby-Sørensen fra Glostrup Observations- og behandlingshjem... hvis artiklen stadig er atilgængelig, kan den læses her : <http://www.kristeligt-dagblad.dk/artikel:aid=227206>

Indvandrerkriminalitet overdrives

Politikens netavis 28. september 2004 / af Henrik Kaufholz

Udlændinge er ikke mere kriminelle end danskere, når der tages hensyn til, at de er dårligere uddannet, har ringere job og tjener mindre, viser undersøgelse fra Danmarks Statistik

Indvandrerkriminaliteten er først og fremmest et socialt problem.

Det viser en undersøgelse fra Danmarks Statistik, der har korrigeret kriminalitetstallene fra 2002 for social baggrund, uddannelse, indkomst og social status.

Når der alene tages hensyn til aldersforskelle, er kriminalitetsindekset for udenlandske mænd 138 og for udenlandske kvinder 134. De tilsvarende tal for danskere er 96 for mænd og 97 for kvinder.

Espersen: Bogligt svage skal hjælpes

Korrigeres tallene for sociale forskelle, falder indekset for udenlandske mænd til 104 og for udenlandske kvinder til 101 - lige over det samlede indeks på 100.

Derfor, siger justitsminister Lene Espersen (K) til Ritzaus Bureau, »skal indvandreres kriminalitet forebygges ved at lære dansk samt en indsats i institutioner, skoler, lærepladser og på arbejdsmarkedet«.

»Regeringen prøver at sikre, at unge, som ikke er bogligt stærke, får en uddannelse. Det ændres ikke med et snuptag, men kræver et langt, sejt træk«.

Justitsministeren har fundet tallene frem i et svar til Dansk Folkepartis næstformand, Peter Skaarup. Han havde bedt om en undersøgelse af, om indvandrerkriminaliteten skyldes sociale problemer eller kulturelle forskelle.

læs artiklen her : <http://politiken.dk/VisArtikel.iasp?PageID=338135>

Islam ind på hospitalerne

Kristeligt Dagblads netavis 8. September 2004 / af Britta Søndergaard

Muslimer skal undervise hospitalspersonale i islams forhold til sygdom, lidelse og død

Når en muslim er indlagt på hospitalet, betragtes det ofte som direkte uhøfligt over for patienten, hvis ikke hele den samlede familie dukker op på besøg. Det er blot et konkret eksempel på det kulturmøde, der hver dag foregår på hospitalerne.

I slutningen af september sætter en gruppe sygeplejersker, læger og andre ansatte inden for sundhedsområdet sig på skolebænken for at lære mere om islam. Det er Islamisk-Kristent Studiecenter, der har taget det nye initiativ, hvor muslimer for første gang står for et kursus om islam og sundhed.

- Vi har fået mange tilmeldinger og fornemmer, at der er stort behov for at lære mere om, hvad islam betyder på sundhedsområdet og om muslimers forhold til lidelse, sorg og medicinsk behandling, siger Lissi Rasmussen, centerleder for Islamisk-Kristent Studiecenter.

Næstformand i Dansk Sygeplejeråds Københavns-kreds, Michael Juhl, roser initiativet.

- Som sygeplejersker støder vi meget ofte på situationer, hvor patienter med anden etnisk baggrund opfører sig anderledes. Der er brug for at forstå patienternes kulturelle og religiøse baggrund, hvis de skal kunne rummes af sundhedsvæsenet, og personalet skal undgå at møde dem med fordomme, siger Michael Juhl.

hvis artiklen stadig er tilgængelig kan den læses her : <http://www.kristeligt-dagblad.dk/artikel:aid=226715>

Kurset omtales i vores kalender nederst i dette dokument.

Regeringen overholder sine internationale forpligtelser

Ministeriet for Flygtninge, Indvandrere og Integration, pressemeddelelse

Regeringen offentliggør i dag et notat om menneskerettighedskommissær Alvaro Gil-Robles' rapport af 8. juli 2004 vedrørende udlændingeområdet. Alle menneskerettighedskommissærens anbefalinger og begrundelser analyseres og kommenteres i notatet. Notatet konkluderer, at regeringen overholder sine internationale forpligtelser.

<http://www.inm.dk/index.asp?d=2496&t=13&o=9&n=0>

Utfordringer for multietnisk fødselsomsorg

NAKMIs hjemmeside 15. september 2004 / af Eirik Dahl Vigen

En undersøgelse utført ved Nasjonalt Folkehelseinstitutt viser at det betydelig oftere oppstår svangerskapskomplikasjoner blant innvandrere enn blant landets innfødte.

Sannsynligheten for at det oppstår komplikasjoner i svangerskapet er opptil flere ganger høyere dersom den gravide kommer fra lavinntektsland i Asia og Afrika, sammenliknet med fødende kvinner av norsk opprinnelse. Det viser undersøkelser utført av Siri Vangen* ved Folkehelseinstituttet.

læs artiklen her : <http://www.nakmi.no/nyheter/artikkel.asp?SeksjonID=2&NyhetID=226&SprakID=1>

WMA-kursus for fængselslæger

Verdenslægeföreningen WMA har lanceret et webbaseret kursus, der skal hjælpe fængselslæger til at påvise, at fanger har været udsat for tortur, dels bistå dem i at behandle ofrene.

Initiativet er en reaktion på de beskyldninger, som professor Steven Miles for nylig rettede mod amerikanske militærlæger for at samarbejde med forhørsledere og voldelige vagter og kun i ringe grad vidererapportere de skader og dødsfald, som har været følgerne af den voldelige adfærd.

Tolv-timers-kurset giver ifølge British Medical Journal lægerne indsigt i de etiske og menneskeretlige retningslinjer, som baserer sig på internationale deklARATIONER, hvad angår torur i fængsler, ligesom kurset råder lægerne til, hvad de skal gøre, såfremt de sætter deres eget liv på spil ved at rapportere mishandlingerne.

Derudover er det målet at gøre kurset til en obligatorisk del af pensum på alverdens lægeskoler.

Der er fri adgang for alle til at følge kurset, der er udviklet af den norske lægeförening i samarbejde med WHO og sponsoreret af den norske regering.

Vurderingen er, at mellem 100.000 og 200.000 læger arbejder i fængsler verden over, og forhåbningen er, at de alle vil gennemgå kurset.

Læs mere på : <http://lupin-nma.net>

OM PSYKIATRI

Chronic health problems often accompany PTSD in women

Eve Bender

Though depression has long been linked to poor physical health, researchers now find that women with PTSD are even more likely than those with depression to have physical ills such as high blood pressure and chronic back pain.

Psychiatric news 39(17), 36, 2004

læs artiklen her : <http://pn.psychiatryonline.org/cgi/content/full/39/17/36>

Mange uløste spørgsmål på psykiatrimrådet

Amtsrådsforeningens hjemmeside 24. september 2004

Regionerne får med strukturaftalen ansvaret for den behandlende psykiatri. Forebyggelse, pleje og genoptræning, der ikke foregår under indlæggelse på et sygehus, bliver derimod kommunernes ansvar. Den opsplitning risikerer at underminere den mangeårige ambition om at sikre sammenhæng i tilbuddene til de sindslidende. Amtsrådsforeningen ønsker derfor at samle sygehus-, distrikts og væsentlige dele af socialpsykiatrien i de fremtidige regioner.

Foreningen mener i det hele taget, at strukturaftalen ikke tager højde for den moderne psykiatris virkelighed. Den foreslåede opsplitning levner uklarhed om, hvor distriktspsykiatrien fremover hører hjemme - og f.eks. de opsøgende psykoseteam har heller ingen klar placering.

Hashlignende stof i hjernen dæmper psykisk sygdom

Dagens medicin 14. september 2004 / af Niels-Bjørn Albinus

Et højt niveau af det cannabislignende stof anandamid i hjernen dæmper tilsyneladende risikoen for at udvikle psykoser og skizofreni. Det antyder resultaterne af et forskningsprojekt offentliggjort i tidsskriftet *New Scientist*.

Hjernen producerer et cannabislignende stof, anandamid. Samtidig er hyppig brug af cannabis anset som en medvirkende årsag til forværring af symptomerne hos psykotiske og skizofrene patienter. I undersøgelsen søgte forskergruppen efter en mulig kobling mellem skizofreni og hjernens naturlige cannabinoidsystem, som producerer anandamid.

Forskerne fandt, at personer med psykosesymptomer havde et seks gange så højt anandamid niveau som kontrolgruppen, mens skizofrene havde et otte gange højere niveau.

Spørgsmålet er, om det er det forhøjede niveau, som udløser symptomerne, eller om det er et forsvar mod dem. Her fandt forskergruppen, at desto alvorligere skizofreni, desto lavere anandamidniveau. De tror derfor, at hjernen udløser anandamid som et forsvar mod symptomerne, og at de patienter, der har de værste symptomer, måske ikke selv er i stand til at producere tilstrækkeligt med anandamid til at 'forsvare sig'.

Forskerne fandt også, at anandamidniveauet hos skizofrene er lavest blandt de, der ofte anvender cannabis. Tidligere undersøgelser har vist, at skizofrene bruger cannabis til at dæmpe angst og depressioner. Denne undersøgelse antyder, at cannabisbrug tværtimod forværrer deres tilstand, mener forfatterne.

Ny uddannelse i psykiatri på vej

Amtsrådsforeningens hjemmeside 20. september 2004 / af Gitte Rebsdorf

Sygeplejersker, pædagoger og ergoterapeuter, der arbejder inden for psykiatrien, får snart mulighed for at blive dygtigere til deres arbejde. Undervisningsministeriet har netop godkendt en ny diplomuddannelse til medarbejdere med en mellemlang uddannelse

En ny uddannelse, som skal dygtiggøre medarbejdere i psykiatrien, er netop blevet godkendt i Undervisningsministeriet. Diplomuddannelsen henvender sig til medarbejdere med en mellemlang uddannelse, som allerede arbejder i psykiatrien.

Målet med den nye uddannelse med titlen Psykiatri i teori og praksis er at gøre de ansatte i stand til at arbejde på tværs af faggrænserne, fortæller en af initiativtagerne, psykiatridirektør i Sønderjyllands Amt, Agnete Philipsen.

"Behovet for at udvikle psykiatrien er stigende, og der er brug for, at medarbejderne er i stand til at bygge bro mellem de forskellige områder. Det er eksempelvis ikke nok, at sygeplejersken ser på det, der foregår på sygehuset. Patienten har også et liv udenfor, og der er behov for at få de områder til at hænge sammen," fastslår Agnete Philipsen.

læs artiklen her : <http://www.arf.dk/Nyhedscenter/MandatNet/2004/NyUddannelseIPsykiatriPaaVej.htm>

OM TRANSKULTUREL PSYKIATRI

Dagtilbud til sindslidende med anden etnisk oprindelse end dansk : MØDESTEDET - et åbent værksted

Torsdag d. 7. oktober er der åbent hus kl. 13-15 hos Aktivitetscenter BIFFEN. Anledningen er, at Århus kommune starter et integrationsprojekt og i den anledning åbner MØDESTEDET.

BIFFEN ligger på Silkeborgvej 620 i Brarand. BIFFENS hjemmeside : <http://home19.inet.tele.dk/biffen/index.html>

Etniske minoriteter

Målgruppen af mennesker med anden etnisk baggrund end dansk som også har en sindslidelse vokser. Her er et område hvor socialpsykiatrien skal tænkes bredere end de eksisterende tilbud; det skaber nye udfordringer for medarbejderne, udfordringer der ofte rækker ind i sygehuspsykiatrien, sagsbehandlingen, asylcentre osv. Vi håber at det vil inspirere mange til at tænke nyt og ressourceorienteret i stedet for at se denne gruppe brugere som et problem.

- Det handler om værdighed
- Perspektiver i og for socialpsykiatrien
- Social deroute og hjemløshed
- Sygeplejeklinik med åben dør
- Retssikkerhed og menneskerettigheder – også for flygtninge?
- Vi ser på evnerne – ikke manglerne
- Jeg mister lysten til at sige noget : Erfaringer og konsekvenser ved brugen af tolk
- Han kunne have været igennem det samme som mig : Sabah Kandan er flygtning fra Irak og psykiater. Det giver ham mange fortrin når han behandler flygtninge og indvandrere, men det skaber også problemer at fungere i den private sektor i et primært offentligt sundhedsvæsen
- Ikke kun et spørgsmål om sprog : Amtsskolen i Århus anlægger ikke sin undervisning terapeutisk, men den må gerne have en terapeutisk virkning – og det får den ofte også for de elever der har brug for at lære dansk
- Undervisning og rehabilitering af Traumatiserede flygtninge og indvandrere

Socialpsykiatri, 7(4), 2004

læs hele temanummeret her http://www.socialpsykiatri.dk/multimedia/Socialpsykiatri_4.pdf

Indvandrerkvinder skjuler psykiske lidelser

Kristeligt Dagblads netavis, 10. september / af Morten Rasmussen

Mange kvinder med indvandrerbaggrund får aldrig behandlet en psykisk lidelse, fordi de lever så isoleret. Det ødelægger deres eget og deres børns liv, påpeger forsker

Isolation, manglende netværk og dårlige sprogkunderskaber er årsag til, at mange kvinder med indvandrerbaggrund går rundt med ubehandlede psykiske lidelser.

Det er vurderingen ved Videnscenter for Socialpsykiatri, som via sin kontakt med behandlings- og mødesteder har erfaret, at langt flere mænd end kvinder søger hjælp for psykiske lidelser.

Derfor har centeret iværksat et større projekt, som ifølge projektleder og sygeplejerske Winnie Quarshie har til formål at styrke den opsøgende hjælp til kvinderne.

- Disse kvinder er ikke på arbejdsmarkedet, taler ikke sproget og er fuldstændigt isolerede i hjemmet. Derfor kender de slet ikke til de forskellige tilbud.

Kompetanseoppbygning i lyset av knivdramaet på Bislett

NAKMIs hjemmeside 16. september 2004 / af Nora Ahlberg

Helseutfordringer i minoritetsmiljøer – Kronikk av forskningsdirektør Nora Ahlberg

Fra starten af kroniken

I kjølvannet av debatten om det tragiske trikkedramaet vil jeg gi noen kommentarer om norsk kompetanse når det gjelder minoriteters skjebne i helsevesenet generelt, og i det psykiske helsevern spesielt.

Norge har vært et foregangsland når det gjelder kunnskap om flyktnings psykiske helse og traumatiske lidelser som følge av krig og katastrofer. Selv var jeg tilknyttet det tidligere Psykososialt senter for flyktnings fra dets opprettelse i 1986, de siste årene i ledelsesfunksjon, slik at dette også er blitt en del av min arv. En arv som er tenkt videreført med en bredere profil i forhold til to nasjonale kompetanseenheter; den ene med vekt på voldens virkninger mer generelt; den andre innenfor rammen av et mer helhetlig syn på somatisk og psykisk helse og omsorg når det gjelder minoriteter. Begge er lokalisert på Ullevål universitetssykehus, hvor ledelsen har vist vilje til å satse på det flerkulturelle området.

læs hele kroniken her :

http://www.nakmi.no/opplastede_filer/Kronikk%20Nora%20Ahlberg,%20sept04%20ultimo.pdf

Stigma changes when it crosses borders

The stigma of serious mental illness appears to vary from one country to another. For instance, persons with schizophrenia in Mongolia are not viewed as dangerous, but they are so viewed in Germany

Think what it might be like to live in Siberia and endure the incredibly cold, dark winters. Now imagine what it must be like to live in Siberia and also have schizophrenia. It may sound like a gargantuan challenge, but Siberian residents with schizophrenia appear to have at least one thing going for them—they are not viewed by others as being dangerous.

This finding comes from a study conducted by M.C. Angermeyer, M.D., Ph.D., head of the clinic and outpatients' clinic of psychiatry the University of Leipzig in Germany. The results appeared in the June *Acta Psychiatrica Scandinavica*.

In spring 2001, Angermeyer and his colleagues conducted a survey of Germans' attitudes toward persons with schizophrenia and found that Germans tend to view such persons both as needy and dangerous. So Angermeyer and his team decided to conduct surveys in Russia and Mongolia to see how persons with the illness are viewed there as compared with in Germany.

In summer 2002 they conducted their Russian survey in the Siberian city of Novosibirsk. Novosibirsk is the principal industrial, administrative, and cultural center of western Siberia. A representative sample of residents of Novosibirsk aged 18 years and older—375 people—were interviewed for the survey. The survey was carried out by PreView, a Russian institute specializing in market research, although interviewers were trained and supervised by a member of the German research group.

Psychiatric news 39(18), 33,2004

læs hele artiklen her : <http://pn.psychiatryonline.org/cgi/content/full/39/18/33-a>

Sygdom blandt asylsøgere sætter rekord

Politikens netavis 6. september / af Camilla Ahlmann-Jensen og Flemming Christiansen

Antallet af asylansøgere er faldet med to tredjedele - alligevel stiger udgifter til syge asylsøgere med millionbeløb

Asylsøgerne i de danske asylcentre bliver stadig mere syge i takt med, at sagsbehandlingstiderne bliver længere, og det bliver stadig sværere at få opholdstilladelse.

Udgifterne til asylsøgere, der er for syge af depressioner, psykoser, smerter og lignende til at kunne nøjes med behandling af asylcentrets egne medarbejdere, er således steget fra 30 til 40 millioner kroner de seneste fire år. Det fremgår af Udlændingestyrelsens tal, som Politiken har anmodet om.

læs hele artiklen her : <http://politiken.dk/VisArtikel.iasp?PageID=334432>

LITTERATUR

RAPPORTER

Projekt for traumatiserede flygtninge i Sorø kommune – et behandlingstilbud baseret på musikterapi

Vestsjælland - Psykiatrisk Center har på baggrund af en beslutning om at gøre traumatiserede flygtninge til et indsatsområde iværksat et projekt. Psykiatrisk Center har fået bevilget 1,4 mio. kr. over tre år, hvor der etableres et tilbud til traumatiserede flygtninge baseret på musikterapi. Projektet startede med et pilotprojekt omfattende ét forløb med en mindre gruppe klienter, hvorefter det egentlig projekt startes. Der sigtes mod traumatiserede flygtninge, som ikke i forvejen har et netværk eller er tilknyttet sygehuspsykiatrien.

Formålet var, med brug af en musikterapeut og en tegnerapeut, at klargøre om musik- og tegnerapi gavner de traumatiserede flygtninge.

Rapporten, der er på 20 sider, kan fås i elektronisk form ved henvendelse til Videnscentret transkulturel-psykiatri@rh.dk

ANMELDELSER

Cultural diversity, mental health and psychiatry: the struggle against racism

anmeldt af

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The mere mention of racism gets people into a lather. Those on the left of the political spectrum blame society for everything that is not right in the black ethnic minorities within it. Those on the right ignore its implications by banging the drum of assimilation as if somehow both the situations are at opposite poles. Racism is a tool of socioeconomic oppression (1) and has various varieties (2). The damaging effects of racism can be seen on both physical and mental health. There is no doubt that racism is a socially determined behaviour that results from the international manipulations of the social, political and economic climate. However, racism is not a new phenomenon nor is it simply related to colonial rule and exploitation. The concept of the deviant *‘other’* and the reasons for creating such an *‘other’* is inherent in social functioning of the individual and the society. The understanding for the reasons for creating such an other is essential if the impact of racism is to be understood on individuals especially those who are vulnerable. Although supermodels such as Naomi Campbell have talked of racist experiences surely the experience of those who have millions in their bank account, can afford ghost writers to write novels in their name and have millions who follow their celebrity status and every move, will be different from those who are seeking asylum, and are faced with poor housing and unemployment. Third in his series of books on racism Fernando brings together the evidence to illustrate how racism affects mental health and functioning of the black ethnic minorities in the UK although he uses some American, Canadian and Australian sources. His position has remained unchanged and unfortunately there is no advance taking into account more recent research data. The production values are disappointing – some of the references are outdated and incomplete. The views remain very subjective.

References

1. Moore LJ. Psychiatric contributors to understanding racism. *Transcultural Psychiatry* 2000;37:147–182.
2. Bhugra D, Bhui K. Racism and psychiatry: paradigm lost and

ARTIKLER

Assessing the prevalence of depression in Punjabi and English primary care attenders : the role of culture, physical illness and somatic symptoms

Kamaldeep Bhui, Barts & The London School of Medicine, Queen Mary College, **Dinesh Bhugra**, **David Goldberg**, Institute of Psychiatry, King’s College, **Justin Sauer**, Maudsley Hospital
Andre Tylee, Institute of Psychiatry, King’s College

Abstract

Previous studies exploring the prevalence of depression among South Asians reported inconsistent findings. Research artefacts due to sampling bias, measurement errors and a failure to include ethnographic methods may all explain this. We estimated the prevalence of depression, and variations of prevalence with culture, cultural adaptation, somatic symptoms and physical disability in a cross-sectional primary care survey of Punjabi and English attendees. We included a culture specific screening instrument, culturally adapted the instruments and offered bilingual interviews. We found that, compared with their English counterparts, depressive diagnoses were more common among Punjabis, Punjabi women, Punjabis with physical complaints and, contrary to expectation, even Punjabis with low scores for somatic symptoms.

Key Words: depression – prevalence – primary – Punjabi - somatic

Transcultural psychiatry 41(3), 307-322, 2004

Clonazepam for treatment of sleep disturbances associated with combat-related Posttraumatic Stress Disorder

Marshall E Cates, PharmD BCPP FASHP, Melanie H Bishop, PharmD, Lori L Davis, MD, Joette S Lowe, PharmD, Thomas W Woolley, PhD

Abstract

BACKGROUND: Clonazepam is widely used for the treatment of posttraumatic stress disorder (PTSD)-related sleep disturbances despite very limited published data supporting its use for this indication.

OBJECTIVE: We conducted a pilot-controlled trial to provide more data on this clinical practice and lay the foundation for more definitive studies.

METHODS: The study was designed as a randomized, single-blind (ie, patient only), placebo-controlled, crossover clinical trial involving administration of clonazepam 1 mg at bedtime for one week followed by 2 mg at bedtime for one week. The following week served as a washout period before the alternate treatment was begun. Patients completed sleep diaries each morning upon awakening throughout the study. Parameters included

quantity of sleep, quality of sleep, frequency and intensity of difficulty falling or staying asleep, and frequency and intensity of recurrent distressing dreams.

RESULTS: Six patients with combat-related PTSD participated in the study. There were no statistically significant differences between clonazepam and placebo for any measure, although clonazepam therapy resulted in mild to moderate numeric improvements in difficulty falling or staying asleep. Adverse effects of clonazepam were generally mild and essentially indiscernible from those attributed to placebo. Only one patient elected to receive further treatment with clonazepam at the conclusion of the trial.

CONCLUSIONS: Clonazepam therapy was largely ineffective in improving sleep disturbances, particularly nightmares, associated with combat-related PTSD. The small sample size was a significant limitation of this study, but the prospective design and single-blind, placebo-control parameters were strengths. Further studies are needed to further define the role of this widespread clinical practice.

Key Words: clonazepam, posttraumatic stress disorder

Annals of pharmacotherapy 38(9), 1395-1399, 2004

Culture-sensitive counselling, psychotherapy and support groups in the orthodox-Jewish community : how they work and how they are experienced

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Marian Brooke Rogers, Psychology Department, Royal Holloway, University of London

Abstract

Background: There is political and scientific goodwill towards the provision of culture-sensitive support, but as yet little knowledge about how such support works and what are its strengths and difficulties in practice.

Aims: To study groups offering culture-sensitive psychological and other support to the strictly orthodox Jewish community in London.

Methods: Semi-structured interviews with service providers, potential and actual users from the community, and professionals serving the community. Interviews asked about the aims, functioning and achievements of 10 support groups.

Results: Thematic analysis identified seven important themes: admiration for the work of the groups; appreciation of the benefits of culture-sensitive services; concerns over confidentiality and stigma; concerns over finance and fund-raising; concerns about professionalism; the importance of liaison with rabbinic authorities; need for better dissemination of information.

Conclusions: The strengths and difficulties of providing culture-sensitive services in one community were identified. Areas for attention include vigilance regarding confidentiality, improvements in disseminating information, improvements in the reliability of funding and attention to systematic needs assessment, and to the examination of efficacy of these forms of service provision

International journal of social psychiatry 50(3), 227-240, 2004

Den kommuniserende kroppen - spiseforstyrrelser og kultur

Finn Skårderud

Abstract

Spiseforstyrrelser endrer seg med tid og sted. Det gjelder ikke bare forekomst, men også det meningsinnhold som tillegges symptomene. Kan vi forstå en slik kulturell følsomhet ved disse lidelsesformene? I denne artikkelen gis det bidrag til en slik forståelse, gjennom beskrivelser av møter mellom sårbare individer og risikokulturer. Det tas utgangspunkt i den menneskelige kroppen som et symbolsk redskap. Den konkrete kroppen blir også et redskap for å kommunisere om kulturen selv, om grenser, normer og idealer - og ikke minst om de forskjellige kulturers iboende konflikter.

For å forstå spiseforstyrrelser i dagens sammenheng vektlegges pasienters utsagn om opplevelser av manglende kontroll over livet, både på det indre og det ytre plan. Raske sosiokulturelle endringer diskuteres som patogene faktorer. Samfunnmessig instabilitet bidrar til utydeligere vilkår for sunn og stabil identitet. «Den åpne kroppen» er en relevant metafor som står i et dialektisk forhold til den tillukking og avgrensning som er en del av spiseforstyrrelsene.

Kulturanalyser kan bidra til større forståelse for mangfoldet i disse lidelsene, som arter seg forskjellig i forskjellige kulturer, men også ulikt innenfor vår egen kulturelle sammenheng. Innsikt i spiseforstyrrelsens mangfold er viktig i det kliniske arbeidet.

Tidsskrift for Den norske lægeforening 124(18), 2365-2368, 2004

artiklen kan læses her : <http://www.tidsskriftet.no/lts-pdf/pdf2004/2365-8.pdf>

Depression

- **Listening to diverse voices : understandings and experience of, and interventions for, depression among East African migrants**

- **Perspectives on depression : a carer, consumer and clinician share their perspectives**

Multicultural Mental Health Australia udgiver tidsskriftet "Synergy", Nr. 2 fra 2004 er et særnummer om depression.

Synergy, 2, 2004

artiklerne kan læses her : http://www.mmha.org.au/MMHAPublications/Synergy/2004_No2

Do South African former detainees experience Post-Traumatic Stress? circumventing the demand characteristics of psychological assessment

Ashraf Kagee, Stellenbosch University

Abstract

Most research on persons subjected to physical or psychological torture for political reasons has framed this experience as traumatic, with the sequelae approximating the diagnostic criteria of post-traumatic stress disorder (PTSD). Yet, critiques of the trauma model have called attention to the fact that PTSD represents a Western conceptualization of the concerns of persons who have survived stressful experiences. In order to determine whether symptoms of traumatization are salient psychiatric phenomena for South African former detainees, semi-structured qualitative interviews were conducted with 20 respondents who were detained and tortured for political reasons during the apartheid era. Interviews were transcribed and analysed for thematic content using a grounded theory approach. Results showed that although the main concerns expressed were unrelated to traumatization, participants also indicated that they experienced symptoms of post-traumatic stress. These data suggest that although too great a focus on traumatic responses may be misplaced, it remains important to consider the possibility that former detainees may exhibit symptoms of this nature. Consequently, critiques of the trauma discourse as a Western phenomenon need to be tempered with evidence of the lived reality of psychological sequelae experienced by this population.

Key Words: political detainees - post-traumatic stress disorder

Transcultural psychiatry 41(3), 323-336, 2004

Efficacy and tolerability of mirtazapine and sertraline in Korean veterans with posttraumatic stress disorder: A randomized open label trial

Dr Moon Yong Chung[†], Kyung Ho Min, Yong Ju Jun, Sung Soo Kim, Wan Chul Kim, Eun Mi Jun, Department of Neuropsychiatry, Seoul Veterans Hospital, Seoul, Korea

AbstractBackground : The aim of this study was to investigate the potential use of mirtazapine in Korean veterans diagnosed with PTSD, by comparing it with sertraline, a drug approved for use in PTSD in the USA.

Methods : Efficacy was evaluated by the clinician administered PTSD scale (CAPS-2), the Hamilton rating scale for depression (HAMD-17) and the clinical global impression scale (CGI), at baseline and at weeks 1, 2 and 6. A response was defined as a ≥ 30 % decrease in CAPS-2 total severity, a ≥ 50 % decrease in total HAMD-17 score, and a CGI-I score < 3 .

Results : 51 patients on mirtazapine (mean age/duration of illness: 59.1/33.5 years) and 49 on sertraline (mean age/duration of illness: 60.6/35.6 years) completed the study. The mean daily dosage was 34.1 mg for mirtazapine and 101.5 mg for sertraline. On the CAPS-2 total score more patients responded in the mirtazapine group at week 1 (13 vs 2 %) and week 2 (51 vs 31 %). At week 6 this difference was statistically significant (88 % vs 69 %, $p = 0.039$) on the CAPS-2 total score. The HAMD-17 total score and CGI-I score decreased in both groups, with no significant differences between the groups on all time points. The main side effects for the mirtazapine group were: dry mouth (19.6 %), constipation (19.6 %), somnolence (15.7 %) and weight gain (1.96 %); and for the sertraline group: indigestion (14.3 %), palpitation (6.1 %), agitation (2.0 %), epigastric soreness (2.0 %), insomnia (2.0 %) and sexual dysfunction (2.0 %).

Conclusion : Mirtazapine appeared to be an effective and well-tolerated treatment for PTSD in Korean veterans.

Keywords PTSD • mirtazapine • sertraline • Korea

Human psychopharmacology : clinical and experimental (under udgivelse)

Epidemiology of depression in the Asia Pacific region

Edmond Chiu

Abstract

Objective: To summarise studies reporting rates of depression (for the general population and older samples) and suicide in the Asia Pacific region.

Methods: Information on local data was collected from the members of the SEBoD International Advisory Board on known epidemiological studies. Additionally, online searches were conducted using Medline and PsycInfo for the period 1994–2004.

Results: Across the Asia Pacific region, rates of current or 1-month major depression ranged from 1.3% to 5.5%, rates of major depression in the previous year ranged from 1.7% to 6.7%, and lifetime rates ranged from 1.1% to 19.9%, with a median of 3.7%. Rates of suicide in the Asia Pacific region are now similar to those in Europe and the Americas. The exceptions include China and South Korea.

Conclusions: Epidemiological studies in Asian populations are rare and use various diagnostic criteria. However, studies indicate that rates of depression in Asia Pacific, whilst lower, are comparable to other western countries. As such, depression as a health issue in Asia Pacific demands greater recognition. It is important that Asian countries should have the human and financial resources to conduct large scale epidemiological surveys not only in the area of depression, but also in the broader field of mental disorders.

Key words: depression, epidemiology, suicide rates.

Australasian Psychiatry 12(S1), S4-S10, 2004

Evaluation of insomnia and daytime napping in Iranian Alzheimer disease patients : relationship with severity of dementia and comparison with normal adults

Sina Ohadinia, M.D., Maryam Noroozian, M.D., S. Shahsavand, M.D., and S. Saghafi, M.D.

Abstract

Objective: Alzheimer disease (AD) is among the most common and disabling diseases in adulthood, and it has been largely neglected in traditional societies like Iran. Exacerbation of AD symptoms creates many severe problems, especially in traditional Iranian extended families. One of these problems is insomnia, which can very significantly affect patients' family members because of disturbing insomnia-related behaviors. **Methods:** The authors studied 53 patients with probable AD who had been interviewed for dementia and depression in the Neurology Clinic of Roozbeh Psychiatric Hospital (Tehran University of Medical Sciences). Excluding patients with overlapping multi-infarct dementia, 35 AD patients (22 men, 13 women) and 21 adults without dementia were studied as a comparison group (11 men, 10 women). **Results:** There was a significant relationship between duration of informant-reported symptoms and severity of dementia with daytime napping and more daytime napping among AD patients than in the comparison group. There was also a significant relationship between cognitive decline and daytime napping in the comparison group. Our study showed a relationship between insomnia and aggression, between daytime napping and paranoid delusions; and between onset of insomnia and anxiety. The comparison group showed a significant relationship between depression and daytime napping.

Conclusions: Daytime napping and insomnia are very common among Iranian AD patients, much more so than in normal adults. There is also a significant relationship among psychiatric symptoms, daytime napping, and insomnia, but it seems that daytime napping and insomnia in depressed AD patients are caused more by the progress of AD than by depression.

Key Words: Sleep Disorders - Alzheimer Disease

American journal of geriatric psychiatry 12(5), 517-522, 2004

Medical Compliance in the East

Siow Ann Chong & Mythily, Institute Of Mental Health, Singapore

Fra starten af artiklen

Non-compliance with medical treatment is a pervasive clinical problem (Powsner & Spitzer, 2003). Patients with psychiatric disorders, especially those with psychotic disorders, are no exception when it comes to non-compliance; in fact they may even be less compliant with as many as 75% of patients not complying with their medication (Perkins, 1991) with lack of insight being cited as the main contributing factor (Kemp & David, 1999). Interventions to increase compliance in the West have focused almost exclusively on patients. However, our experience in Singapore is that the family plays an important role in decision-making and family members often enforce compliance for patients with psychosis. This has ranged from coercion to covert administration of the prescribed psychotropic medication in the patient's food and drinks. Families do this at considerable risk of arousing the wrath of the patient and perhaps even a violent reaction, or other untoward consequences as illustrated by the case of the husband of one of our patients with paranoid schizophrenia.

Transcultural psychiatry 41(3), 422-423, 2004

A psychiatrist in cultural transition : personal and professional dilemmas

Mila Goldner-Vukov, University of Auckland

Abstract

This article describes the author's personal and professional dilemmas, encountered as a psychiatrist in the process of migration from Central Europe to New Zealand. The dilemmas include: (i) personal experiences in the stages of migration, (ii) struggles within the author's own multi-ethnic community, (iii) biculturalism, (iv) the unexpected seriousness of psychopathology, and (v) the tendency for overidentification. Professionals in a cultural transition should be aware that personal and professional challenges are interconnected. The concepts of loyalty, relational ethics and existential humanism were valuable in the resolution of these dilemmas.

Key Words: biculturalism – culture – ethnicity – existentialism - migration
Transcultural psychiatry 41(3), 386-405, 2004

Racial disparity in the use of ECT for affective disorders

William R. Breakey, M.B., F.R.C.Psych., and Gary J. Dunn, M.A.S., M.S.N., R.N.

Abstract

OBJECTIVE: Published reports indicate that African Americans are underrepresented among patients treated with ECT. The reason for this disparity in practice has not been determined. This study addressed this question by using existing data on a large series of patients treated with ECT at a single academic medical center.

METHOD: The hospital's administrative databases were used to select Caucasian and African American patients with a diagnosis of major affective disorder treated over the period from November 1993 to March 2002.

Independent variables were age, sex, treatment unit, readmission within 30 days, type of insurance, and geographic zone of residence. The dependent variable was likelihood of being treated with ECT, computed for each race group. **RESULTS:** Caucasians were more likely than African Americans to be treated with ECT (odds ratio=4.71; 95% confidence interval [CI]=3.77–5.90). None of the variables examined provided an explanation for this disparity. When all of the variables were controlled simultaneously, the likelihood of being treated with ECT remained significantly higher for Caucasians than for African Americans (odds ratio=2.48; 95% CI=1.89–3.25).

CONCLUSIONS: The racial disparity in the use of ECT cannot be explained on the basis of the variables studied. It is not an artifact of the age of the patient population, nor can it be explained on the basis of insurance coverage, the social class of the patients, or their illnesses' being more treatment resistant. The authors propose several other hypotheses, including explanations relating to clinical presentation, differential response to other treatments, differences in patients' willingness to consent, and physicians' behavior, that could be explored by using other methods.

American journal of psychiatry 161(9), 1635-1641, 2004

Religious beliefs and religious delusions: Response to treatment in schizophrenia

Ronald Siddle, Gillian Haddock , Nicholas Tarrier , E. Brian Faragher

Abstract:

It has been suggested that patients with strong religious beliefs or religious delusions have poor outcome from psychiatric treatment. The aim of the investigation was to establish if the patients' shorter-term response to psychiatric treatment was affected by these factors. A quasi-experimental design was used, in which patients with schizophrenia were assessed soon after admission to hospital. They were categorised as (1) religious or not religious, (2) experiencing religious delusions or not, using reliable criteria. Patients were given their routine treatment and their symptoms were then re-assessed after four weeks. There was no difference in response to treatment between the religious and non-religious patients. There was no difference between patients who had religious delusions and those who had other types of delusions. Though this study does not settle the debate, it suggests that strong religious beliefs or religious delusions do not adversely affect the patient's response to treatment in the shorter term.

Mental health religion and culture 7(3), 211-223, 2004

Sell a book and cook a dog: misery, memory and space from Siberian camps to apartheid

Els van Dongen, University of Amsterdam

Abstract

In this article, the life story of a Polish woman in South Africa is used to illustrate that stories of exile are 'matter out of place' in host countries. Space is a central category in both the story of exiles and in the collective history of receiving countries, but it has different emotional, social, cultural and political meanings. Sometimes stories of exile are denied a place in the social memory of a society. Therefore, recollection and making sense of experienced misery in foreign contexts is often a difficult and lonely undertaking. The article links the story to macro-political processes and attempts to answer questions regarding the consequences of the lack of meaningful space for exiles to remember. Collective and national memories and ceremonies are often exclusive and offer no place for 'alien' memories. Therapeutic repertoires often fail to address the emotional value of communal sharing a socio-cultural and (meta) physical space. It is argued that because the state does not take responsibility for providing a (symbolic) space for the mourning and reconciliation of people whose memories are out of place, transcultural psychiatry – its subsystem – will have to reflect on how to provide such a space.

Key Words: exile – history – memory - mental health care - South Africa - space - trauma

Transcultural psychiatry 41(3), 360-385, 2004

Substance use, religiosity, and other protective factors among Hungarian adolescents

Bettina F. Piko and Kevin M. Fitzpatrick

Abstract

A number of risk factors have emerged as important correlates of adolescent substance use. In addition, research continues to focus on which factors act as mediators protecting adolescents from negative outcomes. One of these protective factors is religiosity, and the focus of this paper is to examine its role in the life of adolescents in postsocialist Hungary, where active religious participation was highly discouraged until a decade ago. The sample of adolescents ($N=1240$) consists of middle and high school students living in Szeged, Hungary. The calculated odds ratios for the relationship between religiosity, and other protective factors, and substance use revealed that smoking, drinking, and marijuana use among boys and marijuana use only among girls were related to religiosity. Group membership, for example, participation in school clubs, sports clubs, or religious groups, seems to be more important for boys compared with girls. A more careful examination of the protective role of religion in postsocialist Hungary could be extremely important in a country where both adult and adolescent smoking and alcohol use is among the highest in Europe.

Author Keywords: Substance use; Adolescence; Religiosity; Protection

Addictive behaviors 29(6), 1095-1107, 2004

Suicide and the unique prevalence pattern of schizophrenia in mainland China: a retrospective observational study

Michael R Phillips, MD, Gonghuan Yang, MD, Shuran Li, MD and Yue Li, MS

Abstract

Background Unlike almost every other country in the world, the prevalence of both schizophrenia and suicide in China is higher in women than in men. Schizophrenia and suicide are important public-health problems for China that might be related to each other. We present prevalence data for schizophrenia and estimate relative and attributable risk of suicide in people with schizophrenia in mainland China.

Methods We used data from the national psychiatric epidemiology study, the Ministry of Health's mortality registry, the census, and the national psychological autopsy study to estimate frequencies and rates of schizophrenia, suicide, and suicide in people with schizophrenia aged 15 years and older in mainland China during 1995–99.

Findings We estimated 4.25 million people with schizophrenia in China, and 284614 suicides and 28737 suicides in people with schizophrenia yearly. Prevalence of schizophrenia was higher in women than men (relative risk 1.77 [95% CI 1.15–2.72]), and greater in urban than rural areas (1.62 [1.10–2.40]). Risk of suicide was greater in women than men (1.22 [1.20–1.23]) and in rural than urban areas (3.61 [3.56–3.66]). Relative risk of suicide in individuals with schizophrenia compared with those without was 23.8 (18.8–30.2); the proportion of all suicides attributable to schizophrenia was 9.7% (7.7–12.1). Relative risk of suicide in rural residents with schizophrenia versus those without was higher in men than in women (ratio of two relative risks 2.02 [1.13–3.63]), but in urban residents with schizophrenia the ratio was lower in men than women (0.56 [0.21–49]).

Interpretation Risk factors for suicide vary in people with different mental disorders, so identification of illness-specific risk profiles would improve prediction of suicide and help tailor prevention efforts. The difference in suicide rates by sex and residential location in individuals with schizophrenia might be one of several contributing factors to the unique epidemiological pattern of schizophrenia in China

Lancet 364(9439), 1062-1068, 2004

Susto and soul loss in Mexicans and Mexican Americans

Mark Glazer, University of Texas-Pan American, Roberta D. Baer, University of South Florida, Susan C. Weller University of Texas Medical Branch, Javier Eduardo Garcia de Alba, Mexican Institute of Social Security, Stephen W. Liebowitz, University of Texas-Pan American

Abstract

Susto is a Latin American folk illness attributed to having a fright-ening experience, often including "soul loss" as part of the etiology. This article focuses on contemporary descriptions of susto among mestizos in Mexico and Mexican Americans in south Texas and explores the link between susto and soul loss in detail. Interviews conducted in Guadalajara, Mexico ($n = 50$), and in the Rio Grande Valley of Texas ($n = 951$) indicate that only a minority of informants aware of susto have also heard of soul loss and that even among those who have had susto, soul loss is not necessarily a part of susto. Soul loss, in fact, is more often equated with death. Our data, as well as a careful review of earlier reports of susto and soul loss, suggest that what was thought to have left the body may not be the "soul" but rather a "vital force."

Key Words: Latin America - susto - Mexico - Mexican Americans

Cross-cultural research 38(3), 270-288, 2004

Tolkeanvendelse i arbejdet med flygtninge og indvandrerpatienter

Lise Dhyr og Nina Hammerik

Fra starten af artiklen

Brugen af professionel tolk anbefales, men mange tolke er ikke professionelle. Problemerne ved tolkeanvendelse gennemgås.

I Danmark er ca. 8% af befolkningen af anden etnisk herkomst og har derfor et andet modersmål end dansk. Mange af disse mennesker har ydermere ikke et modersmål, der er baseret på det latinske alfabet og har dermed relativt svært ved at tilegne sig det danske sprog, både mundtligt og skriftligt. Nogle vil være analfabeter. For snart 40 år siden, da Danmark i vid udstrækning hentede gæstearbejdere til landet, var der ikke tradition for at tilbyde danskundervisning.

Et sådant tilbud blev først lovforankret i forbindelse med indførelsen af den nye integrationslov i januar 1999 gældende for personer, som ønsker varig opholdstilladelse og/eller modtager den såkaldte starthjælp (1). Derudover kan indvandrerne blive mødt med krav om deltagelse i danskundervisning i forbindelse med den øvrige sociallovgivning (2).

Det er uvist, hvor stort tolkebehovet i Danmark egentlig er. Men i og med en forventet fortsat indvandring samt det forhold, at personer af forskellige årsager, som f.eks. sygdom og social (3) isolation, ikke lærer at mestre det danske sprog, vil der altid være en gruppe borgere, der vil have brug for kvalificeret tolkebistand, når de skal i kontakt med de danske myndigheder.

Læge-patient-samtalen er fundamentet for de praktiserende lægers arbejde. For lægen som for den ikkedansktalende patient er det derfor af største nødvendighed, at der er mulighed for at rekvirere professionel tolkebistand, og at lægerne er i stand til at anvende disse på kvalificeret vis.

Tolkeområdet – stadig et gedemarked

Enhver kan i princippet kalde sig tolk, idet titlen ikke er beskyttet eller omfattet af en autorisation. For at være kvalificeret til at arbejde som tolk i Danmark, skal man dog inden for de såkaldte hovedsprog, engelsk, tysk, fransk, spansk, italiensk og russisk, have en beskikkelse som translatør og tolk. Kommer man derimod fra en etnisk minoritetsgruppe, kan man i flere tilfælde gå direkte ind fra gaden og tilmelde sig et af de mange tolkebureauer, der efterhånden findes overalt i landet. Det vides, at udbuddet af uddannede og dermed kvalificerede tolke ikke er tilstrækkeligt stort i de sprog, man blandt sprogfolk omtaler som »ekstotiske« sprog såsom arabisk, tyrkisk, somali, m.fl. Således findes der eksempelvis ikke en eneste reelt uddannet tolk blandt de somaliske tolke.

Det er for udenforstående uigennemsigtigt, hvilke krav de private bureauer stiller til tolkenes kvalifikationer, og hvorledes de vurderer samme. Fra en upubliceret undersøgelse i et sjællandsk amt foretaget af to læger (4) fremgik det ved rundspørge at 46% af tolkene ikke havde kompetencer inden for sundhedsområdet, at kun 38% havde en formaliseret tolkeuddannelse og kun 14% modtog supervision og/eller efteruddannelse.

I 1990 var der en artikel i det nu nedlagte blad Samspil (5), som beskæftigede sig med integrationssspørgsmål, med overskriften: Tolkeområdet – et gedemarked. Af artiklen fremgik det blandt andet, at man inden for sundhedsvæsenet ikke havde styr på tolkenes kvalifikationer og derfor risikerede at anvende personer, som ikke havde den fornødne ekspertise. Der blev også påpeget mangler hos brugerne i viden om korrekt tolkeanvendelse. Selvom der i den forløbne tid er sket nogle fremskridt, er der dog også sket mange tilbageskridt, og problemstillingerne synes at være de samme.

Månedsskrift for praktisk lægegerning, 9, 2004

læs artiklen her : <http://www.mpl.dk/show.asp?id=218&nr=7344&show=article&from=nr>

Treatment guidelines for depression in the Asia Pacific region: a review of current developments

Ian Hickie

Abstract

Objective: This paper examines the development of treatment guidelines, medication algorithms and clinical pathway guides for depression in countries participating in the SEBoD Initiative.

Methods: A systematic review of the extent of development of treatment guidelines, medication algorithms or clinical pathway guides for depression in participating countries.

Results: Most countries in the Asia Pacific region have commenced the development of treatment guidelines, medication algorithms or clinical pathway guides. The promoters of such efforts have included a range of professional and government bodies. Most efforts have borrowed heavily on existing international guidelines. There is a significant emphasis on medication practices in most countries, with less emphasis on the role of psychological or other non-pharmacological approaches. There has been insufficient emphasis on integrating local classification, assessment and cultural practices into the provision of high quality care. Important additional measures, including practice surveys and consensus judgements, have been undertaken in some countries.

Conclusions: The development of a genuine quality improvement movement for depression treatments is in its infancy in the Asia Pacific region. However, there is now the capacity to bring together such efforts at a regional

level and, in doing so, promote standards for best care, more community and professional involvement and the uptake of a wider variety of treatment approaches.

Key words: depression, treatment guidelines, quality improvement.

Australasian Psychiatry 12(S1), S33-S37, 2004

Twenty-year course of schizophrenia : the Madras longitudinal study

R Thara, MD, PhD

Objective: To follow up 90 first-episode schizophrenia patients after 20 years and to study the course of symptomatology, work, social functioning, and pattern of illness during this period.

Methods: The Present State Examination and the Psychiatric and Personal History Schedule were administered at fixed points during follow-up. The measures adopted to ensure a good follow-up rate (67%) after 20 years under adverse conditions are described.

Results: Complete data were obtained from 61 subjects; 16 had died, and 13 could not be traced. After 20 years, 5 patients had recovered completely, and another 5 were continuously ill. Most of the cohort had multiple relapses with or without complete remission between them. The Global Assessment of Functioning Scale showed that symptoms and social functioning in this sample approximated results from developing countries and were much better than those of developed nations. There were not many sex differences. Marriage and occupational rates were higher than those observed in many published reports.

Conclusions: This is one of the few long-term follow-up studies from the developing world. It reveals a pattern of course and functioning distinctly better than that found in many such studies from the developed nations.

Clinical Implications

A 20-year follow-up of first-onset schizophrenia patients helps in understanding the longitudinal course of symptoms and the impact of interventions on them.

Studies of social functioning that include work and marriage will help the planning of rehabilitation strategies. The rather high mortality rate draws attention to the effects of suicide, poor living conditions, and comorbidity in the study subjects.

Limitations

The follow-up was both prospective and retrospective. A single rater was involved throughout the study. The results have limited generalizability.

Key Words: schizophrenia, follow-up studies, pattern of course, mortality, work

Canadian journal of psychiatry 49(8), 564–569, 2004

artiklen kan læses her : <http://www.cpa-apc.org/Publications/CJP/current/thara.pdf>

KALENDER

2004

Oktober

11. oktober, Stockholm

Samtalet som verktyg : om konsten at samtala med människor

Transkulturellt Centrum, Stockholm

Seminarier syftar till att belysa hur vi kan samtala med människor i annorlunda livssituationer. Binnie Kristal-Andersson, fil dr i psykologi, leg psykoterapeut föreläser utifrån sin bok om .Att förstå flyktingar, invandrare och deras barn - en psykologisk modell.

flere informationer her : http://www.sll.se/docs/w_tkc/utbildning/Samtalet_041011.doc

13. – 17. oktober, Providence USA

Toward multiculturalism : cultural exclusion and cultural integration in an age of global insecurity : 2004 annual meeting

World Psychiatric Association. Transcultural Psychiatry Section og Society for the Study of Psychiatry and Culture

Tilmelding og yderligere information kan findes her :

http://www.psychiatryandculture.org/SSPC_WPATPC_meeting_2004.pdf

19. oktober, Stockholm

Hälsöfrämjande föräldrastöd till familjer som migrerat till Sverige

Transkulturellt Centrum

Seminarier syftar till att belysa betydelsen av att balansera enskilda familjemedlemmars be-

hov och strategier gentemot gemensamma lojaliteter. Det blir då tydligt hur viktigt det är att inkludera kulturfrågor i hälso- och konflikthanteringsarbete. Frågor kring bemötande och förhållningssätt och hur gruppmetoder kan förebygga ohälsa hos nyinvandrade familjer kommer att diskuteras. Medverkande är Kenneth Ritzén, religionspsykolog, Uppsala, Marcela Bravo, Bengt-Erik Ginsburg och Inga-Lill Schönning, TC
800:- exkl moms
ansvarliga : Inga-Lill Schönning tel 08-672 29 12, Bengt-Erik Ginsburg tel 08-672 29 07
kontakt og information : http://www.sll.se/w_tkc/59353.cs?dirid=59400

28. – 29. oktober 2004, København

Beyond trauma : narratives of transformation - envisioning futures Praksis for Psykologi og Psykiatri

2-dages workshop ed Peter Lang , Elspeth McAdam og Mariah Wheeler

A two day workshop exploring a variety of ways of working with people that lead to transformation and recovery from trauma. The focus for this “beyond trauma” work will include practices for opening up different futures for the people who have experienced shocking and traumatic events. Mariah Wheeler, Elspeth McAdam and Peter Lang will present experiences, arising from their practice in therapy, consultation and supervision, and working in communities. This will give workshop participants practices and ways of thinking to cope with the challenging opportunities working “beyond trauma”. They will draw on systemic, appreciative and narrative methods which the people they have worked with have found meaningful, useful and liberating.

Day One

Session one

Creating stories of hope – our hopes for this work and learning for, from and with or clients.

Session two

Values, ethical and aesthetics of working with people in transforming the stories of their lives. Relational practices, meeting with families, couples and individuals.

Session three

Understanding emotions as ways of positioning oneself

- Working with the stories of the future
- The dream that was there before the trauma
- The traumas connected with the dreams

Session four

Working in the times of trauma – communities and talking groups

Day two

Session one

Working with refugees – multiple futures – “going back”, being “sent back”, staying in the country, moving to another country

Session two:

Not only telling the story – but elaborations in the story – creating monuments – relational monuments as well as other monuments — monuments as a witness and as a resource – make these monuments to the future if you told a different story about them - numents as symbols of renewal.

Session three

Bodily memories — Interviewing into the experience of the trauma and ways to start elaboration and bringing to light what has been lived and not spoken. Making connections which are already in the story and you bring out something different & co-create new ways of going on.

Session four:

Working with children and families and the witnessing process and people who can be witnesses.

Østerbrohuset
Århusgade 103
2100 Kbhvn Ø

Pris 3500 kr inkl. Lunch og kaffe

Tilmelding pr. e-mail eller brev til Staffan Røijen Vesterbrogade 20, 2 tv. 1620 Kbh. V
e-mail staffan@praksis.net

Pladsen er først endeligt reserveret ved indbetaling af 3500 kroner til Jyskebank reg. nr 5013 kontonummer 116922-4 mærket med dit navn.

Ved afbud inden 1.okt refunderes hele beløbet. Kurset gennemføres ved min. 30 deltagere.

28. – 30 oktober 2004, Helsingør

Nye perspektiver i behandling, 16. nordiske konference om psykoterapi for traumatiserede flygtninge

Program

Programmet omhandler psykoterapi for traumatiserede flygtninge, med vægt på nye perspektiver i behandlingen.

3 hovedtalere vil give plenum foredrag inden for hver deres område:

Metin Basoglu – Brief behavioural treatment of torture survivors.

Diane Heller – Treatment strategies and the transformative process resulting from the renegotiation of extreme life events.

Christian Horst – Integration og marginalisering.

Desuden afholdes en workshop med Diane Heller – Demonstrations of biofeedback equipment to show the reregulation of the autonomic nervous system and brain function as well as breath rate and temperature changes.

Herudover vil 3 parallelle spor gennemløbe konferencen indenfor problemstillingerne:

- Somatisk
- Social
- Psykologisk

Inden for hvert spor etableres et antal grupper med et givent interesseområde. Tværgående sessioner vil samle trådene mellem de enkelte problemstillinger.

Program og talere vil løbende blive opdateret på konferencens website: <http://www.congress-consult.com/ptf/>

November

4. november og 2. december 2004, Næstved

Traumatiserede flygtninge og socialt arbejde - udfra egen praksis

Dansk Flygtningehjælp

Målgruppe

Sagsbehandlere i integrationsafdelinger, børne- og ungeafdelinger samt arbejdsmarkedsafdelinger

Undervisningen er gratis, da Dansk Flygtningehjælp modtager en bevilling fra Integrationsministeriet, men der opkræves et beløb på kr. 1.000 pr. kursus til lokaler, forplejning, materialer med videre.

Underviser på kurserne er socialrådgiver og psykoterapeut Grete Svendsen, Dansk Flygtningehjælps Psykosociale Enhed.

Kursusprogram med tilmeldingsblanket kan rekvireres hos Dansk Flygtningehjælp:

Nørrebrogade 32, 3., 2200 København N, Lisbeth Iversen, tlf. 3536 4747

Jernbanegade 23 B, 4000 Roskilde, Anne-Dorte Larsen, tlf. 4632 0200

Messingvej 52 A, 8900 Randers, Birte Bøgh, tlf. 8644 8033

Yderligere oplysninger fås også hos Grete Svendsen og Annelise Murakami: Tlf. 3373 5135 og 3373 5113, e-mail: grete.svendsen@drc.dk.

14. – 18. november 2004, New Orleans

20th annual meeting, International Society for Traumatic Stress Studies

In November 2004, the International Society for Traumatic Stress Studies (ISTSS) will hold its 20th Annual Meeting in New Orleans, Louisiana, USA. In recognition of this important anniversary, the meeting will explore a theme of great international relevance: war as a universal trauma. To many trauma professionals, the topic of war trauma conjures up images of soldiers or veterans. In fact, war affects not only combatants but also the men, women and children in whose country the fighting takes place, exposing them to danger and dislocation, and sometimes destroying the institutions and infrastructure of their societies.

Relatively few armed conflicts are as visible as the recent wars in Iraq or Afghanistan, or the historic wars of this century, including World Wars I and II or the Vietnam War. It is easy to forget that wars can have a cumulative and devastating impact on the lives of individuals who have experienced them. The effects are disproportionately severe in the developing world, where poverty and lack of even basic resources can exacerbate the problems of living in an active war zone or in trying to recover after the fighting has stopped.

The scope of the 20th annual meeting is broad in recognition of the diverse types of populations affected by war: active duty personnel, veterans, civilian adults and children exposed to war trauma, aid workers, refugees and internally displaced persons. Trauma types experienced by these populations include combat, peacekeeping, terrorism and bioterrorism, as well as torture, sexual trauma, and other types of violence that may occur during an armed conflict. Topics will range from basic science and epidemiology to treatment and prevention, as well as policy and other issues of social relevance.

information : <http://www.istss.org/meetings/cfp2004.htm>

17. november – 15. december, København, onsdage fra 18.00 – 21.00

Kursus i omsorgsarbejde på hospitaler

Islamisk Kristent Studiecenter og Muslimer i Dialog

Baggrunden for kurset er at gøre muslimer kvalificerede til at indgå i en besøgstjeneste blandt personer med muslimsk baggrund på hospitaler i Københavnsområdet. IKS vil koordinere arbejdet og etablere netværk bestående af muslimer, der vil stå til rådighed for hospitalspersonale, patienter og pårørende, der ønsker kontakt med en muslim.

Islamisk-Kristent Studiecenter ønsker i samarbejde med Muslimer i Dialog og Kontoret for Sygehusberedskab at etablere en besøgs- og rådgivningstjeneste for muslimske patienter, pårørende og personale på hospitaler i Københavnsområdet

Der opleves et stigende behov på de danske hospitaler for bistand fra muslimer og dialogerfarne både som rådgivere og samtalepartnere i forhold til patienter og pårørende med muslimsk baggrund. Tidligere har der ikke eksisteret et organiseret samarbejde på dette område i Danmark.

Sygehusenes personale har derfor ikke haft nogen at tilkalde eller henvise til i situationer, hvor muslimske patienter ikke har et familienetværk, der kan træde til. Ligeledes har der ikke været muslimske omsorgsarbejdere inddraget i de kriseterapeutiske ordninger, hvor sygehuspræsterne spiller en naturlig rolle. Etablering af hospitalsnetværk

IKS har gennem et par år haft en vis kontakt til Amtssygehuset i Herlev og Glostrup Sygehus, formidlet af sygehuspræsterne. En navneliste, bestående af muslimer med forskellig sproglig baggrund, har således været tilgængelig for personalet på de to sygehuse på personalekontorer og på hospitalernes intranet. På grund af stigende efterspørgsel søges denne ordning nu udvidet og sat i mere faste rammer

Kursets formål at gøre muslimer kvalificerede som samtalepartnere til mennesker i en krisesituation, herunder patienter og pårørende med muslimsk baggrund på hospitaler. Det er ingen betingelse for deltagelse i kurset, at man indgår i hospitals netværket. Alle med interesse i kursets indhold kan deltage. Der fokuseres primært på muslimske deltagere, men også kristne med etnisk minoritetsbaggrund kan få gavn af kurset.

Kurset består af undervisning og træning i samtale. Underviserne har både teoretisk og praktisk erfaring på området. Der udstedes et diplom for fuldførelse af kurset. Desuden er der mulighed for at gå videre med et tillægskursus i foråret 2005.

17. november:

Introduktion til kurset

24. november:

Islam på hospitalet

Hvorfor har muslimer ansvar for mennesker i krisesituationer?

Islams opfattelse af lidelse, sygdom og død

Konkrete foranstaltninger og procedurer i forbindelse med fødsel, død og sygdom.

1. december:

Samtale med kriseramte, syge og døende

Tab, sorg og krise.

Menneskekundskab og selvindsigt. Opmærksomhed og indlevelse.

Mødet med mennesker i konkrete livssituationer.

Underviser: Elmo Due, lektor ved Pastorseminariet

8. december:

Erfaringer fra omsorgsarbejdet

Personale og patienter - problemer i kulturmødet.

Besøg på Amtssygehuset i Herlev.

Underviser: sygehuspræst Tom Andersen Kjær, Herlev Amtssygehus

15. december:

Transkulturel psykiatri

Tværkulturel forståelse.

Underviser: overlæge Marianne Kastrup, Videnscenter for Transkulturel Psykiatri

Deltagelse er gratis. Der serveres et let måltid.

Yderligere oplysninger ved henvendelse til IK : <http://www.ikstudiecenter.dk/>

24. – 25. november 2004, Kolding

Om gruppearbejde med flygtningebørn - to inspirationsdage

Dansk Flygtningehjælp

Målgruppe

Medarbejdere i socialforvaltningen, i PPR-ordninger, sundhedsplejersker, pædagoger i daginstitutioner, folkeskolelærere og SFO-medarbejdere.

Undervisningen er gratis, da Dansk Flygtningehjælp modtager en bevilling fra Integrationsministeriet, men der opkræves et beløb på kr. 1.000 pr. kursus til lokaler, forplejning, materialer med videre.

Underviser på kurserne er socialrådgiver og psykoterapeut Grete Svendsen, Dansk Flygtningehjælp Psykosociale Enhed.

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2005

Januar

13. - 14. januar 2005, Herning

Seminar om Traume, Identitet og Mestring

Psykiatrien i Ringkøbing Amt, Psykiatrisk Afdeling Herning

Seminar om Traume, Identitet og Mestring med Sverre Varvin, psykiater, psykoanalytiker, dr.phil. og Carl Ivar Dahl, psykiater, psykoanalytiker.

Begge har tilknytning til Center for Flygtninge ved Oslo Universitet. Sverre Varvin har i 2003 udgivet bogen Flugt og Eksil - traume, identitet og mestring og har i 2002 forsvaret sin disputats om Mental Survival Strategies after Extreme Traumatization. Begge har stor psykoterapeutisk erfaring og er kendte supervisorer i psykoterapeutiske miljøer i Norge og Danmark.

Indhold:

- om ekstreme oplevelser med tortur, umenneskelig behandling under fængselsophold og ekstreme oplevelser under krigshandlinger
- om seksuel og voldelig traumatisering i barndom
- om traumet og om posttraumatisk stress
- om tab og sorg
- om mestring af ekstrem traumatisering
- om mødet med det traumatiserede menneske?
- om psykiske lidelser hos mennesker der er på flugt og i eksil fra traumatisering
- om psykiatrisk og psykoterapeutisk indsats og behandling - både under indlæggelse og ambulant

- om retraumatisering i den terapeutiske proces
- eksilets psykologi

Form

Forelæsninger og plenumdrøftelser om formiddagene.

Tilvalg til emne-orienterede work-shop's - herunder supervisionsmulighed – om eftermiddagen og med afsluttende plenumdrøftelser.

Målgruppe

Tværfaglige personalegrupper i psykiatrisk arbejde. Det er således et seminar der henvender sig bredt til den psykiatriske relationsbehandler uanset grunduddannelse.

Kursusledelse og medundervisere:

Jens Bolvig Hansen og Lars Thorgaard, psykiatere og erfarne psykoterapeuter og supervisorer

Pris: Ca. pris er 2000 kroner. Dækker seminar, med måltider, eksklusiv aftensmåltid og evt. overnatning. Overnatning kan arrangeres.

Oplysninger/

Tilmelding: Overlæge Lars Thorgaard, Psykiatrisk afdeling i Herning. Telefon 9927 2443 eller e-mail:

heclt@ringamt.dk. Ved tilmelding pr. e-mail oplys venligst titel, navn, arbejds-adresse, telefon og e-mail.

Ligeledes om der ønskes hotelreservation på Østergaards Hotel.

Tilmelding er bindende. Tilmelding inden d. 01.12.04.

Sted: Østergaards Hotel, Silkeborgvej, 7400 Herning