

Information om Transkulturel Psykiatri, juni 2010

NYHEDER OG DEBAT

Eksperter : Tolkebesparelser kan koste dyrt

Informations netavis 13. juni / Rottbøll, Emil

Regeringen og Dansk Folkeparti vil spare på tolkebistand. Men på sigt kan besparelserne risikere at koste de offentlige myndigheder mere, end de sparer, advarer en række eksperter. Kvaliteten sejler i forvejen på tolkeområdet, påpeger de.

læs artiklen her: <http://www.information.dk/236233>

Ministeren bedes redegøre for hvilke initiativer han vil tage efter, at læge ph.d Marie Nørredam, Institut for Folkesundhed på Københavns Universitet, har påvist, at flygtninge eller indvandrere langt oftere bliver udsat for tvang i forbindelse med psykiatrisk behandling

Folketingets Sundhedsudvalg har den 8. marts 2010 stillet følgende spørgsmål nr. 413 (Alm. del) til ministeren for sundhed og forebyggelse, som hermed endeligt besvares. Spørgsmålet er stillet efter ønske fra Per Clausen (EL)

Spørgsmål

læs svaret på Folketingets hjemmeside her:

<http://www.ft.dk/samling/20091/almDEL/suu/spm/413/svar/726712/865476.pdf>

Om at huske traumatiske oplevelser

Sørensen, Charlotte Juul

Nyere forskning viser, at patienter med PTSD husker den traumatiske oplevelse ved hjælp af samme mekanismer som andre oplevelser. Det strider mod den traditionelle opfattelse, der gør erindringen af traumer til noget særligt

Psykolog Nyt 11, 4-7, 2010

læs artiklen her: <http://infolink2003.elbo.dk/PsyNyt/Dokumenter/doc/16555.pdf>

LITTERATUR

ARTIKLER FRA FAGLIGE TIDSSKRIFTER

Addressing the paucity of psychological scholarship conducted with Iranian populations : A preliminary review of Iranian mental health research in the United States

Saedi, Goal Auzeen

Iranians are one of the least studied immigrant groups in the United States, despite possessing significant amounts of psychological distress. This article provides an overview of 46 studies pertaining to the mental health of Iranians, both in Iran and abroad (including in the United States), to elucidate areas that need further exploration. To the best of the author's knowledge, this is the first article to integrate Iranian mental health literature on a global scale. Merging international findings will enable researchers and clinicians to better address the needs of Iranians in the community and clinic. Issues for consideration in future research include recruitment and retention, dissemination of findings, and the selection and translation of measures. Clinical implications are also discussed throughout the article.

Keywords: Iranians; mental health; immigrants; health disparity; Middle East; public health; ethnic minority
Journal of muslim mental health 5(2), 137-159, 2010

Association of trauma-related disorders and dissociation with 4 idioms of distress among Latino psychiatric outpatients

Lewis-Fernández, Roberto; Gorritz, Magdaliz; Raggio, Greer A.; Peláez, Clara; Chen, Henian; Guarnaccia, Peter J.

Past research on idioms of distress among U.S. Latinos has revealed that *ataque de nervios* and altered perceptions, such as hearing and seeing things when alone, are independent markers of higher morbidity and mental health utilization despite having no one-to-one relationships with any single psychiatric diagnosis. It has been proposed that the idioms exert this effect because they are signs of distressing dissociative capacity associated with traumatic exposure. This study examines the relationships in an ethnically diverse Latino psychiatric outpatient sample ($N = 230$) among interpersonal trauma, posttraumatic stress disorder (PTSD), major depressive disorder, dissociative capacity and four cultural idioms of distress associated with the popular overall category of *nervios*. We particularly explore how these relationships change with varied measures of traumatic exposure, including trauma severity and timing or persistence of trauma. A series of adjusted bivariate regressions assessed the matrix of associations between the idioms and the clinical variables. In this highly traumatized population, we identified a strong 'nexus' of associations between dissociation and three of the idioms: currently being ill with nerves, *ataque de nervios* and altered perceptions. These idioms were largely independent from PTSD and depression and were associated with trauma persistence and severity. A fourth idiom, being nervous since childhood, was not associated with any other variable and may represent a personality trait rather than a diagnosable condition. Our results validate the clinical utility of the construct of *nervios* as a set of specific idioms associated with dissociation that are useful markers of mental health need among Latinos independently of their association with clinical diagnoses.

Keywords Idioms of distress - Ataque de nervios - Dissociation – Trauma - Posttraumatic stress disorder - Altered perceptions - Latinos

Culture, medicine and psychiatry 34(2), 219-243, 2010

Beyond the discourse of trauma : Shifting the focus on Sudanese refugees

Marlowe, Jay M.

The refugee label acknowledges the plight of people marginalized, oppressed and pushed to the periphery of society. While having this status affords a number of rights from countries signatory to the 1951 UN convention, the concept of 'refugeehood' within resettlement contexts can become a master status that defines a person above and beyond any other form of identity. Drawing upon political theories of recognition, this dilemma is addressed by examining the powerful current Western discourses on trauma where refugees are often situated. It is then contextualized, using the example of Sudanese men resettled in Australia to differentiate ordinary and extra-ordinary stories of lived experience. This distinction provides a helpful framework for developing more sophisticated understandings of how people have responded to trauma beyond the 'event-worthy' underpinnings of forced migration.

Key Words: refugee - trauma - Sudan - recognition theory - narrative

Journal of refugee studies 23(2), 183-198, 2010

Does the prevalence of CD and ODD vary across cultures?

Canino, Glorisa; Polanczyk, Guilherme; Bauermeister, Jose J.; Rohde, Luis A.; Frick, Paul J.

Purpose

The worldwide prevalence of conduct disorder (CD) and oppositional defiant disorder (ODD) is presented to examine the first of four criteria used in other studies to determine the validity of psychiatric disorders across cultures.

Methods

The authors searched Medline and PsycINFO from 1987 to 2008. Studies were included if they were representative of specific communities or countries and reported point prevalence of CD or ODD according to DSM-III-R or DSM-IV criteria for children 18 years or younger.

Results

Only methodological and not geographic factors were associated with variability of the prevalence estimates.

Conclusions

The results are discussed in terms of their significance for the classification of disorders and the need for further research to establish the validity of these two disorders across cultures.

Keywords Conduct disorder - Oppositional defiant disorder - Prevalence across cultures
Social psychiatry and psychiatric epidemiology 45(7), 695-704, 2010

Ethnic diversity and pathways to care for a first episode of psychosis in Ontario

Archie, S.; Akhtar-Danesh, N.; Norman, R.; Malla, A.; Roy, P.; Zipursky, R. B.

Objective

To examine ethnic variations in the pathways to care for persons accessing early intervention (EI) services in Ontario.

Method

The pathways to care and the duration of untreated psychosis were assessed for first-episode psychosis patients who entered specialized EI services in Ontario. The sample was assigned to the following ethnic classifications: the White (Caucasian), Black (African descent), and Asian (ancestry from the continent) groups, plus all the "other ethnicities" group.

Results

There were 200 participants: 78% were male; 61% from the White, 15% Black, 13% Asian, and 11% were from the other ethnicities group. At the first point of contact, more participants used nonmedical contacts (12%), such as clergy and naturopathic healers, than psychologists (8%) or psychiatrists (7%). There were no ethnic differences for duration of untreated psychosis (median 22 weeks) or for initiation of help seeking by family/friends (53%), police (15%), or self (33%). After adjusting for relevant clinical and demographic factors, the Asian and other ethnicities groups were 4 and 3 times (respectively) more likely than the White or Black groups ($P = .017$) to use emergency room services as the first point of contact in the pathways to care. Participants from the Asian group experienced less involuntary hospitalizations ($P = .023$) than all the other groups. Yet overall, there were many more similarities than significant differences in the pathways to care.

Conclusion

EI services should monitor the pathways to care for young people of diverse ethnic backgrounds to address any disparities in accessing care.

Keywords: first-episode psychosis / pathways to care / schizophrenia / schizophreniform / DUP / early intervention in psychosis / help seeking

Schizophrenia bulletin 36(4), 688-701, 2010

Hikikomori, a Japanese culture-bound syndrome of social withdrawal? : a proposal for DSM-5

Teo, Alan R.; Gaw, Albert C.

A form of severe social withdrawal, called hikikomori, has been frequently described in Japan and is characterized by adolescents and young adults who become recluses in their parents' homes, unable to work or go to school for months or years. The aim of this study was to review the evidence for hikikomori as a new psychiatric disorder. Electronic and manual literature searches were used to gather information on social withdrawal and hikikomori, including studies examining case definitions, epidemiology, and diagnosis. A number of recent empirical studies have emerged from Japan. The majority of such cases of hikikomori are classifiable as a variety of existing Diagnostic and Statistical Manual (DSM) psychiatric disorders. However, a notable subset of cases with substantial psychopathology does not meet criteria for any existing psychiatric disorder. We suggest hikikomori may be considered a culture-bound syndrome and merits further international research into whether it meets accepted criteria as a new psychiatric disorder. Research diagnostic criteria for the condition are proposed.

Journal of nervous and mental disease, 198(6), 444-449, 2010

Intergroup relations and Muslims' mental health in Western societies : Australia as a case study

Kalek, Sally; Mak, Anita S.; Khawaja, Nigar G.

This review article proposes that theories and research of intergroup contact, prejudice, and acculturation enhance understanding of the current intercultural relations between Muslims and non-Muslims in Western

societies such as in Australia. The actual and perceived prejudice that many Muslims who study, work, and live in the West have experienced following the September 11, 2001, terrorist attacks adds an additional layer of stress to the psychosocial adjustment of Muslim immigrants and sojourners, affecting their cross-cultural adaptation and mental health. Stephan and colleagues' integrated threat theory argued that the perceived threat experienced by all parties explains the acts of prejudice. Berry's acculturation framework highlighted that adaptive acculturation is determined by congruent host nation policies and practices and immigrant acculturation strategies. Implications for multicultural policy, intercultural training, and mental health practice as well as suggestions for future research are discussed.

Keywords: acculturation; immigrants; intergroup contact; Muslim mental health; prejudice

Journal of muslim mental health 5(2), 160-193, 2010

Khyâl attacks : a key idiom of distress among traumatized Cambodia refugees

Hinton, Devon E.; Pich, Vuth; Marques, Luana; Nickerson, Angela; Pollack, Mark H.

Traumatized Cambodian refugees with PTSD often complain of *khyâl* attacks. The current study investigates *khyâl* attacks from multiple perspectives and examines the validity of a model of how *khyâl* attacks are generated. The study found that *khyâl* attacks had commonly been experienced in the previous 4 weeks and that their severity was strongly correlated with the severity of PTSD (PTSD Checklist). It was found that *khyâl* attacks were triggered by various processes—such as worry, trauma recall, standing up, going to a mall—and that *khyâl* attacks almost always met panic attack criteria. It was also found that during a *khyâl* attack there was great fear that death might occur from bodily dysfunction. It was likewise found that a complex nosology of *khyâl* attacks exists that rates the attacks on a scale of severity, that the severity determines how the *khyâl* attacks should be treated and that those treatments are often complex. As illustrated by the article, *khyâl* attacks constitute a key aspect of trauma ontology in this group, a culturally specific experiencing of anxiety and trauma-related disorder. The article also contributes to the study of trauma somatics, that is, to the study of how trauma results in specific symptoms in a specific cultural context, showing that a key part of the trauma-somatic reticulum is often a cultural syndrome.

Keywords Idioms of distress - Cultural syndromes - Post-traumatic stress disorder - Panic disorder - Cambodian refugees

Culture, medicine and psychiatry 34(2), 244-278, 2010

Mental and physical health consequences of repatriation for Vietnamese returnees : a natural experiment approach

Fu, Hongyun; Vanlandingham, Mark J.

While there is much speculation about the potential consequences of repatriation, systematic comparisons of health outcomes employing standard measures and appropriate population-based samples of migration returnees and non-returnees are virtually non-existent. This study addresses this significant gap in the empirical literature by employing standard measures of mental and physical health outcomes for comparable samples of repatriated international migration returnees living in Ho Chi Minh City; never-leavers living in the same urban wards; and emigrants from Vietnam who successfully settled in a major US metropolitan area (total n = 709; data were collected between 2003 and 2005). Key outcome measures examined include eight health subscales from the SF-36; depression; affect balance; blood pressure; BMI and waist-hip ratio; and two behavioral indicators of stress (alcohol and cigarette consumption). The results revealed consistent health disadvantages for the returnees on self-reported mental and physical health outcomes and for blood pressure with respect to our comparison groups of never-leavers and immigrants.

Key Words: Vietnam - refugees - repatriation - returnee - selection effect

Journal of refugee studies 23(2), 160-182, 2010

Migration, ethnicity, and psychosis : toward a sociodevelopmental model

Morgan, Craig; Charalambides, Monica; Hutchinson, Gerard; Murray, Robin M.

There is consistent and strong evidence that the incidence of all psychoses is higher in many migrant and minority ethnic populations in a number of countries. The reasons for this are, however, unclear and a wide

range of explanations have been proposed, from genetic to neurodevelopmental to psychosocial. In this article, we describe and evaluate the available evidence for and against each of these. What this shows is that: (1) there are few studies that have directly investigated specific risk factors in migrant and minority ethnic populations, with often only 1 or 2 studies of any relevance to specific explanations and (2) what limited research there has been tends to implicate a diverse range of social factors (including childhood separation from parents, discrimination and, at an area level, ethnic density) as being of potential importance. In an attempt to synthesize these disparate findings and provide a basis for future research, we go on to propose an integrated model—of a sociodevelopmental pathway to psychosis—to account for the reported high rates in migrant and minority ethnic populations. Aspects of this model will be directly tested in a new Europe-wide incidence and case-control study that we will conduct over the next 3 years, as part of the European Network of National Schizophrenia Networks studying Gene-Environment Interactions programme.

Keywords: migration / ethnicity / psychosis / social
Schizophrenia bulletin 36(4), 655-664, 2010

Postpartum depression among immigrant women

Fung, Kenneth; Dennis, Cindy-Lee

Purpose of review

Although there has been an increase in research on postpartum depression (PPD), an inadequate focus has been placed on immigrant women. This is a significant limitation given the rapidly changing demographics in North America.

Recent findings

Immigrants face unique and multiple layers of challenges that may compromise their mental health and prevent them from receiving adequate and equitable care. For immigrant women, many of these stressors are especially compounded in the vulnerable postpartum period, resulting in PPD. Cultural values and practices may be protective in some instances, whereas in other instances they exacerbate PPD. There is a significant gap in existing literature regarding the complex psychosocial, cultural, and spiritual factors that may moderate the effects of the depression. Furthermore, the measurement of PPD is hampered by cross-cultural methodological challenges.

Summary

Given the complexity of the psychosocial issues facing immigrant women, there is a need to develop a comprehensive response toward addressing the multifaceted challenges, ensuring equitable immigration and related policies; adequate community resources and social services to address social determinants of health; inclusiveness in public health and prevention strategies; equitable access to a culturally competent healthcare system; capacity building of marginalized communities; and culturally competent interventions at the individual level. Additional research using the bidimensional model of acculturation is needed.

Keywords

acculturation; immigrant; interventions; mental health services; newcomer; postpartum depression.

Current opinion in psychiatry 23(4), 342-348, 2010

The structure of post-traumatic stress symptoms in survivors of war : Confirmatory factor analyses of the Impact of Event Scale—Revised

Morina, Nexhmedin; Böhme, Hendryk F.; Ajdukovic, Dean; Bogic, Marija; Franciskovic, Tanja; Galeazzi, Gian M.; Kucukalic, Abdulah; Lecic-Tosevski, Dusica; Popovski, Mihajlo; Schützwohl, Matthias; Stangier, Ulrich; Priebe, Stefan

The study aimed at establishing the factor structure of the Impact of Event Scale—Revised (IES-R) in survivors of war. A total sample of 4167 participants with potentially traumatic experiences during the war in Ex-Yugoslavia was split into three samples: two independent samples of people who stayed in the area of conflict and one sample of refugees to Western European countries. Alternative models with three, four, and five factors of post-traumatic symptoms were tested in one sample. The other samples were used for cross-validation. Results indicated that the model of best fit had five factors, i.e., intrusion, avoidance, hyperarousal, numbing, and sleep disturbance. Model superiority was cross-validated in the two other

samples. These findings suggest a five-factor model of post-traumatic stress symptoms in war survivors with numbing and sleep disturbance as separate factors in addition to intrusion, avoidance and hyperarousal.

Keywords: Impact of Event Scale—Revised; War-related trauma; PTSD; Confirmatory factor analysis

Journal of anxiety disorders 24(6), 606-611, 2010

Tackling perinatal mental health among black and minority ethnic mothers

Cantle, Florence

Perinatal mental health is a major concern among women of childbearing age. Women from a black and minority ethnic background are widely believed to have particular needs that are often not given the attention they deserve. NHS Croydon launched a perinatal mental health project to develop a closer and better partnership between the Primary Care Trust (PCT), Croydon Council and black and minority ethnic (BME) voluntary organisations through an action learning approach. Experience was shared to improve engagement and use of health services by mothers from BME communities in Croydon who had encountered mental health problems during pregnancy or following childbirth. By exploring and identifying such issues and problems, the action learning set endeavoured to find solutions for a joined-up approach to achieve identifiable benefits. Some problems were encountered, such as a lack of communication between health professionals and BME community groups. The learning outcomes were to raise awareness and to recognise the cultural differences with mothers of BME background experiencing perinatal mental health problems. The learning from the project will be disseminated to a wider audience to promote best practice.

Keywords Perinatal mental health, ethnicity, culture, behaviour, network

Ethnicity and Inequalities in Health and Social Care 3(2), 38-43, 2010

Using cultural relaxation methods in post-trauma care among refugees in Australia

Somasundaram, Daya

In the period from May 2007 to May 2009 there were a total of 75 immigrants referred for psychiatric care at the Supporting Survivors of Torture and Trauma, Adelaide. A clinical audit of case notes and qualitative methods using in-depth case studies, participation observation and key informant interviews were used to evaluate the effectiveness of traditional methods. There were 52 males (69%) and 23 females (31%). Average age was 40 years with a range of 19-70 years. The majority had depression (77%), post-traumatic stress disorder (PTSD) (63%), anxiety including panic disorders and somatisation. Eighteen (24%) had both depression and PTSD. In combination with medication, exposure therapy and psychosocial support, the majority of Islamic clients benefitted from *Dhikir* (88%). Qualitative ethnography suggests that *Dhikir* was culturally appropriate and effective in these settings. Cultural relaxation methods are useful adjuncts in post-trauma therapy. They are cheap, non-pharmacological, safe and non-toxic with no adverse effects and culturally acceptable.

Keywords: refugees; post-traumatic stress disorders; torture; cultural relaxation methods; Islam

International journal of culture and mental health 3(1), 16 – 24, 2010

AFHANDLINGER

Caring for foreign-born persons with psychosis and their families : Perceptions of psychosis care

Hultsjö, Sally

Linköping University Medical Dissertations No. 1107, 2009, - 72 sider.

The aim of this thesis was to describe and analyse perceptions of psychosis care among those involved in care, foreign-born persons with psychoses, their families and health care staff, and further to reach agreement about core components in psychosis care. This was in order to find out whether current psychosis care in Sweden is suitable for foreign-born persons and their families.

The study design was explorative and descriptive. Health care staff (n=35), persons with psychosis (n=22) and families (n=26) of persons with psychosis were chosen from different regions in Southern Sweden. To capture health care staff's experiences and to explore whether specific needs occurred within psychiatric care, nine focus group interviews were held. The perspectives of psychosis care among persons with psychoses and their families were captured through individual interviews. Finally, a study was accomplished

all over Sweden in which staff, foreign-born persons with psychosis and foreign-born families of persons with psychoses answered a questionnaire to identify core components in psychosis care of foreign-born persons and their families.

There was agreement that the core components in psychosis care concern general psychiatric caring, even though varying perceptions were identified. Asking about foreign-born persons' religious and ethnic background or having the possibility to decide whether care should be provided by male or female staff were agreed to be less important.

No agreement could be reached concerning the importance of considering different perceptions of psychosis care, treatments and different ways of managing the psychosis. Nor could agreement be reached as to whether staff should have specific cultural knowledge and whether interpreters should be unknown to the family but speak the right dialect.

Perceptions among staff in somatic and psychiatric care as well as perceptions among foreign and Swedish-born persons with psychosis and their families were more similar than different. General psychiatric care is important for Swedish-born as well as foreign-born persons with psychosis and their families, indicating the importance of not letting culturally determined perceptions dictate the care and take away energy from health care staff and make them lose their focus on the basic elements in general psychiatric care. However, within the general care there were individual perceptions on whose importance those involved in care did not agree. Further development suggested is to illuminate the importance of identifying individual perceptions which may differ between different persons and could be related to cultural background. Staff need to acquire strategies so they can easily manage to encounter and offer general care to foreign-born persons. Development must be achieved on both an organizational level and an individual level.

Keywords: Qualitative methods, migrants, psychosis care, delphi technique.

download afhandlingen her: <http://liu.diva-portal.org/smash/get/diva2:214420/FULLTEXT01>

RAPPORTER

Helsetjenestetilbudet til asylsøkere, flyktninger og familiegjenforente : Veileder

Helsedirektoratet. Afdeling minoritetshelse og rehabilitering, Oslo. – 105 s.

Formålet med veilederen er å bidra til at asylsøkere og flyktninger får nødvendig somatisk og psykisk primær- og spesialisthelsetjenesten. I tillegg er den beregnet på ansatte i mottak og på ulike beslutningsnivåer i kommuner, fylkeskommuner og i helseforetak.

download vejledningen her: http://www.helsedirektoratet.no/vp/multimedia/archive/00296/IS-1022_296039a.pdf

Integration i Danmark eller tilbage til hjemlandet : Et afklaringsprojekt for svært traumatiserede flygtninge fra Bosnien-Hercegovina

Dansk Flygtningehjælp. 47 sider. - 2010

Idéen til projektet opstod som en reaktion på, at kommuner og behandlingscentre for traumatiserede landet over rapporterer om en voksende gruppe bosniske flygtninge, som mistrives og generelt fungerer dårligt i deres danske hverdag. Det gælder særligt en stor del af dem, som har fået tilkendt førtidspension med baggrund i traumat og posttraumatisk belastningsreaktion (PTSD). Dansk Flygtningehjælp tilrettelagde et projekt, der skulle undersøge og afprøve en metode til at støtte traumatiserede bosniske flygtninge i afklaringen af det fremtidige bosættelsesland. Der var ikke tale om et behandlingsforløb med fokus på deltagernes traumer, men et afklaringsprojekt tænkt indenfor repatrieringslovens rammer, som de projektansvarlige arbejder med til daglig. Således blev der lagt vægt på den proces, det er, at tage stilling til en eventuel tilbagevenden til hjemlandet frem for på konfrontationen med hjemlandet som en del af behandling for traumer.

download rapporten herfra: <http://flygtning.dk/viden-fakta/publikationer/rapporter/>