

Information om Transkulturel Psykiatri, maj 2010

NYHEDER OG DEBAT

Indvandrerne HelbredsAfklarende Team savner en pendant på hospitalerne

Jensen, Gunda

Fra starten af artiklen

På en lille ø i kommunen arbejder det HelbredsAfklarende Team (HAT) og savner en storbror på et hospital i København.

Hvad laves der i HAT? Hertil kan sagsbehandlere fra kommunen henvise ikke-etnisk danske borgere, der har brug for en særlig afklaring og en pædagogisk indsats for at komme videre. Oftest er det kvinder, der kommer fra krigsområder og har været udsat for traumer og tortur. For kvinderne betyder tortur som regel også voldtægt, men det bliver der ikke talt så meget om. Sårene er dybe og ofte kan kun spidsen af isbjerget ses - hvis det overhovedet bliver set.

I HAT er der to timer til en samtale, hvor der er både en læge, en psykolog og en socialfaglig fra Jobcentret til stede og som regel en tolk. Der bliver ofte talt om ting, som borgerne aldrig før har turdet tale om.

En kvinde var blevet sendt til flere speciallæger på grund af voldsomme smerter i skulderen. Intet blev fundet. Under samtalen kan hun pludselig huske, hvornår smerterne opstod. De har været der, siden hun under tortur var blevet hængt op i armene, indtil skulderen røg ud af led. Hun begynder at græde, hun har aldrig før talt om det. Jeg er glad for at have en psykolog ved min side.

Ugeskrift for læger 172(20), 151, 2010

LITTERATUR

ARTIKLER FRA FAGLIGE TIDSSKRIFTER

Ataque De Nervios as a marker of social and psychiatric vulnerability : results from the NLAAS

Guarnaccia; Peter J.; Lewis-Fernandez, Roberto; Pincay, Igda Martinez; Shrout, Patrick; Guo, Jing; Torres, Maria; Canino, Glorisa; Alegria, Margarita

Background

This article presents the first epidemiological portrait of *ataques de nervios* among Latinos in the mainland United States. Much of the previous literature has focused on Puerto Ricans in Puerto Rico and New York City.

Aims

This study examines the social and psychiatric correlates of *ataque de nervios* in a nationally representative sample of Latinos in the United States.

Methods

This study employs data from the Latino sample (N = 2554) of the National Latino and Asian American Study (NLAAS). Analyses examined the associations between *ataques de nervios* and a range of social and migration variables, as well as psychiatric diagnoses and measures of mental health need.

Results

Ataques de nervios were reported by 7–15% of the different Latino groups, with Puerto Ricans reporting the highest frequency. *Ataques de nervios* were more frequent in women, those with disrupted marital status, and those more acculturated to the US. The frequency of those who met criteria for affective, anxiety and substance abuse disorders was higher among those reporting an *ataque de nervios*.

Conclusion

Ataque de nervios can serve as an important indicator of social and psychiatric vulnerability in future epidemiological and clinical studies with Latino populations.

Key Words: ataques de nervios - cultural syndromes - Latinos - NLAAS - social and psychiatric vulnerability
International journal of social psychiatry 56(3), 298-309, 2010

Case studies of Hispanic caregivers of persons with dementia : reconciliation of self

Simpson, Cherie

An interpretive phenomenology perspective is used to explore the lived experience of two Hispanic caregivers and the phenomenon of mastery. The analysis showed how these caregivers derive meaning of their experience through a process of reconciliation of self between the roles of parental caretaker, respectful daughter, and caregiver. This reconciliation of self is a form of mastery, and the process of reconciliation is grounded in cultural values of intergenerational reciprocity and familism. Nurses have the unique opportunity to support a caregiver in his or her interaction with the person with dementia. The implications for practice include the need for nurses to acknowledge, validate, and support caregiver's experience of reconciling self as a form of health promotion.

Key Words: Hispanic caregivers – mastery - reconciliation of self - health promotion

Journal of transcultural nursing 21(2), 167-174, 2010

Comparison of the consumption of antidepressants in the immigrant and native populations in a Spanish health region: an observational study

Cruz, Ines; Serna, Catalina; Real, Jordi; Rue, Montse; Soler, Jorge; Galvan, Leonardo

Background

Health professionals and organizations in developed countries adapt slowly to the increase of ethnically diverse populations attending health care centres. Several studies report that attention to immigrant mental health comes up with barriers in access, diagnosis and therapeutics, threatening equity. This study analyzes differences in exposure to antidepressant drugs between the immigrant and the native population of a Spanish health region.

Methods

Cross-sectional study of the dispensation of antidepressant drugs to the population aged 15 years or older attending the public primary health centres of a health region, 232,717 autochthonous and 33,361 immigrants, during 2008. Data were obtained from computerized medical records and pharmaceutical records of medications dispensed in pharmacies. Age, sex, country of origin, visits, date of entry in the regional health system, generic drugs and active ingredients were considered. Statistical analysis expressed the percentage of persons exposed to antidepressants stratified by age, gender, and country of origin and prevalence ratios of antidepressant exposition were calculated.

Results

Antidepressants were dispensed to 11% of native population and 2.6% of immigrants. Depending on age, native women were prescribed antidepressants between 1.9 and 2.7 times more than immigrant women, and native men 2.5 and 3.1 times more than their immigrant counterparts. Among immigrant females, the highest rate was found in the Latin Americans (6.6%) and the lowest in the sub-Saharan (1.4%). Among males, the highest use was also found in the Latin Americans (1.6%) and the lowest in the sub-Saharan (0.7%). The percentage of immigrants prescribed antidepressants increased significantly in relation to the number of years registered with the local health system. Significant differences were found for the new antidepressants, prescribed 8% more in the native population than in immigrants, both in men and in women.

Conclusions

All the immigrants, regardless of the country of origin, had lower antidepressant consumption than the native population of the same age and sex. Latin American women presented the highest levels of consumption, and the sub-Saharan men the lowest. The prescription profiles also differed, since immigrants consumed more generics and fewer recently commercialized active ingredients.

BMC public health 10(255), 30 pp, 2010

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Cultural body shape ideals and eating disorder symptoms among White, Latina, and Black college women

Gordon, Kathryn H.; Castro, Yessenia; Sitnikov, Lilya; Holm-Denoma, Jill M.

Previous studies have reported inconsistent relationships between body image, eating disorder symptoms, and acculturation-relevant variables. The current study examined these variables in a sample of White, Latina, and Black college women (N = 276). White and Latina participants selected slimmer personal body shape ideals than Black women. Among Black women, the discrepancy between perceived body shape and perceived ideal body shape for the United States was predictive of Eating Disorder Inventory Body

Dissatisfaction (EDI-BD) and Drive for Thinness (EDI-DFT) scores. The discrepancy between perceived body shape and perceived ideal for their ethnic group also predicted EDI-BD scores. Among Latinas, the discrepancy between perceived body shape and perceived body shape ideal for their ethnic group was predictive of EDI-BD and EDI-DFT scores, whereas a discrepancy between perceived body shape and perceived ideal for the United States was not predictive of eating disorder symptoms. Finally, higher levels of acculturative stress, but not acculturation, were associated with EDI-BD scores among Black women and EDI-DFT scores among Latinas. Findings underscore the importance of considering cultural variables such as acculturative stress when conducting clinical work with ethnic minority women.

Cultural diversity and ethnic minority psychology 16(2), 135-143, 2010

Demens hos etniske minoriteter : er det en overset problemstilling?

Nielsen, T. Rune; Waldemar, Gunhild

Der findes et stigende antal ældre blandt etniske minoriteter i de fleste vestlige lande, men patienter fra etniske minoriteter er underrepræsenterede i demensudredning og pleje. Dette kan hænge sammen med den kulturelle opfattelse af demens samt manglende viden om de tilgængelige tilbud blandt etniske minoriteter. Samtidig er det være svært at foretage en fulgyldig klinisk undersøgelse af de etniske minoritetspatienter, som faktisk søger læge for demenssymptomer. Specielt er tolkningen af kognitive testresultater en vanskelig udfordring.

Ugeskrift for læger 172(20), 1527-1531, 2010

Ethnic density in school classes and adolescent mental health

Gieling, Maike; Vollebergh, Wilma; van Dorsselaer, Saskia

Objective

The present study set out to examine the association between ethnic composition of school classes and prevalence of internalising and externalising problem behaviour among ethnic minority and majority students.

Methods

Data were derived from the Dutch 2002 Health Behaviour in School-aged Children (HBSC) survey, a nationally representative cross-sectional study with a total of 5,730 adolescents, aged 11–18 and attending secondary school, of which 931 belong to ethnic minority groups. The data were analysed using a multilevel regression model.

Results

The study revealed that, after taking individual characteristics like age, gender, educational level and family affluence into account, ethnic minority students on average report higher levels of externalising but not internalising problems. Ethnic density on the level of school classes modified this difference, as a negative association between the proportion ethnic minority students in class and externalising problem behaviour was found, but only for ethnic minority students. No effect of ethnic composition was found with respect to internalising problem behaviour.

Conclusion

The data revealed that ethnic minority students report higher levels of externalising problem behaviour, but only in classes with a minority of ethnic minority students and not in classes with a culturally diverse composition. This points towards a possible beneficial effect of a more culturally diverse environment for minority students. Majority students appeared to be insensitive for the ethnic density effect. Future studies should investigate the role of the ethnic composition of the school class more in-depth.

Keywords Internalising problems - Externalising problems - Ethnic density - School-related context - Multilevel

Social psychiatry and psychiatric epidemiology 45(6), 639-646, 2010

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Ethnic differences among adolescents beginning treatment for depression

Stein, Gabriela Livas; Curry, John F.; Hersh, Jacqueline; Breland-Noble, Alfiee; March, John; Silva, Susan G.; Reinecke, Mark A.; Jacobs, Rachel

This study examines ethnic/racial differences at the start of treatment among participants in the Treatment for Adolescents with Depression Study (TADS). African American and Latino youth were compared to Caucasian youth on symptom presentation and cognitive variables associated with depression. Contrary to hypothesis, there were no significant differences in symptom presentation as measured by the interview-based items of the Children's Depression Rating Scale - Revised (CDRS-R). However, African American and Latino youth were both rated as demonstrating more severe symptoms on the observational items of the CDRS-R compared to Caucasian youth. In terms of cognitive variables associated with depression, African Americans reported fewer negative cognitive biases compared to Caucasians, but cognitive biases were significantly correlated with depression severity across ethnic groups.

Cultural diversity and ethnic minority psychology 16(2), 152-158, 2010

Expectations of the future : immigrant, asylum seeker, or refugee – does it matter?

Iversen, Valentina C.; Berg, John E.; Vaaler, Arne E.

Background

Refugees and asylum seekers may have other feelings and expectations about the future than immigrants do. The aim of this study was to explore and analyse the expectations for the future among populations of immigrants, asylum seekers and refugees admitted to Norwegian acute psychiatric departments.

Method

In a prospective study in the period 2005 to 2008, data were collected from two acute psychiatric departments.

Results

There were 48 immigrants, 24 refugees, and 21 asylum seekers. A significantly higher proportion of asylum seekers than refugees had nightmares ($p = 0.04$), feelings of guilt ($p = 0.04$) and feelings of hopelessness ($p = 0.04$). A significantly higher proportion of asylum seekers than immigrants had sleeping problems ($p = 0.03$), nightmares ($p = 0.03$), feelings of hopelessness ($p = 0.03$) and reduced appetite ($p = 0.04$). Significantly more asylum seekers than refugees maintained that life would change for the better over time ($Z = 2.0$; $p = 0.04$). More refugees than asylum seekers indicated problems judging life ten years from now ($Z = 2.1$; $p = 0.04$).

Conclusion

Being an asylum seeker seems to incur greater distress and higher negative expectations for the future. Preventive strategies should be created to improve refugees' and asylum seekers' life in exile. Priority and speed in processing of asylum cases should be given higher priority.

Keywords Immigrants; refugees; asylum seekers; hopelessness

Journal of psychiatric intensive care 6(1), 23-30, 2010

High depressive symptomatology among older community-dwelling Mexican Americans : the impact of immigration

Gerst, Kerstin; Al-Ghatrif, Majd; Beard, Holly A.; Samper-Ternent, Rafael; Markides, Kyriakos S.

Objectives

This analysis explores nativity differences in depressive symptoms among very old (75+) community-dwelling Mexican Americans.

Design

Cross-sectional analysis using the fifth wave (2004-2005) of the Hispanic Established Population for the Epidemiological Study of the Elderly (Hispanic EPESE).

Participants

The sample consisted of 1699 non-institutionalized Mexican American men and women aged 75 years and above. Depressive symptoms were measured by the Center for Epidemiological Studies Depression Scale (CES-D). Logistic regression was used to predict high depressive symptoms (CES-D score 16 or higher) and multinomial logistic regression was used to predict sub-threshold, moderate, and high depressive symptoms.

Results

Results showed that elders born in Mexico had higher odds of more depressive symptoms compared to otherwise similar Mexican Americans born in the US. Age of arrival, gender, and other covariates did not modify that risk.

Conclusion

The findings suggest that older Mexican American immigrants are at higher risk of depressive symptomatology compared to persons born in the US, which has significant implications for research, policy, and clinical practice.

Keywords: depressive symptomatology; Hispanic Americans; immigrants; Mexican Americans
Aging and mental health 14(3), 347-354, 2001

Immigration and suicidality in the young

Lipsicas, Cendrine Bursztein; Mäkinen, Ilkka Henrik

Objectives

Little research has focused on the relation of immigration and suicidal behaviour in youth. Nevertheless, the impact of migration on the mental health of youth is an issue of increasing societal importance. This review aimed to present studies on the prevalence of suicidal behaviour in immigrant youth in various countries and to provide possible explanations for suicidal behaviour in immigrant youth, especially regarding acculturation.

Methods

The review included a literature search to locate articles on the subject of suicidal behaviour in immigrant youth in the context of acculturation.

Results

Studies on suicidal behaviour in culturally diverse youth are few and most of the existing research does not differentiate ethnic minorities from immigrants. Studies on epidemiology and on specific risk factors were found regarding various immigrant youth including Hispanics in the United States, Asians in North America and Europe, as well as comparative studies between different immigrant groups in specific countries.

Conclusions

The relation between immigration status and suicidal behaviours in youth appears to vary by ethnicity and country of settlement. Time spent in the new country as well as intergenerational communication and conflicts with parents have, in many of the studies, been related to suicidality in immigrant youth. Summing up, there is a clear and urgent need to further pursue the work in this field, to develop targeted public health interventions as well as psychosocial treatment for preventing suicide in these youth.

Key Words: immigration, youth, suicide, prevention, acculturation, intergenerational conflict

Canadian journal of psychiatry 55(5), 274–281, 2010

download artiklen her: <http://publications.cpa-apc.org/media.php?mid=969>

The meaning and mental health consequences of long-term immigration detention for people seeking asylum

Coffey, Guy J.; Kaplan, Ida; Sampson, Robyn C.; Tucci, Maria Montagna

The aim of the present research was to examine the experience of extended periods of immigration detention from the perspective of previously detained asylum seekers and to identify the consequences of these experiences for life after release. The study sample comprised seventeen adult refugees (sixteen male and one female; average age 42 years), who had been held in immigration detention funded by the Australian government for on average three years and two months. They were interviewed on average three years and eight months following their release and had been granted permanent visa status or such status was imminent. The study employed a combination of qualitative and quantitative methods to explore detention and post-detention experiences, and mental health some years after release. The qualitative component consisted of semi-structured interviews exploring psychological well-being, daily life, significant events, relationships, and ways of coping throughout these periods. This was supplemented with standardised quantitative measures of current mental health and quality of life. All participants were struggling to rebuild their lives in the years following release from immigration detention, and for the majority the difficulties experienced were pervasive. Participants suffered an ongoing sense of insecurity and injustice, difficulties with relationships, profound changes to view of self and poor mental health. Depression

and demoralisation, concentration and memory disturbances, and persistent anxiety were very commonly reported. Standardised measures found high rates of depression, anxiety, PTSD and low quality of life scores. The results strongly suggest that the psychological and interpersonal difficulties participants were suffering at the time of interview were the legacy of their adverse experiences while detained. The current study assists in identifying the characteristics of prolonged immigration detention producing long-term psychological harm.

Keywords: Asylum seekers; Refugees; Immigration detention; Resettlement; Mental health; Australia

Social science and medicine 70(12), 2070-2079, 2010

Providing culturally competent care for the criminally insane inmate

Charles, Carise E.

Fra starten af artiklen

In the dark ages of mental health care, patients were tortured, chained, and abused. They experienced the cruelties of restraints, strait jackets, and chains while living in prisons and workhouses. Often these people were thought to be demon possessed. Between the 1820s and the 1860s, asylums were built to treat and house the insane (Kansas Historical Society [KHS], 2009). Medicine and nursing have come a long way since those dark and desperate times. In most institutions, medicinal restraints have taken the place of torturous physical restraints (KHS, 2009). Doctors treat patients with a kinder, gentler approach and nurses seek to provide culturally competent care in their treatment of the mentally ill. Providing culturally competent care can be a challenge for nurses, and it is even more difficult when treating the criminally insane.

Issues in mental health nursing 31(6), 432-434, 2010

Race / ethnicity and potential suicide misclassification : window on a minority suicide paradox?

Rockett, Ian R. H.; Wang, Shuhui; Stack, Steven; De Leo, Diego; Frost, James L.; Ducatman, Alan M.; Walker, Rheeda L.; Kapusta, Nestor D.

Background

Suicide officially kills approximately 30,000 annually in the United States. Analysis of this leading public health problem is complicated by undercounting. Despite persisting socioeconomic and health disparities, non-Hispanic Blacks and Hispanics register suicide rates less than half that of non-Hispanic Whites.

Methods

This cross-sectional study uses multiple cause-of-death data from the US National Center for Health Statistics to assess whether race/ethnicity, psychiatric comorbidity documentation, and other decedent characteristics were associated with differential potential for suicide misclassification. Subjects were 105,946 White, Black, and Hispanic residents aged 15 years and older, dying in the US between 2003 and 2005, whose manner of death was recorded as suicide or injury of undetermined intent. The main outcome measure was the relative odds of potential suicide misclassification, a binary measure of manner of death: injury of undetermined intent (includes misclassified suicides) versus suicide.

Results

Blacks (adjusted odds ratio [AOR], 2.38; 95% confidence interval [CI], 2.22-2.57) and Hispanics (1.17, 1.07-1.28) manifested excess potential suicide misclassification relative to Whites. Decedents aged 35-54 (AOR, 0.88; 95% CI, 0.84-0.93), 55-74 (0.52, 0.49-0.57), and 75+ years (0.51, 0.46-0.57) showed diminished misclassification potential relative to decedents aged 15-34, while decedents with 0-8 years (1.82, 1.75-1.90) and 9-12 years of education (1.43, 1.40-1.46) showed excess potential relative to the most educated (13+ years). Excess potential suicide misclassification was also apparent for decedents without (AOR, 3.12; 95% CI, 2.78-3.51) versus those with psychiatric comorbidity documented on their death certificates, and for decedents whose mode of injury was "less active" (46.33; 43.32-49.55) versus "more active."

Conclusions

Data disparities might explain much of the Black-White suicide rate gap, if not the Hispanic-White gap. Ameliorative action would extend from training in death certification to routine use of psychological autopsies in equivocal-manner-of-death cases.

BMC psychiatry 10(35), 27 pp, 2010

download artiklen her: <http://www.biomedcentral.com/content/pdf/1471-244x-10-35.pdf>

Screening for depression in African American and Caucasian older women

Heller, Kenneth; Viken, Richard J.; Swindle, Ralph W.

Objective

To assess the performance of a two-choice (yes/no), 10-item shortened form of the CES-D in both African American (AA) and Caucasian (CA) older women. The CES-D is a widely used screening instrument, but its use has been questioned for routine screening because of its length and the complexity of its four-choice format. There is also little data available about its suitability low-income AA respondents.

Method

Telephone screening for depression followed by in-home diagnostic interviews were conducted in a community sample of 256 CA and 186AA low-income older women who ranged in age from 64 to 94 years. Standard receiver operator curves were plotted to determine the sensitivities and specificities of the screening instrument at different cut-scores against a criterion of SCID-based diagnoses of current major depressive episode (CMDE).

Results

Sensitivity and specificity of the 10-item scale and an even shorter 5-item version was slightly higher for AA than for CA women. While both short forms produced significant numbers of false positives against a criterion of CMDE, many of the women identified by the screen did have significant depressive symptomatology. Significantly, fewer AA women received a diagnosis of CMDE primarily because they did not show diminution of functioning associated with their depressive symptoms.

Conclusion

Short, easy to administer forms of the CES-D can provide useful information in working with older patients. Clinicians should be aware of ethnic differences in symptom expression and levels of functional impairment that are likely to occur in follow-up medical and psychiatric exams.

Keywords: depression; ethnic differences; screening; older adults; short form CES-D

Aging and mental health 14(3), 339-346, 2010

Stress experienced by Guatemalan–Mayan immigrants

Millender, Eugenia I.

Fra starten af artiklen

As the face of the United States changes and Hispanics make up the largest minority group (U.S. Census Bureau, 1997 & 2008), the use of the label other Hispanic comes into question as an expression of cultural insensitivity contributing to health disparities. In South Florida, "other Hispanics" are the fastest growing population group, and members have high occurrence of mental health disorders including substance use (Eisenman, Gelberg, Liu & Shapiro, 2007; Turner & Gil, 2002). Stress is an underlying factor associated with both substance use (Quintero, Lilliot, & Willging, 2007) and minority status (Choi, Meininger & Roberts, 2006). This pilot study was conducted to describe the experience of stress for a group often categorized as "other Hispanic" Guatemalan–Mayan immigrants. This study was planned to provide a foundation for further research about the stress–substance use connection for this population.

Archives of psychiatric nursing 24(3), 212-214, 2010

A systematic review of personality disorder, race and ethnicity: prevalence, aetiology and treatment

McGilloway, Angela; Hall, Ruth E.; Lee, Tennyson; Bhui, Kamaldeep S.

Background

Although psychoses and ethnicity are well researched, the importance of culture, race and ethnicity has been overlooked in Personality Disorders (PD) research. This study aimed to review the published literature on ethnic variations of prevalence, aetiology and treatment of PD.

Method

A systematic review of studies of PD and race, culture and ethnicity including a narrative synthesis of observational data and meta-analyses of prevalence data with tests for heterogeneity.

Results

There were few studies with original data on personality disorder and ethnicity. Studies varied in their classification of ethnic group, and few studies defined a specific type of personality disorder. Overall, meta-analyses revealed significant differences in prevalence between black and white groups (OR 0.476, CIs 0.248 - 0.915, $p = 0.026$) but no differences between Asian or Hispanic groups compared with white groups. Meta-regression analyses found that heterogeneity was explained by some study characteristics: a lower prevalence of PD was reported among black compared with white patients in UK studies, studies using case-note diagnoses rather than structured diagnostic interviews, studies of borderline PD compared with the other PD, studies in secure and inpatient compared with community settings, and among subjects with co-morbid disorders compared to the rest. The evidence base on aetiology and treatment was small.

Conclusion

There is some evidence of ethnic variations in prevalence of personality disorder but methodological characteristics are likely to account for some of the variation. The findings may indicate neglect of PD diagnosis among ethnic groups, or a true lower prevalence amongst black patients. Further studies are required using more precise cultural and ethnic groups.

BMC Psychiatry 10(33), 34 pp, 2010

download artiklen herfra: <http://www.biomedcentral.com/1471-244X/10/33/abstract>

Treatment of post traumatic stress disorders : part 1

Roman, Marian

It has been 30 years since the diagnostic classification of Post Traumatic Stress Disorder (PTSD) first appeared in the second edition of *The Diagnostic and Statistical Manual of Mental Disorders* (DSM-II; American Psychiatric Association [APA], 1980). The initial criteria have been adjusted slightly, and in 1994, Acute Stress Disorder first appeared in the fourth edition of the Manual (DSM-IV; APA, 1994). In the intervening years, both pharmacologic and non-pharmacologic evidencebased treatments have evolved within a changing cultural context. Interdisciplinary fields of traumatology and neuroscience are now recognized. From September 11, 2001 to Hurricane Katrina, from prolonged wars to tsunamis and earthquakes, media images of devastation visit our homes in a 24-hour news cycle. Talk shows are filled with adults' revelations of childhood abuse from strangers, family, clergy. We have moved from the era termed the Age of Anxiety, to what might be called the Era of Trauma.

Issues in mental health nursing, 31(4), 302-303, 2010

Rapporter

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

København, Dansk Flygtningehjælp, 47 sider. - 2010

Dansk Flygtningehjælps (DFH) projekt *Integration i Danmark eller tilbage til hjemlandet – et afklaringsforløb for svært traumatiserede flygtninge fra Bosnien og Hercegovina* havde til formål at sætte fokus på den del af flygtningens tilværelse, som vi i det følgende refererer til som hjemlandsperspektivet. Begrebet dækker over et fundamentalt savn af det land, man er flygtet fra, og nogle helt særlige problemstillinger, der knytter sig til en på mange måder mislykket rehabilitering af traume- og torturofre. Endvidere er hjemlandsperspektivet mere generelt relevant for flygtninge (ikke kun de traumatiserede), fordi det psykologisk og socialt spiller en rolle i udformningen af en meningsfuld eksiltilværelse.

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 traumet 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.

Projektets succeskriterium var en deltagergruppe med oplevelsen af en højere grad af afklaring. Dermed ville de have bedre forudsætninger for ved eget virke at øge deres livskvalitet. Endvidere har det været en bærende tanke, at erfaringerne fra et sådant projekt ville kunne bruges i mange andre sammenhænge som fx behandling af traumer, psykoedukativ træning og beskæftigelsesrettede indsatser. Således var det også et succeskriterium at udbrede erfaringerne så bredt som muligt efter projektets afslutning.

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