

## Information om Transkulturel Psykiatri, marts 2009

### NYHEDER

#### Diagnostik behøver inkludere kulturell variation

Sofie Bäärnhielm

##### Fra starten af artiklen

Diagnostik är ett centralt nav i psykiatrisk vård. Den avgör behandling för den enskilde, är ett sätt att kommunicera i vården och utgör via epidemiologiska data ett underlag för strukturell vårdplanering och utveckling. Psykiatrisk diagnostik står ständigt inför behovet att omfatta nya kunskaper. I dagens allt mer globaliserade samhälle finns utmaningen att inkludera variation i uttryck för psykisk sjukdom och ohälsa samt salutogena faktorer. I denna artikel kommer jag att diskutera vikten och möjligheten av att inkludera kulturell variation vid psykiatrisk diagnostik.

**Tidskriften för svensk psykiatri, nr. 1, 60-61, februari 2009**

download tidskriften herfra : <http://www.svenskpsykiatri.se/>

#### Kulturell erfarenhet präglar mötet med psykiatri

Michael Lövtrup

En patient som säger till sin psykiater att han har ormar i magen riskerar att klassas som psykotisk. Men i vissa kulturer är det bara ett sätt att uttrycka olust. Den transkulturella psykiatrien har utvecklats för att tackla de utmaningar som möter läkare och patienter i den mångkulturella vården. (lagt på www 11. marts)

**Läkartidningen 106(11), 734-736, 2009**

läs artiklen her : <http://www.lakartidningen.se/07engine.php?articleId=11601>

#### Kulturformulering blev en vändpunkt

Michael Lövtrup

2004 insjuknade Ali Feyli i depression, 25 år efter att han torterats i irakiskt fängelse. Efter fyra års sjukdom blev en intervju baserad på den kulturformulering som Transkulturellt centrum utvecklat en vändpunkt. I dag är han tillbaka på sitt gamla jobb på halvtid.

**Läkartidningen 106(11), 736-737, 2009**

läs artiklen her : <http://www.lakartidningen.se/07engine.php?articleId=11600>

#### Notat om asylansøgernes sundhedsbehandlinger (godkendelsekrævende sundhedsbehandlinger)

Udlændingeservice har udarbejdet et notat om forbruget af sundhedsydelse blandt asylansøgere i Danmark. Notatet viser, at på trods af et faldende antal indkvarterede asylansøgere i perioden 2004-2007, har de samlede årlige udgifter til godkendelseskrævende social- og sundhedsydelse hvert halvår været på ca. 20 mio. kr. Udgifterne på 19,7 mio. kr. i 1. halvår af 2007 fordeler sig med henholdsvis 6,1 mio. kr. til socialområdet (døgninstitutioner) og 13,6 mio. kr. til sundhedsydelse. Dette betyder, at den gennemsnitlige udgift pr. indkvarteret årsperson er steget fra ca. 8.600 kr. i 1. halvår 2004 til ca. 23.000 kr. i 1. halvår 2007.

läs notatet her : [http://www.nyidanmark.dk/NR/rdonlyres/A4BDE380-65E8-48B5-B88F-C8CABC3098DB/0/sundhedsnotat\\_oktober\\_2008.pdf](http://www.nyidanmark.dk/NR/rdonlyres/A4BDE380-65E8-48B5-B88F-C8CABC3098DB/0/sundhedsnotat_oktober_2008.pdf)

#### Nye veje til at få flere ledige flygtninge og indvandrere i arbejde

Dansk Flygtningehjælps hjemmeside 24. marts 2009

Ubehandlede traumer kan ofte være årsagen til at flygtninge og indvandrere fastholdes i ledighed. Dansk Flygtningehjælp står bag udviklingen af nye metoder, der skal gøre det nemmere at opdage ledige med traumer og styrke indsatsen for at få flere i arbejde.

Det kræver en målrettet indsats at få flere flygtninge og indvandrere i arbejde, hvis ubehandlede traumer og sygdom er årsagen til fortsat ledighed. Mange af de flygtninge og indvandrere, der har svært ved at komme ind på arbejdsmarkedet kunne skifte kontanthjælpen ud med et arbejde, hvis de fik den rette hjælp. (lagt på www 25. marts)

läs mere her :

[http://flygtning.dk/Enkel\\_nyhed.1120.0.html?&cHash=abd2d06900&tx\\_ttnews%5BbackPid%5D=561&tx\\_ttnews%5Btt\\_news%5D=959](http://flygtning.dk/Enkel_nyhed.1120.0.html?&cHash=abd2d06900&tx_ttnews%5BbackPid%5D=561&tx_ttnews%5Btt_news%5D=959)

#### Projekt i Århus hjælper pårørende til psykisk syge med en anden etnisk baggrund end dansk

Pressemeddelelse fra Bedre Psykiatri 23. marts 2009

Tilbuddet omfatter både en individuel rådgivning og et netværk, hvor pårørende kan møde ligesindede og udveksle erfaringer til hjælp og støtte for hinanden.

Ifølge projektsvarlig Poya Ranjbaran står pårørende til psykiske syge fra etniske minoriteter ofte isolerede med uoverskuelige problemstillinger. "Det at have et psykisk syg familiemedlem er i mange kulturer forbundet med en væsentlig større tabuisering og stigmatisering, følelser af skam og skyld. Mange pårørende i målgruppen er desuden selv traumatiserede og har vanskeligheder med integrationen i det danske samfund. At støtte den enkelte pårørende og familien kan fremme integrationen af netop de mest belastede og ofte svage stillede".

læs mere om projektet her : <http://bedrepsykiatri.dk/index.dsp?page=1116>

## Røde Kors : Behandlingen af torturofre er fagligt uforvarlig

Informations netavis 26. marts 2009 / Camilla Stampe

Torturofre, som flygter til Danmark, får ikke den nødvendige behandling, lyder det fra flere danske læger. Der er lang ventetid på bevillingerne fra Udlændingesservice, og ikke alle asylansøgerne bliver undersøgt, lyder kritikpunkterne. Asylansøgere, som har været udsat for tortur, får ikke en tilstrækkelig behandling, når de kommer til Danmark. Sådan lyder kritikken fra flere danske læger. En af dem er cheflæge i Røde Kors, Ebbe Munk Andersen. Han er frustreret over de regler, som lægerne arbejder efter, når de henviser torturofre til behandling.

"Når vi tilrettelægger en behandling for asylansøgere, der har været udsat for tortur, er vi bundet af en ramme på 15 timer hos en psykiater eller 12 timer hos en psykolog. På den tid og i asylprocedurernes rammer kan vi ikke nå andet end at yde en smule støtte, men ikke en egentlig rehabilitering," siger cheflægen. Læs artiklen her :

<http://www.information.dk/186169>

## Transkulturell psykiatri - en konferensrapport

Leif Öjesjö

Fra starten af artiklen

Transkulturellt Centrum tillsammans med Spånga-Tensta psykiatriska mottagning anordnade 6-7 november 2008 en konferens i Stockholm på temat "Kultur, kontext och psykiatrisk diagnostik". Konferensen, som hölls på engelska och svenska, samlade 147 deltagare från de nordiska länderna. Under två dagar presenterades ett stort antal föredrag och workshops med kliniska och teoretiska synpunkter.

**Tidskriften för svensk psykiatri, nr. 1, 36-37, februar 2009**

Download tidskriftet herfra : <http://www.svenskpsykiatri.se/>

## LITTERATUR

### ARTIKLER FRA FAGLIGE TIDSSKRIFTER

#### Comparative study of the cognitive performance of Greek Australian and Greek national elderly : implications for neuropsychological practice processes and interpretation

Plitas, Areti; Tucker, Alan; Kritikos, Ada; Walters, Izabela; Bardenhagen, Fiona

#### Abstract

In the area of dementia diagnosis and assessment of cognitive functioning of elderly culturally and linguistically diverse individuals (CALDI) little is known about cognitive test performance differences between migrants and peers from their country of origin. This study investigated whether community dwelling elderly Greek Australian (GA) performance on tests of cognition was comparable to that of elderly Greek national 'normal' individuals without a diagnosis of dementia (Gn). Based on available cross-cultural literature it was hypothesised that GA would obtain lower scores on the Cambridge Cognitive Examination of the Elderly and the Mini-Mental Status Examination compared to Gn due to issues relating to the migrant experience such as acculturation, reduced language fluency and proficiency. The results of the current study supported the hypothesis arguing for caution when interpreting CALDI performance on tests that have not been normed in that particular group because there may be a greater risk of false-positive diagnoses.

**Australian psychologist 44(1), 27-39, 2009**

#### Diagnostic, symptom, and functional assessments of Hispanic outpatients in community mental health practice

Zayas, Luis H.; Torres, Luis R.; Cabassa, Leopoldo J.

#### Abstract

With increased US Hispanic diversity come diagnostic challenges associated with culture, language, and expression of mental disorders. In a community-based clinic, we compared diagnostic agreement between Hispanic and non-Hispanic clinicians, and a structured diagnostic instrument, in live and videotaped interviews with Hispanic adults. Percentage agreement and kappa show low diagnostic reliability between clinicians, and between clinicians and instrument.

Significant differences appeared in rates of various diagnoses. Non-Hispanic clinicians rated patients' functional capacity and symptom-severity as significantly worse than Hispanic clinicians. Findings match past research with Hispanic patients and raise questions about diagnostic reliability in multi-cultural community mental health practice.

**Keywords** Psychiatric diagnosis - Diagnostic reliability - Hispanics  
**Community mental health journal 45(2), 97-105, 2009**

## **Discrepant comorbidity between minority and white suicides : a national multiple cause-of-death analysis**

Rockett, Ian R. H.; Lian, Yinjuan; Stack, Steven; Ducatman, Alan M.; Wang, Shuhui

### **Abstract**

#### **Background**

Clinician training deficits and a low and declining autopsy rate adversely impact the quality of death certificates in the United States. Self-report and records data for the general population indicate that proximate mental and physical health of minority suicides was at least as poor as that of white suicides.

#### **Methods**

This cross-sectional mortality study uses data from Multiple Cause-of-Death (MCO) public use files for 1999-2003 to describe and evaluate comorbidity among black, Hispanic, and white suicides. Unintentional injury decedents are the referent for multivariate analyses.

#### **Results**

One or more mentions of comorbid psychopathology are documented on the death certificates of 8% of white male suicides compared to 4% and 3% of black and Hispanic counterparts, respectively. Corresponding female figures are 10%, 8%, and 6%. Racial-ethnic discrepancies in the prevalence of comorbid physical disease are more attenuated. Cross-validation with National Violent Death Reporting System data reveals high relative underenumeration of comorbid depression/mood disorders and high relative overenumeration of schizophrenia on the death certificates of both minorities. In all three racial-ethnic groups, suicide is positively associated with depression/mood disorders [whites: adjusted odds ratio (AOR)=31.9, 95% CI=29.80-34.13; blacks: AOR=60.9, 95% CI=42.80-86.63; Hispanics: AOR=34.7, 95% CI=23.36-51.62] and schizophrenia [whites: AOR=2.4, 95% CI=2.07-2.86; blacks: AOR=4.2, 95% CI=2.73-6.37; Hispanics: AOR=4.1, 95% CI=2.01-8.22]. Suicide is positively associated with cancer in whites [AOR= 1.8, 95% CI=1.69-1.93] and blacks [AOR=1.8, 95% CI=1.36-2.48], but not with HIV or alcohol and other substance use disorders in any group under review.

#### **Conclusions**

The multivariate analyses indicate high consistency in predicting suicide-associated comorbidities across racial-ethnic groups using MCO data. However, low prevalence of documented comorbid psychopathology in suicides, and concomitant racial-ethnic discrepancies underscore the need for training in death certification, and routinization and standardization of timely psychological autopsies in all cases of suicide, suspected suicide, and other traumatic deaths of equivocal cause.

**BMC psychiatry 9(10), 36 sider , 2009**

Download artiklen her : <http://www.biomedcentral.com/1471-244X/9/10/abstract>

## **Effects of trauma and the refugee experience on psychological assessment processes and interpretation**

Kaplan, Ida

### **Abstract**

All psychological assessments occur in a cultural context, whoever the participants. When the participant being assessed is someone of refugee background, several contextual domains, both current and historical, require close attention. Those domains are the effects of torture, violence and traumatic loss; pre-arrival hardships such as poor nutrition, inadequate shelter, lack of access to health services and disruptions to schooling; settlement stresses involving unfamiliarity with Australian systems and discrimination; and family functioning and fractures to family nurturance, maintained by ongoing separation from and dangers to significant others left behind. Given that the purpose of psychological assessment is to formulate appropriate interventions for promoting mental health, learning and wellbeing for individuals presenting with special needs, professional expertise demands a comprehensive analysis of the causes of identified problems.

**Australian psychologist 44(1), 6-15 , 2009**

## **Evaluation of the mental status of rejected asylum seekers in two Danish asylum centers**

Schwarz-Nielsen, Kathrine Hvid, Elklit, Ask

## **Abstract**

### **Introduction**

International studies have shown high incidences of symptoms regarding anxiety, depression, and post traumatic stress disorder (PTSD) among asylum seekers of different ethnicities. The aim of the present study was to investigate the presence of symptoms of anxiety, depression, and PTSD among rejected Iraqi asylum seekers in two Danish Red Cross asylum centers. Factors such as the length of stay in an asylum center and the number of traumatic events were considered as risk factors associated with the degree of psychological morbidity.

### **Method**

In 2007, 53 rejected Iraqi asylum seekers from two Danish Red Cross centers completed a survey based on the Harvard Trauma Questionnaire-IV (HTQ) and the Hopkins Symptom Checklist 25 (HSCL-25). The response rate was 36%. The analyses focused on the impact of gender, age, marriage, religion, the length of stay at the asylum center, and the number of traumatic events on the severity of symptoms of anxiety, depression, and PTSD.

### **Findings**

Of all participants, 94% were found to have symptoms of anxiety, 100% had symptoms of depression, and 77% had symptoms of PTSD. The participants had experienced or witnessed an average of 8.5 traumatic events before their arrival in Denmark. There was no significant association between the number of traumatic events, and the symptoms of PTSD. In addition, there was no significant difference in the length of stay and symptoms of anxiety, depression, and PTSD despite the fact that 79% of the participants had stayed in an asylum center for 5-10 years or more.

### **Conclusion**

Despite the limitations of the data, such as the small sample, this study showed that the prevalence rates of psychopathology in Iraqi asylum seekers in Denmark were alarmingly high. Therefore, it is recommended that systematic screening of all detained asylum seekers in Denmark is introduced. Given the degree of mental health problems it is also recommended that procedures be changed and that treatment should be offered to asylum seekers who are detained in Danish asylum centers.

### **Keywords**

rejected asylum seekers, mental health, trauma events, length of stay, posttraumatic stress disorder

**Torture 19(1), 51-59, 2009**

download artiklen herfra : <http://www.ircct.org/Latest-issue-3716.aspx>

## **Examining racial/ethnic minority treatment experiences with specialty behavioral health service providers**

Redmond, Michelle L.; Galea, Sandro; Delva, Jorge

### **Abstract**

This study investigated whether satisfaction and helpfulness of treatment by mental health service provider is related to race/ethnicity and psychosocial factors. Data from the National Co morbidity Survey-Replication study, which administered mental health service use questions for the past 12-months (1332), was analyzed. Data were stratified by service provider and analyzed with multiple logistic regressions. Racial/ethnic minorities were generally more likely to be satisfied with services provided by specialty mental health providers compared to white respondents. Racial/ethnic minorities generally perceived the services provided by specialty mental health providers as more helpful than did other racial/ethnic groups. Those who reported high cultural identity were more likely to find their treatment experience less satisfying and less helpful. Greater attention to specialty referrals for racial/ethnic minority groups may fruitfully contribute to improve help-seeking for these groups. The role culture plays in shaping the mental health treatment experience needs to be further investigated.

Keywords Race – Ethnicity - Mental health - Help-seeking – Disparities - Treatment barriers

**Community mental health journal 45(2), 85-96, 2009**

## **Forensic psychiatric patients among immigrants in Denmark : diagnoses and criminality**

Gabrielsen, Gorm; Kramp, Peter

### **Abstract**

The purpose of this study is to analyse a sample of immigrant forensic psychiatric patients and to compare them with Danish patients. Of the 326 forensic patients in Copenhagen, 111 were immigrants or descendants of immigrants. The sample was broken down according to area of origin, age, gender and ethnic status. The data have been analysed by Poisson regression with the background population as an offset variable. Of the patients of non-Danish ethnicity, a significantly higher ratio was diagnosed with schizophrenia and a lower ratio was diagnosed with personality disorders compared with Danes. Iranians accounted for a higher ratio than did other minority groups, whereas patients from Western Europe/USA were not different from Danes. The higher ratio of forensic schizophrenic patients of non-Danish ethnicity cannot be explained by social factors or substance abuse. Migration increases the age-adjusted risk (ARR) of becoming schizophrenic (ARR=2.7). We found the ARR of becoming a male forensic schizophrenic patient among immigrants/descendants to be 2.8, i.e. the same as that caused by migration as such. Violence and schizophrenia are associated, and this explains the fact that the ratio of immigrants/descendants having committed violence exceeds that of

Danes. Non-violent crimes are more equally distributed among ethnic groups and seem to be associated with common criminogenic factors. Arson is mainly committed by older schizophrenic patients of Danish ethnicity. The risk of an individual immigrant and Danish schizophrenic patient exhibiting criminal behaviour is the same. Schizophrenia is a criminogenic factor in violence, but not in non-violent crimes. The differences between the various ethnic groups could be related to selection caused by both immigration and emigration.

**Nordic journal of psychiatry 63(2), 140-147, 2009**

## **Immigration and suicidal behavior among Mexicans and Mexican Americans**

Borges, Guilherme; Breslau, Joshua; Su, Maxwell; Miller, Matthew; Medina-Mora, Maria Elena; Aguilar-Gaxiola, Sergio

### **Abstract**

#### **Objectives**

We examined migration to the United States as a risk factor for suicidal behavior among people of Mexican origin.

#### **Methods**

We pooled data from 2 nationally representative surveys in the United States (2001-2003;  $n = 1284$ ) and Mexico (2001-2002;  $n = 5782$ ). We used discrete time survival models to account for time-varying and time-invariant characteristics, including psychiatric disorders.

#### **Results**

Risk for suicidal ideation was higher among Mexicans with a family member in the United States (odds ratio [OR] = 1.50; 95% confidence interval [CI] = 1.06, 2.11), Mexican-born immigrants who arrived in the United States at 12 years or younger (OR = 1.84; 95% CI = 1.09, 3.09), and US-born Mexican Americans (OR = 1.56; 95% CI = 1.03, 2.38) than among Mexicans with neither a history of migration to the United States nor a family member currently living there. Risk for suicide attempts was also higher among Mexicans with a family member in the United States (OR = 1.68; 95% CI = 1.13, 2.52) and US-born Mexican Americans (OR = 1.97; 95% CI = 1.06, 3.65). Selection bias caused by differential migration or differential return migration of persons at higher risk of suicidal ideation or attempt did not account for these findings.

#### **Conclusions**

Public health efforts should focus on the impact of Mexico-US migration on family members of migrants and on US-born Mexican Americans.

**American journal of public health 99(4), 728-733, 2009**

## **Psychoeducation to address stigma in Black adults referred for mental health treatment : a randomized pilot study**

Alvidrez, Jennifer; Snowden, Lonnie R.; Rao, Stephen M.; Boccellari, Alicia

### **Abstract**

42 Black clients referred for outpatient treatment were randomly assigned to receive existing brochures about services or a psychoeducational booklet about stigma based on experiences of Black mental health consumers. At 3-month follow-up, clients reported that both types of information were helpful; there were no significant differences between the types of information on treatment attendance. However, individuals who reported higher perceived treatment need or greater uncertainty about treatment showed greater stigma reduction from the psychoeducation. Findings indicate the need to move beyond "customer satisfaction" to evaluate educational interventions, as well as for greater understanding of differential impact of stigma reduction interventions.

**Keywords** Psychoeducation - Treatment entry - Stigma - African Americans

**Community mental health journal 45(2), 127-136, 2009**

## **Psychological needs, service utilization and provision of care in a specialist mental health clinic for young refugees : a comparative study**

Michelson, Daniel; Sclare, Irene

### **Abstract**

This study addressed psychological needs, patterns of service utilization and provision of care in a specialist mental health service for young refugees and asylum seekers in London. Comparisons were made between two groups with different levels of postulated mental health need: unaccompanied minors (UAMs;  $n = 49$ ) and children accompanied to the UK by one or more primary caregivers ( $n = 29$ ). Significant differences were observed in referral pathways, with UAMs more likely to be referred by social services and less likely to be referred from medical agencies. UAMs also attended fewer sessions during treatment, and missed a greater proportion of scheduled appointments. Contrary to prediction, group comparisons revealed similar levels of post-migration stress and overall psychological morbidity. However, UAMs experienced significantly more traumatic events prior to resettlement, and were more likely to exhibit symptoms of post-traumatic stress disorder (PTSD) than their accompanied peers. Despite their elevated risk of PTSD, UAMs were less likely than accompanied children to have received trauma-focused interventions. UAMs were also significantly less likely to have been treated using cognitive therapy, anxiety management and parent/carer training, as

well as receiving fewer types of practical assistance with basic social needs. The clinical and service implications of these findings are discussed.

**Key Words** children and adolescents - psychological needs - refugees and asylum seekers - service evaluation - unaccompanied minors

**Clinical child psychology and psychiatry 14(2), 273-296, 2009**

## **Rowland Universal Dementia Assessment Scale, Mini-Mental State Examination and General Practitioner Assessment of Cognition in a multicultural cohort of community-dwelling older persons with early dementia**

Basic, David; Khoo, Angela; Conforti, David; Rowland, Jeffrey; Vratsidis, Freda; LoGiudice, Dina; Hill, Keith; Harry, Jan; Lucero, Katherine; Prowse, Robert

### **Abstract**

Early dementia can be difficult to diagnose in older persons from culturally and linguistically diverse (CALD) backgrounds. The Folstein Mini-Mental State Examination (MMSE), the General Practitioner Assessment of Cognition (GPCOG) and the Rowland Universal Dementia Assessment Scale (RUDAS) were compared in 151 older, community-dwelling persons. Receiver operating characteristic (ROC) curve analysis was used to evaluate diagnostic accuracy, while logistic regression was used to evaluate the influence of age, gender, CALD status and years of education. All three instruments were equally accurate in predicting dementia (ROC area under curve 0.92-0.97,  $p > 0.05$  for all comparisons). At the recommended cut-offs, the RUDAS was best for ruling in dementia (positive  $LR=8.77$ ), while the GPCOG was best for ruling out dementia (negative  $LR=0.03$ ). All three instruments were influenced by concomitant depression. Whereas the MMSE was influenced by CALD status, the RUDAS and GPCOG were not. While the GPCOG combines participant and informant data, the RUDAS is a stand-alone measure specifically designed for, and validated in, multicultural populations.

**Keywords:** Cultural diversity; dementia; geriatric assessment; GPCOG; MMSE; RUDAS; scale  
**Australian psychologist 44(1), 40-53, 2009**

## **A school-based mental health intervention for refugee children : an exploratory study**

Fazel, Mina; Doll, Helen; Stein, Alan

### **Abstract**

This report describes an exploratory study of a school-based mental health service developed to address the psychological needs of refugee children. The service was made available in three schools and followed a consultative framework. Refugee children were discussed with the mental health team and children at greatest risk were seen. A questionnaire of psychological functioning was completed by teachers before and after the intervention. Data were collected on 47 refugee children and two control groups (ethnic minority and indigenous white children). Subgroup analyses compared children who were seen directly by the service with those for whom only consultation was provided. Refugee children had poorer overall adjustment at baseline particularly in the emotional and peer problem domains. The greatest improvements following the intervention were seen in hyperactivity for the refugee group and in peer problems for the refugees directly seen by the service. While further studies are necessary to assess its efficacy, this exploratory study indicates that an intervention which involves collaboration with teachers and parents, in an environment where children spend much of their time, can benefit vulnerable children.

**Key Words:** mental health - refugee - school-based

**Clinical child psychology and psychiatry 14(2), 273-296, 2009**

## **RAPPORTER**

### **Helbred og integration : Erfaringer og anbefalinger fra 10 kommuner med indsatser for flygtninge/indvandrere med sygdomsoplevelser**

LG Insight for Ministeriet for Flygtninge, Indvandrere og Integration. - 34 s.

#### **Mest udbredte årsag til sygdom er 'ondt i livet'.**

Langt størstedelen af de nydanske sygdomsramte borgere i matchgruppe 4 og 5 er kvinder fra Tyrkiet, Mellemøsten og Afrika i alderen 35-50 år. Den mest udbredte årsag til sygemelding er 'ondt i livet', som de adspurgte socialrådgivere m. fl. anslår, at op mod 30 procent lider af. Den næstmest udbredte årsag er traumer, som hver fjerde sygemeldte nydansker i gruppen lider af. Andre forklaringer skal findes i kulturbestemte opfattelser af sygdomme, nedslidning og diagnosticerede sygdomme. Derudover bruger en mindre gruppe undertiden sygdom som en undvigelsesstrategi i forhold til at undgå aktivering. Det gælder i op mod 15-20 procent af alle tilfælde, vurderer de adspurgte i undersøgelsen. læs pressemeddelelsen i "Ny i Danmark 11.03.09" her : [http://www.nyidanmark.dk/da-dk/nyheder/pressemeddelelser/integrationsministeriet/2009/marts/nyt\\_lys\\_paa\\_sygdombilledet\\_hos\\_ledige\\_nydanskere.htm?utm\\_source=Mailtool&utm\\_medium=email&utm\\_campaign=85348](http://www.nyidanmark.dk/da-dk/nyheder/pressemeddelelser/integrationsministeriet/2009/marts/nyt_lys_paa_sygdombilledet_hos_ledige_nydanskere.htm?utm_source=Mailtool&utm_medium=email&utm_campaign=85348)

download rapporten "Helbred og integration" her : [http://www.nyidanmark.dk/NR/rdonlyres/B58A764D-E914-41C7-8C19-03A833EAF2E8/0/helbred\\_integrations\\_marts09.pdf](http://www.nyidanmark.dk/NR/rdonlyres/B58A764D-E914-41C7-8C19-03A833EAF2E8/0/helbred_integrations_marts09.pdf)

## InterMultiFemina : En antropologisk analyse af etniske minoritetskvinders narrativer om sundhed og trivsel

Wittrup, Inge  
Region Midtjylland. Center for Folkesundhed, 114 s., 2008

ISBN 978-87-99156-47-4 (trykt udgave); ISBN: 978-87-92400-00-0 (elektronisk udgave)

Etniske minoritetskvinder ønsker dialog med sundhedsprofessionelle. Kvinder fra etniske minoriteter inviterer det danske sundhedsvæsen til at indgå i en anerkendende dialog om sygdom, sundhed og trivsel. Invitationen, som især er henvendt til sundhedsfaglige i almen praksis, fremsættes gennem en ny kvalitativ undersøgelse af etniske minoritetskvinders opfattelse af sygdom, sundhed og trivsel i deres møde med det danske sundhedsvæsen.

Undersøgelsen er foretaget af antropolog og sundhedskonsulent Inge Wittrup, Center for Folkesundhed, Region Midtjylland. Den bygger på flere års sundhedsfremmende arbejde i det vestlige Århus samt interview med ti kvinder fra forskellige oprindelseslande, der har boet i Danmark i en årrække.

En udstrakt hånd - Der er en dominerende fortælling om klager og smerter, som sætter rammen for mange af de møder og konflikter, der ses mellem etniske minoritetskvinder og sundhedsprofessionelle. Men i interviewene ses dele af nye fortællinger, der kan næres og være med til at udvikle mere hensigtsmæssige relationer, siger Inge Wittrup og trækker et citat frem, der illustrerer nogle af de drømme, som de etniske kvinder inviterer sundhedsprofessionelle til at være medfortællere på:

"Jeg drømmer den drøm at se mine børn, de lærer højere uddannelse og bliver meget gode. Og det giver også noget til danskerne, at andre mennesker kan være gode. Og at jeg bliver helt rask og kan leve ligesom andre mennesker. Jeg tænker ikke for meget. Jeg arbejder. Jeg kan ikke bare sidde hjemme. Det er min drøm" (uddrag af interview med kvinde fra Iran).

Ondt i hjertet Der er meget mere på spil, når man går til lægen i et fremmed land, end når man skal til fx grønthandleren. Det dominerende tema i kvindernes fortællinger er, at de oplever, at deres klager og smerter ofte bliver mødt med manglende forståelse. Det forklares ofte med mangel på tid og sygdomsforståelse.

Et andet gennemgående tema er selvforståelsen i forbindelse med klagerne og smerterne. For kvinderne hænger kroppens symptomer sammen med den sociale, kulturelle og psykologiske baggrund, som det fx formuleres her: "Dengang jeg kom til Danmark var mit helbred meget godt og jeg var også glad for at være i Danmark. Siden blev jeg skilt fra min mand og da begyndte der at opstå nogle problemer og mit helbred begyndte at blive dårligere, men omkring for seks år siden blev mit helbred meget, meget dårligt. Nu her for eksempel når jeg sidder, nogen gange får jeg en kvælningsskæmmelse, hvor jeg har lyst til bare at slå gardinerne fra hinanden og åbne alle vinduerne og sådan noget" (uddrag af interview med kvinde fra Libanon).

- Kvinderne ønsker, at deres sundhed og trivsel bliver set i sammenhæng med deres øvrige liv, når de møder den praktiserende læge. Men det sker alt for sjældent. Det betyder, at den dominerende fortælling om mangel på forståelse, udtrykt i metaforer som 'ondt i hjertet', trives i bedste velgående i kvindernes indbyrdes snak, og det kan let blive en selvopfyldende profeti, forklarer Inge Wittrup.

InterMultiFemina - ny tilgang På baggrund af undersøgelsen har Inge Wittrup udviklet en reflekterende tilgang til mødet mellem etniske minoriteter og sundhedsfaglige, kaldet "InterMultiFemina". Den rummer en række anbefalinger, der kan fremme en dialog, som ikke kun er anerkendende, men også interkulturel. Hun fortæller:

InterMultiFemina kan ses som et tankeredskab, en slags nøgle til en bedre gensidig forståelse og anerkendelse og et nyt fremadrettet fokus. InterMultiFemina er 'midt imellem' (Inter), 'mangfoldig og flertydig' (Multi) og på vej mod en ny 'kønsidentitet' (Femina).

Download rapporten her

<http://www.centerforfolkesundhed.dk/files/Sundhed/Folkesundhed/Sundhedsfremme%20Århus/Inges%20publikationer%20mv/InterMultiFemina%20-%20rapport.pdf>

## Perceptions of dementia in ethnic communities

Alzheimer's Australia Victoria  
Australien, Victoria

32 s., 2008

Beskriver holdningen til og opfattelsen af demens inden for følgende sprogområdet : arabisk; kinesisk; kroatisk; græsk; italiensk; makedonsk; polsk; russisk; serbisk; spansk; tyrkisk;

rapporten kan downloades her : <http://www.alzheimers.org.au/upload/CALDPerceptionsOct08.pdf>

I forbindelse med projektet, er der også udarbejdet en projektrapport på 18 sider. Den kan downloades her : <http://www.alzheimers.org.au/upload/CALDPerceptionsProjectReportOct08.pdf>

## **Tolkeguide : Håndbog om tolkning i den kommunale indsats**

Ministeriet for Flygtninge, Indvandrere og Integration

35 sider, 2008

### Indholdsfortegnelse

- HVAD ER EN TOLK? : Tolkens vigtigste kompetencer : Tolken er ingen maskine; : Tolkens rolle og ansvar - neutralitet og etik : Tolkeetiske retningslinjer : Tavshedspligt;
- HVORNÅR BØR DU BRUGE TOLK? : Forvaltningsloven : Brug så vidt muligt professionelle tolke : Gode råd ved bestilling af tolk : Sprog;
- TOLKEN SOM SAMARBEJDSPARTNER : Før samtalen : Sørg for at briefe tolken : Under samtalen : Efter samtalen : Det gode og dårlige samarbejde;
- TOLKESITUATIONEN : Tjekliste til tolkesituationen : Faktorer der kan påvirke tolkesituationen : Tilgang til samtalepartneren : Fælles forståelse : Stedet for samtalen : Placering ved tolkesamtalen : Kropssprogets betydning : Følelsesmæssig påvirkning : I tilfælde af konflikt : Hukommelsen rækker ikke evigt;
- TOLKEFORMER : Dialogtolkning (konsekutiv tolkning) : Telefontolkning : Konferencetolkning (simultantolkning);
- UDDANNELSE : Hvad kan man gøre for at sikre kvaliteten?;
- ORGANISERING AF TOLKEARBEJDET : Den uvildige tolk;
- ØKONOMI : Hvem betaler? : Justitsministeriets vejledning

Download vejledningen her : <http://www.nyidanmark.dk/NR/rdonlyres/A05860B6-654A-46FE-812D-36017EAC47F8/0/tolkeguide2008.pdf>