

Information om Transkulturel Psykiatri, oktober 2009

NYHEDER

72-årig dement iraker fængslet

Informations netavis 6. oktober 2009 / Anton Geist

I går blev den 72-årige svært demente afviste irakiske asylansøger, Hassan Gardi, og hans kone, Gulizar, fængslet. Det erfarer Information sent i går aftes.

»Det er fuldstændig chokerende. Jeg havde ikke troet, man ville gøre sådan noget mod en mand, der er så syg,« siger juristen, Dlovan Abdulla, der igennem de senere måneder har hjulpet Hassan og Gulizar Gardi med at undgå den tvangsudvisning, der har ventet dem, siden Danmark den 13. maj indgik en hjemsendelsesaftale med Irak.

Som det tidligere er fremgået af Information, er Hassan Gardis demens ifølge en speciallægeerklæring »at sidestille med psykisk sygdom af meget alvorlig karakter.«

Sygdommen er således så fremskreden, at han ingenting kan på egen hånd. Hver dag mader hans kone ham, hjælper ham med at tage tøj på og vasker ham, når han har tisset i bukserne. Desuden har Hassan Gardi forhøjet blodtryk, dårligt hjerte og lider under posttraumatisk stresstilstand, PTSD.

læs artiklen her: <http://www.information.dk/206443>

- **Hjernescanning dokumenterer : fængslet iraker er alvorligt syg**

Informations netavis 7. oktober / Anton Geist

Fængslede Hassan Gardis demens er massiv. Sådan lyder konklusionen på en hjernescanning, der nu ligger klar. Ekspert anbefaler, at han tilbydes pleje i rolige omgivelser. De danske myndigheder vil tvangshjemsende ham til Irak.

læs artiklen her: <http://www.information.dk/206546>

Als Research gennemfører nyt projekt for Sundhedsstyrelsen

Als Researchs hjemmeside 10. oktober 2009

Als Research gennemfører for Sundhedsstyrelsen et kortlægnings- og udviklingsprojekt målrettet etniske minoritetsbørn og –unge i PPR-systemet. Projektet udføres i et samarbejde med Århus Kommune og Københavns Kommune. Målet er at tilvejebringe ny viden om psykiske problemer blandt børn og unge med anden etnisk baggrund samt at udvikle redskaber og samarbejdsrelationer til forbedring af bl.a. tidlig diagnosticering og behandling. Projektet løber fra efteråret 2009 til og med 2011.

Flyktingskap, migration och hälsa I : kursus

Nordiska högskolan för folkhälsovetenskaps hjemmeside

En växande del av Nordens befolkning utgörs av människor födda i andra länder eller deras barn. Många av dem har flytt undan förföljelse, krig och konflikter. Barn har ofta bevittnat eller själva utsatts för övergrepp, andra påverkas av föräldrarnas traumatiska erfarenheter. En del har genomgått en påfrestande asylprocess och hamnat i arbetslöshet och invandrantäta bostadsområden i det nya landet. Förekomst av fattigdom och ohälsa har klart ökat bland invandrargrupper i de nordiska länderna och många ungdomar växer idag upp med en känsla av utanförskap. Denna utveckling innebär ett potentiellt hot mot folkhälsan. Samtidigt kan människors erfarenheter från skilda samhällen och kulturer utgöra resurser.

læs mere her: http://www.nhv.se/customer/templates/CoursePage_1824.aspx?epslanguage=SV

FRA FOLKETINGET

Folketingets Sundhedsudvalg har den 28. august 2009 stillet følgende spørgsmål nr. 696(Alm. del) til ministeren for sundhed og forebyggelse, som hermed besvares.

Spørgsmålet er stillet efter ønske fra Özlem Sara Cekic (SF). Spørgsmål nr. 696:

'Der ønskes en opgørelse over selvmordsforsøg og selvmord blandt henholdsvis flygtninge og ikke-etnisk danske i Danmark.

'Svar: Jeg har til brug for min besvarelse indhentet bidrag fra Sundhedsstyrelsen, der oplyserfølgende: "Sundhedsstyrelsen har ikke mulighed for at udarbejde sådanne opgørelser. Der er ikke en særskilt opgørelse af etnicitet i Dødsårsagsregisteret og Landspatientregistret. Ligeledes er der heller ikke en særskilt opgørelse af flygtningestatus. Sundhedsstyrelsen henviser til en undersøgelse, som Center for Selvmordsforskning har udført med støtte fra bl.a. Indenrigs- og Socialministeriet, "Suicide Risk among Persons with Foreign Background in Denmark" (Center for Selvmordsforskning, 2008). Undersøgelsen findes på hjemmesiden www.selvmordsforskning.dk. Undersøgelsen er et kvantitativt studie, hvor Dødsårsagsregistret er sammenkørt med oplysninger fra CPR-registeret og registeroplysninger fra Danmarks Statistik. Der er undersøgt sammenhæng mellem etnicitet, defineret ud fra fødeland, og selvmord i perioden 1981-1997. Undersøgelsen viser, at selvmordsrisikoen er højere blandt personer, der er født i de andre nordiske lande, end blandt personer der er født i Danmark af danske forældre. Derudover viser undersøgelsen, at personer, som er født i Asien og Afrika, har en lavere risiko for at begå selvmord end personer, der er født i Danmark af danske forældre."

læs artiklen her:

<http://www.selvmordsforskning.dk/Web/Site/Menu2/Litteratur/Publikationer/Publikationer/Rapporter/Selv mord sadf%E6rd+og+selvskade+blandt+etniske+minoriteter?markup=pakistani>

LITTERATUR

Acute psychiatric disorders in foreign domestic workers in Hong Kong : a pilot study

Lau, Phyllis W. L.; Cheng, Judy G. Y.; Chow, Dickson L.Y.; Ungvari, G. S.; Leung, C. M.

Abstract

Aim

To explore the psychopathology of foreign domestic workers (FDWs) who had an acute psychiatric disorder in Hong Kong.

Method

This was a retrospective chart review. Demographic and clinical data were extracted from case records of FDWs who were admitted for the first time as inpatients for psychiatric treatment to three regional hospitals of the same catchment area in Hong Kong between 2000 and 2004. Relevant socio-demographic data on local FDWs and the general population of Hong Kong were obtained from local government departments.

Results

Twenty-seven Filipino and 14 Indonesian FDWs presenting with their first and so far only psychiatric admission were identified. There were significantly more FDWs who were single or never married in the sample. Filipino FDWs tended to fall ill after 4 years of service in Hong Kong while the corresponding figure for Indonesian FDWs was 2 years. Indonesian FDWs were older and had less access to social and medical services than their Filipino counterparts. Home sickness and marital problems were more commonly identified as stressors rather than workrelated difficulties. Acute and Transient Psychotic Disorder (ICD-10) was diagnosed in over 60% of the subjects, making FDWs two times more vulnerable than local women of similar age for this illness.

Conclusions

FDWs constitute a vulnerable group in terms of psychiatric morbidity. Concerted political, social and psychological efforts would be required to alleviate the distress faced by this particularly disadvantaged subset of female expatriates.

Key Words Acute and Transient Psychotic Disorder - foreign domestic workers - Hong Kong - mental health
International journal of social psychiatry 55(6), 569-576, 2009

Anger, PTSD, and the nuclear family: A study of Cambodian refugees

Hinton, Devon E.; Rasmussen, Andrew; Nou, Leakhena; Pollack, Mark H.; Good, Mary-Jo

Abstract

This study profiles the family-directed anger of traumatized Cambodian refugees, all survivors of the Pol Pot genocide (1975-1979), who were patients at a psychiatric clinic in Lowell, MA, USA. We focus on the nuclear family (NF) unit, the NF unit defined as the patient's "significant other" (i.e. spouse or boyfriend/girlfriend) and children. Survey data were collected from a convenience sample of 143 Cambodian

refugee patients from October 2006 to August 2007. The study revealed that 48% (68/143) of the patients had anger directed toward a NF member in the last month, with anger directed toward children being particularly common (64 of the 143 patients, or 49% [64/131] of the patients with children). NF-type anger was severe, for example, almost always resulting in somatic arousal (e.g., causing palpitations in 91% [62/68] of the anger episodes) and often in trauma recall and fears of bodily dysfunction. Responses to open-ended questions revealed the causes of anger toward a significant other and children, the content of anger-associated trauma recall, and what patients did to gain relief from anger. A type of cultural gap, namely, a linguistic gap (i.e., the parent's lack of English language skills and the child's lack of Khmer language skills), seemingly played a role in generating conflict and anger. NF-type anger was associated with PTSD presence. The effect of anger on PTSD severity resulted in part from anger-associated trauma recall and fears of bodily dysfunction, with 54% of the variance in PTSD severity explained by that regression model. The study: 1) suggests that among traumatized refugees, family-related anger is a major clinical concern; 2) illustrates how family-related anger may be profiled and investigated in trauma-exposed populations; and 3) gives insights into how family-related anger is generated in such populations.

Keywords: Anger; PTSD; Family; Catastrophic cognitions; Cambodian refugees; Acculturation; USA
Social science and medicine 69(9), 1387-1394, 2009

Clinical pitfalls in the diagnosis of *Ataque de Nervios* : a case study

Lizardi, Dana; Oquendo, Maria A.; Graver, Ruth

Abstract

Ataque de nervios (attack of nerves) is an idiom of distress generally thought of in relation to Caribbean Hispanics. The following case study discusses the presentation of *ataque de nervios* in a Colombian female. This case study provides insight into a different presentation of *ataque de nervios* in a new population that clinicians should be aware of in order to ensure accurate diagnosis. *Ataque de nervios* is a distinct syndrome that does not fully correspond with any single DSM-IV diagnosis. However, there is overlap between symptoms in this condition and those in conventional clinical diagnoses. Common problems in deriving an accurate differential diagnosis are discussed. Implications for treatment are also reviewed, with an emphasis on a comprehensive approach to treatment that supports the client's norms and values.

Key Words: *ataque de nervios* - Colombia - culture-bound syndrome - differential diagnosis - idioms of distress

Transcultural psychiatry 46(3), 463-486, 2009

The cultural formulation

Lewis-Fernández, Roberto

Fra starten af artiklen (editorial)

The Outline for Cultural Formulation, developed for DSM-IV by the Group on Culture and Diagnosis of the National Institute of Mental Health (Mezzich, 1995; Lewis-Fernández, 1996), represents the most substantive cultural contribution to the DSM series. It provides instructions for conducting a cultural formulation, a systematic assessment of the patient's cultural identity, illness representations, perceived causation, treatment expectations, cultural context of stressors and supports, and other relevant cultural factors that can be carried out with a patient from any cultural background during a mental health evaluation. The information obtained on these aspects of the patients' socio-cultural context is intended to improve diagnostic validity as well as to help align clinicians' recommendations with the patient's and family's illness understandings and help-seeking expectations in order to enhance treatment satisfaction, adherence, and response (Lewis-Fernández & Díaz, 2002).

Transcultural psychiatry 46(3), 379-382, 2009

The cultural formulation : a model to combine nosology and patients' life context in psychiatric diagnostic practice

Bäärnhelm, Sofie; Rosso, Marco Scarpinati

Abstract

This article discusses the experience of adapting and applying the Outline for a Cultural Formulation in DSM-IV to the Swedish context. Findings from a research project on the Cultural Formulation highlight the value of combining psychiatric nosological categorization with an understanding of patients' cultural life context in order to increase the validity of categorization and to formulate individualized treatment plans. In clinical care practitioners need models and tools that help them take into account patients' cultural backgrounds, needs, and resources in psychiatric diagnostic practice. We present a summary of a Swedish manual for conducting a Cultural Formulation interview. The need for further development of the Cultural Formulation is also discussed.

Key Words: cultural formulation - culture - psychiatric diagnostic practice - Sweden
Transcultural psychiatry 46(3), 406-427, 2009

Cultural formulation guidelines

Mezzich, Juan E.; Caracci, Giovanni; Fabrega, Horacio; Kirmayer, Laurence J.

Abstract

The outline for the Cultural Formulation (CF) introduced in DSM-IV does not present any method for collecting the required cultural information. The absence of specific guidelines and illustrative cases has hampered its wider use. This article offers a practical approach to preparing a Cultural Formulation as a component of culturally competent clinical care. We summarize the rationale for the four sections of the CF, describe the process of conducting culturally focused clinical interviews, and present examples of questions or lines of inquiry that can be used to collect the information needed to construct the CF. An online supplement provides case examples of cultural formulations applied to patients seen in the US.

Key Words: clinical interview - cultural formulation - DSM-IV-TR - diagnostic assessment - training
Transcultural psychiatry 46(3), 383-405, 2009

Hertil hører 6 cases, som ligger særskilt på tidsskriftets hjemmeside, og de ikke er en del af artiklen

A culturally relevant conceptualization of depression: An empirical examination of the factorial structure of the Vietnamese Depression Scale

Dinh, Tam Q.; Yamada, Ann Marie; Yee, Barbara W.K.

Abstract

Background

Despite the high risk of depression among Vietnamese refugees, there has been insufficient attention to the psychometric properties of the most utilized scale, the Vietnamese Depression Scale (VDS: Kinzie *et al.*, 1982).

Aim

The primary aim of the study is to empirically derive the factorial structure of the VDS to support its use as a culturally responsive depression screening tool in community samples of Vietnamese adults.

Method

The factorial structure, reliability, and associations of the VDS factors with recognized socio-demographic correlates were examined using data collected from interviews with a non-probability community sample of 180 Vietnamese refugee adults in the Houston area.

Results

The empirically derived factorial structure of the VDS approximated the theorized conceptualization of depression introduced by the scale's originators. Three factors (depressed affect, somatic symptoms, and cultural-specific symptoms) accounted for 65% of the variance. As hypothesized, the VDS factors correlated with age and acculturation variables.

Conclusion

Overall results suggest that the conceptualization of depression among this sample of Vietnamese refugees has both universal and culturally specific features. Implications for providing culturally responsive mental health services are offered.

Key Words: factor analysis • major depression screening tool • psychometrics • refugees
International journal of social psychiatry 55(6), 496-505, 2009

Culture, cultural factors and psychiatric diagnosis : review and projections

Alarcón, Renato D.

Abstract

This paper aims to provide conceptual justifications for the inclusion of culture and cultural factors in psychiatric diagnosis, and logistic suggestions as to the content and use of this approach. A discussion of the scope and limitations of current diagnostic practice, criticisms from different quarters, and the role and relevance of culture in the diagnostic encounter, precede the examination of advantages and disadvantages of the approach. The cultural content of psychiatric diagnosis should include the main, well-recognized cultural variables, adequate family data, explanatory models, and strengths and weaknesses of every individual patient. The practical aspects include the acceptance of "cultural discordances" as a component of an updated definition of mental disorder, and the use of a refurbished cultural formulation. Clinical "telescoping" strategies to obtain relevant cultural data during the diagnostic interview, and areas of future research (including field trials on the cultural formulation and on "culture bound syndromes"), are outlined.

Key words: Culture, psychiatric diagnosis, cultural formulation

World Psychiatry 8(3), 131-139, 2009

download hæftet her: <http://www.wpanet.org/publications/wpa-journal/wpa-10-09.pdf>

DSM-IV-TR cultural formulation of psychiatric cases : 2 proposals for clinicians

Martínez, Luis Caballero

Abstract

This article reviews some limitations of the current guideline for the DSM-IV-TR Cultural Formulation (CF) from the perspective of psychiatric practice that are based on the author's experience conducting doctoral courses on cultural psychiatry from 1996 to 2007 in the Department of Psychiatry at the Universidad Autónoma de Madrid (Spain). Two proposals are presented for facilitating use of the CF by general clinicians. These proposals offer a procedure for embedding only the most relevant clinical information in a psychiatric history, followed by a brief cultural formulation. The approach is illustrated with a clinical case. Although the CF has considerable promise for revealing knowledge about patients, health practices, and health systems that is essential for clinical care, substantial research must be carried out to facilitate widespread use of the CF in clinical practice.

Key Words: cultural formulation - migration - psychiatric training

Transcultural psychiatry 46(3), 506-523, 2009

Ethnic differences in cognitive function over time

Masel, C.; Peek, M. Kristen

Purpose

Minority group membership in old age has been implicated as a risk factor for lower scores on cognitive function tests, independent of education level. In addition, differential rates of cognitive decline by ethnic group have been identified in several epidemiologic studies. However, others have not been able to detect differences.

Methods

In order to determine if health disparities in cognitive function scores extend to rates of decline, the current research examined rates of change in memory and mental status over the course of 9 years (1996–2004) in a nationally representative sample of late middle-aged and older white, black, and Hispanic adults who were part of the nationally representative Health and Retirement Study. Change in cognitive function was measured by separate indices of memory and mental status items and analyzed with multivariable mixed modeling.

Results

Results indicated that, after controlling for demographic, social, and health-related variables, ethnicity was associated with cognitive function scores across waves ($P < 0.01$), but did not greatly impact rates of decline. Furthermore, although education was associated with cognitive function scores across waves ($P < 0.01$), education level did not impact decline rates.

Conclusions

Some health disparities in cognitive function exist even in late middle age, but ethnic differences in rates of decline are mixed.

Key Words: Middle Aged, Aged, Ethnic Groups, Cognitive Function

Annals of epidemiology 19(11), 778-783, 2009

Etnicitet, migration och folkhälsa

Hjern, Anders

Abstract

Att särskilja olika etniska grupper när befolkningens hälsa studeras kan tydliggöra hur livsstil och diskriminering påverkar hälsan. Men det kan också, lösryckt ur ett socialt sammanhang, förstärka stigmatiseringen av människor.

Nyckelord folkhälsa, livsstil, diskriminering, stigmatisera, etnicitet, minoriteter, ackulturation, miljöfaktorer, psykosjukdomar, stress

i&m : invandrare og minoriteter 36(4-5), 5-9, 2009

Examining Latino differences in mental healthcare use : the roles of acculturation and attitudes towards healthcare

Berdahl, Terceira A.; Stone, Rosalie A. Torres

Abstract

Latinos are less likely to use mental health services compared to non-Latino whites, but little research has examined the relative contribution of acculturation and attitudes towards healthcare. In the current study, we analyze data from a nationally representative sample of Mexicans, Cubans, Puerto Ricans and non-Latino whites from the 2002–2003 Medical Expenditure Panel Survey ($n=30,234$). Findings show different utilization patterns in use of specialty, non-specialty, and any type of mental healthcare across the three Latino subgroups. The predictive efficacy of acculturation variables on ethnic group differences varies by subgroup. Self-reliant attitudes towards healthcare are associated with lower use, but these attitudes do not explain the ethnic gaps in use.

Keywords Racial-ethnic disparities – Latinos – Acculturation – Attitudes - Healthcare Use - Help-seeking

Community mental health journal 45(5), 393

Främja hälsa eller intyga ohälsa

Ginsburg, Bengt Erik

Abstract

Vårdpersonalen engagerar sig ofta i flyktingars hälsa – under tiden de söker asyl. Men efter ett uppehållstillstånd blir den nyanlände osynlig i vården, trots att den psykiska hälsan ofta försämras under de första åren i det nya landet.

Nyckelord flykting, asyl, vårdpersonal, integration, arbetsmarknadspolitik, psykosocial, hälsosamtal, nyanländ, vårdbehov

i&m : invandrare og minoriteter 36(4-5), 10-13, 2009

Föräldrars trauma ärvs av barnen

Kaplan, Suzanne

Abstract

Även om föräldrar som överlevt traumatiska händelser inte talar om sina upplevelser, överför de historien om det förflutna på olika ordlösa sätt till sina barn. Barn skapar sina egna idéer om det de tror är föräldrarnas erfarenheter.

Nyckelord trauma, överlevande, kroppsminnen, psykopatologiserande, andragenerationsfenomenet, förföljelser, transgenerationell överföring

i&m : invandrare og minoriteter 36(4-5), 18-21, 2009

I mötet med psykvården

Hultsjö, Sally

Abstract

Utlandsfödda svenskar kan ha en annan syn på psykiatrisk vård än svenskar födda i Sverige. Men de vill bli bemötta på samma sätt och få samma möjlighet till delaktighet som alla andra, oavsett bakgrund och språkkunskaper.

Nyckelord psykvården, psykos, språkförobistring, diskriminering, asylsökande, flyktingar, kulturer
i&m : invandrare og minoriteter 36(4-5), 37-39, 2009

Inconsistencies in diagnosis and symptoms among bilingual and English-speaking Latinos and Euro-Americans

Díaz, Esperanza; Miskemen, Theresa; Vega, William A.; Gara, Michael; Wilson, Daniel R.; Lesser, Ira; Escamilla, Michael; Neighbors, Harold W.; Arndt, Stephan; Strakowski, Stephen

Abstract

Objective

Little information is available about accuracy of diagnoses in clinical care for affective and other major mental disorders experienced by Latino patients. This study addressed two central research questions: Do Latinos have disproportionate rates of clinical diagnoses of major depression based on structured diagnostic interviews? Are diagnostic patterns consistent with patient profiles and medical record information?

Methods

A total of 259 bilingual Latino, monolingual English-speaking Latino, and Euro-American patients aged 18 to 45 years with a history of severe depression or psychotic symptoms were compared across three clinical sites by using structured interviews.

Results

Compared with Euro-Americans, bilingual Latinos had significantly higher rates of major depression and significantly lower levels of mania. No significant differences were found between monolingual English-speaking Latinos and Euro-Americans.

Conclusions

Results suggest that the diagnostic process is affected by an apparent association with cultural-linguistic influences, notably speaking English as a second language.

Psychiatric services 60(10), 1336-1341, 2009

Inte tagna på allvar

Robertson, Eva

Abstract

Många invandrade kvinnor känner sig inte respekterade när de söker hälso- och sjukvårdens hjälp. Vårdpersonalen ser sina egna och vårdens outtalade normer och värderingar som de enda rätta, utan att reflektera över andra alternativ.

Nyckelord respekterad, normer, hälso- och sjukvårdslagen, oro, smärtupplevelse, tolkningsföreträde, sjukvårdskultur

i&m : invandrare og minoriteter 36(4-5), 30-33, 2009

Livsvilkorens effekter på hälsan

Tinghög, Petter

Abstract

Orsakerna till psykisk (o)hälsa bland invandrare utgör en komplex väv och skiljer sig mellan olika grupper och individer. Men att sociala och ekonomiska villkor har en stor betydelse för hälsan tycks gälla över lag.

Nyckelord psykisk ohälsa, invandringspolitik, flyktingar, levnadsvillkor

i&m : invandrare og minoriteter 36(4-5), 42-44, 2009

Migration and mental health : A study of low-income Ethiopian women working in Middle Eastern countries

Anbesse, Birke; Hanlon, Charlotte; Alem, Atalay; Packer, Samuel; Whitley, Rob

Abstract

Background

Few studies have explored influences on mental health of migrants moving between non-Western countries.

Methods

Focus group discussions were used to explore the experiences of Ethiopian female domestic migrants to Middle Eastern countries, comparing those who developed severe mental illness with those remaining mentally well.

Discussion

Prominent self-identified threats to mental health included exploitative treatment, enforced cultural isolation, undermining of cultural identity and disappointment in not achieving expectations. Participants countered these risks by affirming their cultural identity and establishing socio-cultural supports.

Conclusions

Mental health of migrant domestic workers may be jeopardized by stressors, leading to experience of social defeat.

Key Words: Ethiopia - mental health - Middle East - migration - qualitative

International journal of social psychiatry 55(6), 557-568, 2009

A model of mother–child adjustment in Arab Muslim immigrants to the US[✶]

Aroian, Karen; Hough, Edythe S.; Templin, Thomas N.; Kulwicki, Anahid; Ramaswamy Vidya; Katz, Anne

Abstract

We examined the mother–child adjustment and child behavior problems in Arab Muslim immigrant families residing in the U.S.A. The sample of 635 mother–child dyads was comprised of mothers who emigrated from 1989 or later and had at least one early adolescent child between the ages of 11 and 15 years old who was also willing to participate. Arabic speaking research assistants collected the data from the mothers and children using established measures of maternal and child stressors, coping, and social support; maternal distress; parent–child relationship; and child behavior problems. A structural equation model (SEM) was specified a priori with 17 predicted pathways. With a few exceptions, the final SEM model was highly consistent with the proposed model and had a good fit to the data. The model accounted for 67% of the variance in child behavior problems. Child stressors, mother–child relationship, and maternal stressors were the causal variables that contributed the most to child behavior problems. The model also accounted for 27% of the variance in mother–child relationship. Child active coping, child gender, mother's education, and maternal distress were all predictive of the mother–child relationship. Mother–child relationship also mediated the effects of maternal distress and child active coping on child behavior problems. These findings indicate that immigrant mothers contribute greatly to adolescent adjustment, both as a source of risk and protection. These findings also suggest that intervening with immigrant mothers to reduce their stress and strengthening the parent–child relationship are two important areas for promoting adolescent adjustment.

Keywords: USA; Arabs; Immigration; Mother–child adjustment; Children; Child behavior problems

Social science and medicine 69(9), 1377-1386, 2009

Posttraumatic stress disorder : anxiety or traumatic stress disorder?

Resick, Patricia A. Mark W. Miller

Abstract

The authors examine the question of whether posttraumatic stress disorder (PTSD) should continue to be classified with the anxiety disorders in the upcoming revision of the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-V; American Psychiatric Association) classification system. They examine four areas of research that challenge the placement of PTSD among the anxiety disorders: research on peritraumatic emotions and their association with later PTSD symptoms, the role of emotions over the course of PTSD, physiological reactivity and emotional responses, and comorbidity patterns. The

authors conclude with the recommendation that PTSD be included among a new category of traumatic stress disorders in DSM-V.

Journal of traumatic stress disorder 22(5), 384-390, 2009

Posttraumatiskt stressyndrom

Pantziaras, Ioannis

Abstract

Många flyktingar som varit utsatta för svåra psykiska trauman lider av Posttraumatiskt stressyndrom, PTSD. Vissa återhämtar sig gradvis medan andra behöver vård för att sjukdomen inte ska förvärras och leda till ett begränsat liv.

Nyckelord posttraumatiskt stressyndrom, PTSD, ångestsjukdom, trauma, tortyr, psykoedukation, KBT
i&m : invandrare og minoriteter 36(4-5), 40-41, 2009

Psychiatric disorders and other health dimensions among Holocaust survivors 6 decades later

Sharon, Asaf; Levav, Itzhak; Brodsky, Jenny; Shemesh, Annarosa Anat; Kohn, Robert

Abstract

Background

No previous community-based epidemiological study has explored psychiatric disorders among those who survived the Holocaust.

Aims

To examine anxiety and depressive disorders, sleep disturbances, other health problems and use of services among individuals exposed and unexposed to the Holocaust.

Method

The relevant population samples were part of the Israel World Mental Health Survey. The interview schedule included the Composite International Diagnostic Interview and other health-related items.

Results

The Holocaust survivor group had higher lifetime (16.1%; OR = 6.8, 95% CI 1.9–24.2) and 12-month (6.9%; OR = 22.5, 95% CI 2.5–204.8) prevalence rates of anxiety disorders, and more current sleep disturbances (62.4%; OR = 2.5, 95% CI 1.4–4.4) and emotional distress ($P < 0.001$) than their counterparts, but did not have higher rates of depressive disorders or post-traumatic stress disorder.

Conclusions

Early severe adversity was associated with psychopathological disorder long after the end of the Second World War, but not in all survivors. Age during the Holocaust did not modify the results.

British journal of psychiatry 195(4), 331-335, 2009

A qualitative study of clinicians' use of the cultural formulation model in assessing posttraumatic stress disorder

Fortuna, Lisa R.; Porche, Michelle V.; Alegría, Margarita

Abstract

The Cultural Formulation (CF) of the Diagnostic and Statistical Manual (DSM) provides a potential framework for improving the diagnostic assessment of Posttraumatic Stress Disorder (PTSD) in culturally diverse patients. We analyzed data from the Patient-Provider Encounter Study, a multi-site study that examines the process of diagnosis and clinical decision-making during an initial clinical intake session, in order to examine use of CF for PTSD diagnosis. We find that while the CF is generally used inconsistently or underutilized in routine community settings, when employed appropriately it may assist the formulation and interpretation of traumatic experiences. We discuss the implications for improving the assessment of PTSD in the time-limited setting of the clinical intake encounter and across race/ethnicity.

Key Words: clinical decision making - cross-cultural diagnosis - cultural formulation model - posttraumatic stress disorder - trauma

Transcultural psychiatry 46(3), 429-450 (2009)

Quality of life in mentally ill, physically ill and healthy individuals: The validation of the Greek version of the World Health Organization Quality of Life (WHOQOL-100) questionnaire

Ginieri-Coccosis, Maria; Triantafyllou, Eugenia; Tomaras, Vlasis; Liappas, Ioannis A.; Christodoulou, George N.; Papadimitriou, George N

Abstract

Objective

The World Health Organization Quality of Life (WHOQOL-100) questionnaire is a generic quality of life (QoL) measurement tool used in various cultural and social settings and across different patient and healthy populations. The present study examines the psychometric properties of the Greek version, with an emphasis on the ability of the instrument to capture QoL differences between mentally ill, physically ill and healthy individuals.

Methods

A total of 425 Caucasian participants were tested, as to form 3 groups: (a) 124 psychiatric patients (schizophrenia n = 87, alcohol abuse/dependence n = 37), (b) 234 patients with physical illness (hypertension n = 139, cancer n = 95), and (c) 67 healthy control individuals.

Results

Confirmatory factor analysis was performed indicating that a four-factor model can provide an adequate instrument structure for the participating groups (GFI 0.92). Additionally, internal consistency of the instrument was shown to be acceptable, with Cronbach's alpha values ranging from 0.78 to 0.90 regarding the four -domain model, and from 0.40 to 0.90 regarding the six-domain one. Evidence based on Pearson's r and Independent samples t-test indicated satisfactory test/retest reliability, as well as good convergent validity tested with the General Health Questionnaire (GHQ-28) and the Life Satisfaction Inventory (LSI). Furthermore, using Independent samples t-test and one-way ANOVA, the instrument demonstrated good discriminatory ability between healthy, mentally ill and physically ill participants, as well as within the distinct patient groups of schizophrenic, alcohol dependent, hypertensive and cancer patients. Healthy individuals reported significantly higher QoL, particularly in the physical health domain and in the overall QoL/health facet. Mentally ill participants were distinctively differentiated from physically ill in several domains, with the greatest difference and reduction observed in the social relationships domain and in the overall QoL/health facet. Within the four distinct patient groups, alcohol abuse/dependence patients were found to report the most seriously compromised QoL in most domains, while hypertensive and cancer patients did not report extensive and significant differences at the domain level. However, significant differences between patient groups were observed at the facet level. For example, regarding the physical domain, physically ill participants reported more compromised scores in the pain/ discomfort facet, while mentally ill participants in the facets of energy/ fatigue, daily living activities and dependence on medication.

Conclusions

The findings of the study indicate that the Greek version of WHOQOL-100 provided satisfactory psychometric properties supporting its use within general and pathological populations and in the context of national and crosscultural QoL measurement.

Annals of general psychiatry 8(23), 37pp, 2009

download artiklen herfra: <http://www.annals-general-psychiatry.com/content/8/1/23/abstract>

Race-ethnicity as a predictor of attitudes toward mental health treatment seeking

Shim, Ruth S.; Compton, Michael T.; Rust, George; Druss, Benjamin G.; Kaslow, Nadine J.;

Abstract

Objective

Previous research on mental health disparities shows that persons from racial-ethnic minority groups have less access to mental health care, engage in less treatment, and receive poorer-quality treatment than non-Hispanic whites. Attitudes and beliefs about mental health treatment were examined to determine whether they contribute to these disparities.

Methods

Data from the National Comorbidity Survey Replication (NCS-R) were analyzed to determine attitudes toward treatment-seeking behavior among people of non-Hispanic white, African-American, and Hispanic or Latino race-ethnicity. Additional sociodemographic variables were examined in relation to attitudes and beliefs toward treatment.

Results

African-American race-ethnicity was a significant independent predictor of greater reported willingness to seek treatment and lesser reported embarrassment if others found out about being in treatment. These findings persisted when analyses adjusted for socioeconomic variables. Hispanic or Latino race-ethnicity also was associated with an increased likelihood of willingness to seek professional help and lesser embarrassment if others found out, but these differences did not persist after adjustment for the effects of socioeconomic variables.

Conclusions

Contrary to the initial hypothesis, African Americans and Hispanics or Latinos may have more positive attitudes toward mental health treatment seeking than non-Hispanic whites. To improve access to mental health services among racial-ethnic minority groups, it is crucial to better understand a broader array of individual-, provider-, and system-level factors that may create barriers to care.

Psychiatric services 60(10), 1336-1341, 2009

Racial and ethnic differences in substance abuse service needs, utilization, and outcomes in California

Niv, Noosha; Pham, Rhoda; Hser, Yih-Ing

Abstract

Objective

This study examined differences in service needs and treatment utilization, retention, and outcomes between African-American, Hispanic, and white substance abusers in community-based treatment programs.

Methods

Data were collected from 2,401 African Americans, 3,222 Hispanics, and 7,980 whites who were admitted to 43 drug treatment programs across California from 2000 to 2001. The Addiction Severity Index (ASI) was administered at intake to assess clients' problem severity in a number of domains (alcohol use, drug use, employment, family and social relationships, legal, medical, and psychological), and treatment retention and arrest data were obtained from administrative records. A subsample was followed up at three months to assess service utilization (N=2,145) and again at nine months to readminister the ASI (N=2,566).

Results

All three groups had similar severity levels of drug and legal problems upon treatment entry. Upon entry to treatment, white clients had the highest severity levels of alcohol, family, and psychiatric problems and African Americans had the highest severity levels of employment problems compared with the other two groups. Treatment retention did not differ between the three groups, but whites received a greater number of alcohol treatment services than did African Americans or Hispanics, and African Americans received a greater number of employment services than did Hispanic and white clients. All three groups showed significant improvement in all outcome domains except for medical outcomes. At the nine-month follow-up, whites had worse outcomes in the alcohol domain compared with the other two groups, and whites had worse outcomes in the legal domain compared with Hispanics. Compared with whites, African Americans were significantly less likely to be charged with driving under the influence in the year after treatment admission.

Conclusions

All three groups improved after treatment, although benefits from treatment can be further enhanced if services underscore different facets of the psychosocial problems of each racial and ethnic group.

Psychiatric services 60(10), 1350-1356, 2009

Recognizing cultural identity in mental health care: Rethinking the cultural formulation of a Somali patient

Groen, Simon

Abstract

Although there are many ways to produce a cultural formulation that facilitates a culturally sensitive diagnosis and treatment for asylum seekers and refugees in mental health care, it is essential to gain trust and 'recognize' the patient. One way to achieve this recognition is through a cultural interview, in which cultural references of the health care provider and the patient are exchanged. This paper presents an example of such a process with a Somali migrant to the Netherlands, whose passivity and inactivity puzzled the psychiatrist. Gaining his trust and recognizing his cultural roots as a member of a Somali ethnic group revealed more about his motives, concepts and attitude. This example suggests the importance of cultural identity as a way to explore the meanings of the illness and the interrelationship between the patient and health care provider. The cultural identity of the patient is a basis on which meanings can be exchanged in an ongoing way and starting points for effective treatment can be found.

Key Words: anthropology - asylum seekers - cultural formulation - cultural identity - ethnicity - refugees
Transcultural psychiatry 46(3), 452-466, 2009

Se hela människan!

Rosso, Marco Scarpinati

Abstract

Psykiaterns instrument för diagnos är samtalet – ett känsligt verktyg som kräver tid och öppenhet för andra kulturella uttryck än de egna. När tiden är knapp riskerar stereotypa bilder av "den andre" göras till norm.

Nyckelord kulturell psykiatri, neurologi, depression, socialisering, transkulturell, vårdrelation, etnocentrism, Ödergaards paradig, urbaniseringen, psykosocial

i&m : invandrare og minoriteter 36(4-5), 26-29, 2009

Sorting out the competing effects of acculturation, immigrant stress, and social support on depression : a report on Korean women in California

Ayers, John W.; Hofstetter, C. Richard; Usita, Paula; Irvin, Veronica L.; Kang, Sunny; Hovell, Melbourne F.

Abstract

This research identifies stressors that correlate with depression, focusing on acculturation, among female Korean immigrants in California. Telephone interviews were conducted with female adults of Korean descent (N=592) from a probability sample from 2006 to 2007. Sixty-five percent of attempted interviews were completed, of which over 90% were conducted in Korean. Analyses include descriptive reports, bivariate correlations, and structural equation modeling. Findings suggest that acculturation did not have a direct impact on depression and was not associated with social support. However, acculturation was associated with reduced immigrant stress which, in turn, was related to decreased levels of depression. Immigrant stress and social support were the principal direct influences on depression, mediating the effect for most other predictors. Stressful experiences associated with immigration may induce depressive feelings. Interventions should facilitate acculturation thereby reducing immigrant stress and expand peer networks to increase social support to assuage depression.

Keywords: Korean health, women's health, acculturation, depression, immigrant stress, social support
Journal of nervous and mental disease 197(10), 742-747, 2009

A survey of British senior psychiatry trainees' ethnocultural personal values

Neelam, Kishen; Duddu, Venugopal; Chaudhry, Imran Bashir; Antonyamy, A. S.; Husain, Nusrat

Abstract

Objective

The authors explored the ethnocultural values of a group of senior psychiatry trainees in the northwest region of England.

Methods

The authors surveyed senior psychiatry trainees using the Personal Values Questionnaire and analyzed responses under the headings of ethnic stereotypes, ethnocultural service issues, and perceptions of racism. They also explored training requirements on cultural issues in a subsample of trainees.

Results

The majority of the trainees disagreed with certain commonly held ethnic stereotypes and acknowledged the role of culture in mental health. However, they had contrasting views on the need for culture-specific services and on perceptions of racism. They expressed interest in training programs on cultural issues in psychiatric practice.

Conclusion

In multicultural settings, personal beliefs, perceptions, and values are likely to influence psychiatric practice. A training program on cultural aspects of mental health could help improve awareness and sensitivity of these issues and the quality of care.

Academic psychiatry 33(5), 423–426, 2009

Tolkar du henne rätt?

Bäärnhelm, Sofie

Abstract

Människor uttrycker sig på olika sätt när de berättar om hur de mår. Uttrycken är ofta kulturbundna, inte minst när det gäller psykiska besvär. Vårdgivaren måste därför vara beredd på att öppna sig för olika synsätt i mötet med patienten.

Nyckelord psykiatri, depression, etnografi, livssituation, ångest, själen, mångkulturell, hälsokommunikatör, självreflektion, Transkulturellt centrum

i&m : invandrare og minoriteter 36(4-5), 14-17, 2009

Ungdomars identitetskris

Kastrup, Marianne; Helweg-Larsen, Karin

Abstract

Adopterade ungdomar av bägge könen mår psykiskt betydligt sämre än sina jämnåriga, visar en dansk studie. Även flickor uppvuxna i etniskt blandade familjer har oftare psykiska problem. Men upptäcker vården svårigheterna i tid?

Nyckelord adopterade, invandrare, identitetskris, psykiska besvär, generationskonflikt, självmordsförsök, ätstörningar, främlingskap, kulturkonflikt

i&m : invandrare og minoriteter 36(4-5), 48-51, 2009

Use of psychometric tests in an acute psychiatric department according to ethnicity

Berg, John E.; Iversen, Valentina C.

Abstract

The diagnostic process after referral to an acute psychiatric treatment facility consists of more than the clinical investigation and laboratory tests. Psychometric tests in a broad range of languages may be such an augmentation of our diagnostic armamentarium, especially for immigrants for whom oral understanding of a dialogue may be restricted. The aim of this study was to discover whether such tests are in use, and how they are distributed among different patient categories. All referrals in one calendar year (N=1168), as they are depicted in the hospital computerized medical records, were investigated. Fifty-six (6.1%) out of 926 ethnic Norwegians and six (3.0%) out of 198 non-Western immigrants were tested, whereas none of the 44 Western immigrants were. The difference between ethnic Norwegians and the immigrants was significant ($Z=-3.05$ and $p=0.002$). Psychometric tests were thus almost not in use, and even less so in immigrants.

The mean number of resident days was higher among those tested, 11.7 (SD=11.2), versus those not tested, 7.4 (SD=10.4) days ($t=2.97$ and $p=0.004$). Among those tested, length of stay was not significantly different; 11.4 and 11.7 days respectively. The patients tested were older than those not tested. Mean age was 43.0 (SD=14.4) versus 38.8 (SD=12.1), with $t=2.65$ and $p=0.03$. Ethnic Norwegians had the longest mean stay, followed by Western immigrants and non-Western immigrants. The difference in resident days between all immigrants and ethnic Norwegians was significant with $Z=-2.232$ and $p=0.026$. There was no such difference between Western and non-Western immigrants: $Z=-0.057$ and $p=0.95$. The level of testing

was higher in ethnic Norwegians, and the tested patients stayed longer, maybe indicating more time for testing. Whether this low test activity influences treatment quality is an unsettled question.

Keywords Acute psychiatry; assessment; psychometric tests; ethnicity; immigrants; treatment decisions
Journal of psychiatric intensive care 15(2), 99-105, 2009

Use of the cultural formulation with refugees

Rohloff, Hans; Knipscheer, Jeroen W.; Kleber, Rolf J.

Abstract

This article discusses the experiences of mental health professionals who applied the Cultural Formulation (CF) of the DSM-IV for assessment of psychopathology and treatment needs of refugees in the Netherlands. The CF approach proved to be a useful tool in the assessment and diagnostic phase of clinical treatment. However, patients reported problems with defining their own culture and providing explanations of illness and therapists had difficulty identifying culturally based difficulties in the clinical relationship. Additional information was needed about working with interpreters, therapists' attitudes towards the culture of the patient and towards their own culture, patients' previous experiences with discrimination and inaccessibility of care, gender issues, and specific cultures and subcultures. A more structured approach to conducting the CF is recommended. We developed the "Cultural Formulation Interview" for this purpose. The adaptations are aimed at improving the CF for use with refugee populations, as well as for more general use in transcultural psychiatry.

Key Words: assessment - cultural formulation - cultural interview - psychodiagnostics - refugees
Transcultural psychiatry 46(3), 429-450 (2009)

Vidare i livet efter trauma

Tokle, Heidi Koch; Montgomery, Edith

Abstract

Många flyktingbarn är traumatiserade efter att de levit i krig, tvingats fly eller blivit utsatta för andra former av organiserat våld. Men är de märkta för livet? En dansk studie av 131 barn visar hur de kommer vidare i livet i det nya landet.

Nyckelord flyktingbarn, trauma, krig, stressforskning, överlevnadsstrategi, posttraumatiskt stresssyndrom, Rehabiliterings- o Forskningscentret for Torturofre, RCT

i&m : invandrare og minoriteter 36(4-5), 22-25, 2009

Viljan att höra till

Taloyan, Marina

Abstract

Känslan av tillhörighet är en av de centrala faktorerna för kurdiska mäns psykiska hälsa. Mediernas negativa bild av kurder, diskriminering på arbetsmarknaden och förlust av en självklar tillhörighet gör att kurdiska män mår psykiskt dåligt.

Nyckelord tillhörighet, kurder, mediebilden, diskriminering, migration, stress, utanförskap

i&m : invandrare og minoriteter 36(4-5), 61-63, 2009

AFHANDLINGER

Mental health and employment amongst persons who resettled in Sweden in 1993 – 1994 due to the war in Bosnia – Herzegovina

Blight, Karin Johansson

Stockholm : Karolinska Institutet. – 73 sider, 2009. – (Dissertation 09:316)

Abstract:

General aim

To explore employment and mental health among people from Bosnia-Herzegovina who came to Sweden in 1993-1994 due to the war. Hypotheses: 1) poor mental health is a barrier to employment; 2) exclusion from the labour market can lead to psychosocial stress.

Methods

All data were collected from Oct 2001 to March 2002. Quantitative studies: Cross-sectional survey questionnaire and longitudinal register study, including variables largely from the LOUISE database (years 1993 – 1999). Six hundred and fifty people were randomly selected from 10 strata that included region (one urban (Malmö) and one rural (four municipalities in Småland) and levels of employment (study population, N = 4,185). Response rate: 63.5 %; n = 413. Qualitative study: Snowball sampled in-depth interviews (n = 26), tape-recorded and transcribed. Interviewees were from Bosnia-Herzegovina, in employment, unemployed or in rehabilitation, and living in the urban/rural regions (above).

Results

Paper I explores associations between survey and register variables. Main mental health outcome: a high and a low symptom group were identified by using the symptom list from the Göteborg Quality of Life instrument (n = 360). Binary logistic regression showed that unemployed men, men with long working experience in Bosnia-Herzegovina, and women with much (but not most) employment activity, as well as women living in the urban region, were overrepresented in the high symptom group. Paper II presents study population estimates of survey variables; prevalence of the use of sedatives was 26.5%, sleeping tablets 26.2%, and antidepressants 22.3%. Consumption of alcohol and cigarettes was 5.1% and 41.0%, respectively. Paper III presents longitudinal findings of registered labour market access, sickness and social benefit (1994-99) and their relation to the Göteborg Quality of Life high symptom group. In 1999, 62.4 % (of 412) had labour market access and 8.6 % of those eligible (n = 335) received sickness benefit. Survival analysis showed quicker access to employment for men compared with women. For women the delay was associated with belonging to the high symptom group. Older age was also associated with delay in access and binary logistic regression showed that older age increased the odds of belonging to the high symptom group. Paper IV explores the labour market process (from the outbreak of war to the labour market situation at the time of the interview) and perceptions of mental health in 22 interview transcripts. Qualitative content analysis highlighted the issue of war-time job loss and the importance of post-migration employment for mental health and well-being, as well as that the ability to work may be restricted by poor health (physical or mental) and that there may be a risk of exhaustion.

Conclusions

While a level of mental health problems was expressed in the study, the problems did not seem to be mirrored by sickness benefit. However, access to the labour market was slow and although sickness benefit in the last follow-up year was high compared with the Swedish population that was not the case in the previous years, perhaps in part because many people had not yet had access to the labour market. Though data also suggests that a balance between employment and sickness benefit may be a better alternative for some in terms of health, overall it appears that faster access to employment is beneficial for perceived mental health.

Implications

Policies and strategies concerning refugee reception should aim for humanity and pay attention to health and human rights. Keeping people in unemployment or social benefit may risk prolonging and/or worsening prospects of healing after war-related stressful experiences, and increase the risk of marginalisation. Thus structural interventions should support early access to employment so that the provision for the family can be secured as soon as possible with no further undermining of dignity. Nevertheless, it is important to maintain flexibility; as this study indicates, some people are incapable of working (at least full time) due to physical illness, severe concentration difficulties (PTSD) and/or depression. Thus, the labour market needs to be sufficiently flexible to find ways to provide access to stable jobs for persons with different functional levels while staying within the parameters of decent work, without decreasing job security or exploiting eager workers who may run a risk of exhaustion.

Keywords: Mental health, labour market access, employment, integration, refugees, migrants, Sweden, Bosnia-Herzegovina

Afhandlingen kan downloades her: <http://diss.kib.ki.se/2009/978-91-7409-668-2/thesis.pdf>

Struggling for clarity : cultural context, gender and a concept of depression in general practice

Lehti, Arja

Umeå University, 54 sider, 2009 (Umeå University medical dissertations : new series, 1296)

Abstract

Many depressed patients attend primary health care, and minority-group patients often see general practitioners for depressive symptoms. The diagnosis and classification criteria of depression and guidelines for management are based on symptoms. However, expressions of depression can vary with culture and gender but the diagnostic tools and guidelines are not adapted to gendered or cultural context and have shown to be poorly applicable in clinical practice. The purpose of this thesis was to analyse how socio-cultural factors with focus on gender and ethnicity and their intersections- could influence the concept of depression from the perspectives of the patient and patient descriptions, of medical experts as well as general practitioners. By viewing these different perspectives I have tried to illustrate how depressive symptoms are expressed and interpreted in different gendered socio-cultural contexts and how they become a disease entity. Furthermore, I want, in particular, to illustrate a variety of difficulties that GPs may face during the process of care when meeting and treating men and women from different countries showing symptoms which may indicate depression.

Study I

The aim of the study was to explore the reasons for and patterns of attendance among Roma women in primary health care and to shed light on health problems of the Roma. Four Roma women were interviewed in-depth. The data were audiotaped and analysed according to Grounded Theory. The results showed that the daily life of women was characterized by marked hierarchical order and rules formed by gender, age and the collective culture. Young women had most rules to follow and if the rules were broken it was easy to end up outside the collective and display depressive symptoms or pain. The gendered, collective culture could both construct and/or form the concept of illness among the Roma women.

Study II

The aim of the study was to highlight the gendered representations of lay persons' experiences of depression by drawing on personal stories of depression that appeared in Swedish newspapers. The data were then subjected to a Qualitative Content Analysis. The mediated accounts of depression both upheld and challenged traditional gender stereotypes. The women's stories were more detailed, relational, emotionally oriented, and embodied. The portrayal of men was less emotional and expressive, reflecting hegemonic patterns of masculinity. The media representations of gendered health-related beliefs and behaviours may influence the way patients, physicians and other health care professionals understand and communicate about issues of mental health and depression.

Study III

The aim of the study was to explore how authors of medical articles wrote about different symptoms and expressions of depression in men and woman from various ethnic groups as well as to analyse the meaning of gender and ethnicity for expressions of depression. Through a search in the medical database PubMed 30 scientific articles were identified and included in the analysis. The result and the discussion section of each article was analysed with Qualitative Content Analysis. The analysis showed that culture and gender formed the expressions of depression, how depression was interpreted and the diagnosis of depression. The analysis of the articles identified a western point of view, which could lead to "cultural or gender gaps" and which could also influence the diagnosis of depression.

Study IV

The aim of the study was to make a qualitative analysis of medical research articles in order to get a broader view of explanations of depression in men and women in various ethnic groups. Through a search in the medical database PubMed 60 scientific articles were identified and included in the analysis. The result and the discussion section of each article was analysed with Qualitative Content Analysis. The explanations for depression in our study have a strong emphasis on socio-cultural causes with focus on depressed persons from non-western minority groups. Even so, discussion about cultural or gendered explanations for depression was almost missing. We interpreted that the view of minority groups in the articles could be described as a view of "others". The view of "othering" increases risks for cultural and gender gaps, such as biased scientific knowledge, medicalization of social problems, cultural stereotypes, risk for misdiagnosis of men's depression, and affects the quality and care of depressed patients.

Studv V

The aim of the study was to explore and analyse how GPs think and deliberate when seeing and treating patients from foreign countries who display potential depressive symptoms. The data were collected in focus group and individual interviews with GPs in northern Sweden and analysed by Qualitative Content Analysis. The study showed that patients' early life events of importance were often unknown which blurred the accuracy. Reactions to trauma, cultural frictions and conflicts between the new and old gender norms made the diagnostic process difficult. The patient-doctor encounter comprised misconceptions, and social roles in meetings were sometimes confused. GPs based their judgement mainly on clinical intuition. Tools for management and adequate action were diffuse. There is a need for tools for multicultural, general practice care. It is also essential to be aware of the GPs' own conceptions to avoid stereotypes and not to under- or overestimate the occurrence of depressive symptoms.

Conclusion

The concept of depression is always situated. The gendered socio-cultural norms, beliefs and behaviours can both construct the concept of illness and influence patients' experiences and expressions of depression as well as form the patient-doctor encounter. The knowledge of medical "experts" is based on a dominating, western view of knowledge, which defines diagnosis and classification criteria of depression as well as guidelines for management. GPs are struggling for clarity between the medical and the clinical practice. The multicultural appearances of depressive symptoms are a challenge for GPs but it is a challenge for society to improve the life circumstances which can lead to a depressed mood and suffering.

Nyckelord(en) : depression, gender, ethnicity, qualitative research, general practice

download afhandlingen her: <http://umu.diva-portal.org/smash/get/diva2:240760/FULLTEXT01>

RAPPORTER

En plads i arbejdslivet : når psykisk sårbare flygtninge og indvandrere skal i arbejde Inspiration og idéer til kommunale ledere og medarbejdere

Rosenberg, Mona

København : Videnscenter for Socialpsykiatri. – 74 s., 2009

Forord

I 2½ år har Videnscenter for Socialpsykiatri samarbejdet med Århus, Odense, Brøndby, Haderslev Kommuner. Sammen har vi i Projekt VITA høstet erfaringer med, hvordan en kommune bedst støtter flygtninge og indvandrere, som er forældre og psykisk sårbare i at få en plads på arbejdsmarkedet.

Kvalitetsudviklingen af kommunernes arbejdsmarkedsrettede indsats over for denne målgruppe er uhyre vigtig. Virksomheder har brug for at komme i kontakt med en arbejdskraft, de indtil nu ikke kender. Mennesker har brug for at føle sig inkluderet og anerkendt for de kompetencer, de har at byde ind med. Sammenhængskraften i vores samfund er afhængig af, at børn af flygtninge og indvandrere får den bedst mulige ballast med hjemmefra.

Med projektet har vi bl.a. ønsket at medvirke til at højne status på et arbejdsområde, som ikke altid får den anerkendelse, det fortjener. Kommunerne er afhængige af at kunne tiltrække og fastholde god arbejdskraft, og det kræver helt særlige faglige og personlige kompetencer at kunne løfte den store opgave, det er, at skulle støtte nogle af de svageste stillede borgere gennem systemerne og ud på arbejdsmarkedet. Der findes mange ildsjæle, som hver dag gør en kæmpe indsats på området. De sidder inde med stor erfaring i, hvad der gør forskellen, når opgaven skal lykkes, men ofte eksisterer denne erfaring som tavs viden.

Vi ønsker med dette hæfte at synliggøre vigtige og værdifulde dele af fire kommuners viden og erfaringer, til glæde for kollegaer i andre kommuner og ikke mindst til glæde for de flygtninge og indvandrere, som har brug for hjælp til at få et arbejde. Vi vil gerne takke ledere og medarbejdere i de fire projektkommuner for deres bidrag til projektet, og vi vil især takke deltagerne i VITAs styregruppe for et meget inspirerende og frugtbart projektsamarbejde og for gode råd og sparring i forbindelse med udarbejdelsen af dette hæfte. Ikke mindst vil vi takke Arbejdsmarkedsstyrelsen, der som bevillingsgiver har gjort projektet muligt, og som både har vist projektet stor interesse og været imødekommende, når der har været behov for justeringer undervejs.

du kan downloade rapporten her:

http://www.socialpsykiatri.dk/assets/files/etnisk/VITA_inspirationshaefte_web.pdf

Selvmoedsadfærd blandt etniske minoriteter i Danmark - et pilotprojekt

Ejdesgaard; Bo Andersen

Center for Selvmordsforskning, 35 sider. - 2009

Projektet blev støttet af Indenrigs- og Socialministeriet

Pilotprojektets formål er at kunne danne baggrund for en bedre kortlægning / undersøgelse af selvmordsadfærd blandt etniske minoriteter i Danmark.

Konklusion

Analysen har vist, at der i den foreliggende undersøgelse overordnet ikke optræder signifikante etnicitetsforskelle i forhold til sårbarhed, selvskadetanker, selvskadende handlinger samt spiseforstyrrelsesændelser blandt unge. På trods af fraværet af overordnede forskelle i selvmordsadfærden mellem etniske minoriteter og vesterlændinge kan der imidlertid godt konkluderes på nogle underordnede forskelle. Analysen har vist, at for ikke-vestlige personer er det en central beskyttende faktor mod selvskadetanker, at deres tro (religion) forbyder eller forhindrer dem i at skade sig selv. Hvor kun 5,1 % af vesterlændingene angiver dette som værende en beskyttende faktor, angiver hele 42,1% af indvandrerne og 54,6% af efterkommerne dette (OR 17,28 og OR 28,98).

Anbefaling

Generelt må der konkluderes fra dette pilotprojekt, at et større datamateriale i en fremtidig undersøgelse vil være essentielt. I projektets analysedel ville en del flere sammenhænge på baggrund af etnicitet højst sandsynligt kunne være afdækket, hvis den statistiske styrke havde været større. Det er svært at få besvarelser fra indvandrere og efterkommere fra ikke-vestlige lande, specielt hvis de også skal have en selvskadende adfærd.

Rapporten kan downloades herfra:

<http://www.selvmordsforskning.dk/Web/Site/Menu2/Litteratur/Publikationer/Publikationer/Rapporter/Selvmoedsadfærd%20blandt%20etniske%20minoriteter%20i%20Danmark%20et%20p28396>

Rapporten er udarbejdet med baggrund i et Folketingsspørgsmål:

<http://www.folketinget.dk/samling/20072/spoergsmaal/S754/svar/endeligt/20080311/535089.HTM>
S 754

Om selvmordsstatistikken blandt unge piger af anden etnisk herkomst. Hvad mener ministeren om, at kvindelige efterkommere af anden etnisk herkomst end dansk ligger fire en halv gange højere i statistikken over selvmordsforsøg end de mandlige efterkommere samt etniske danskere, finder ministeren det ikke bekymrende, at så mange piger og kvinder af anden etnisk herkomst end dansk ikke ser nogen anden udvej med livet end at forsøge selvmord, og vil ministeren ikke tage initiativ til en undersøgelse af denne problematik og årsagen til, hvorfor piger af anden etnisk herkomst end dansk er så overrepræsenterede i selvmordsstatistikken, så vi hurtigst muligt kan hjælpe disse mange selvmordstruede piger?
2007/2008 2. samling

Selvmoedsadfærd blandt indvandrere, efterkommere og asylansøgere

Mouazzene, Susanne

Center for Selvmordsforskning. – 28. sider. – 2. udgave. 2008

Dette hæfte indgår i en række hæfter om fakta og forskning vedrørende selvmordstanker, selvmordsforsøg og selvmord. Hensigten med hæfterne er at formidle viden som grundlag for forebyggelse. Målgruppen er derfor alle, der enten i uddannelsesforløb eller i forbindelse med deres arbejde kommer i kontakt med selvmordstruede mennesker.

Nærværende hæfte handler om selvmord og selvmordsforsøg blandt indvandrere, efterkommere og asylansøgere fra ikke-vestlige lande. Det er i hverdagen, i skolen, i familien, på arbejdspladsen og i fritiden, de første tegn på selvmordsadfærd viser sig. Hver gang et menneske forsøger selvmord eller dør af det, er der fem mennesker, som bliver berørt af det.

Selvmoedsadfærd forekommer i alle socioøkonomiske grupper. Økonomiske problemer kan spille en rolle, men en væsentlig faktor er graden af integration i samfundet og kulturen. Man må imidlertid ikke lade sig forlede til at tro, at selvmord og selvmordsforsøg udelukkende skyldes sociologiske faktorer. Det foreliggende hæfte er tænkt som en orientering. Det er ambitionen at beskrive emnet på sådan en måde, at alle med interesse for forebyggelse af selvmordsadfærd blandt indvandrere, efterkommere og asylansøgere kan få udbytte af læsningen.

Rapporten kan downloades her:

<http://www.selvmoedsforskning.dk/filecache/23831/1207736588/faktahaefte22.pdf>

Selvskade og resiliens blandt etniske minoriteter

Zøllner; Lilian

Center for Selvmordsforskning. – 60 sider. - 2008

Der er i Forslag til handlingsplan til forebyggelse af selvmordsforsøg og selvmord i Danmark (1998) fremsat hypoteser om, hvorvidt selvskade blandt etniske minoriteter (uanset alder) i Danmark optræder med større hyppighed end hos den etnisk danske del af befolkningen, men der er meget begrænset forskning på dette område.

Viden om, hvorvidt unge med anden etnisk baggrund er en udsat gruppe i forhold til sårbarhed, tanker om selvskade og selvskadende handlinger er yderst sparsom. Den forskning, som har været gennemført på børne- og ungeområdet, har fokuseret på andre forhold.

Den foreliggende rapport indeholder forskningsresultater, som belyser sårbarhed, tanker om selvskade og selvskadende handlinger blandt unge med ikke-vestlig baggrund samt de beskyttende og belastende forhold, som kan hæmme eller fremme selvskade blandt etniske unge.

Kapitelloverskrifter

- Selvskade blandt ikke-vestlige unge i 3 storbyer;
- Resiliens og mestring blandt asiatiske unge;
- Selvskade blandt ikke-vestlige unge på Fyn

rapporten kan downloades her:

<http://www.selvmoedsforskning.dk/filecache/23322/1204102455/rapprtnr1.1.pdf>

WPA educational programme on depressive disorders

Task force

Sartorius, Normann (Co-chairman); Tasman, Allan (Co-chairman); Benyakar, M.; Chiu, Edmond; Chiu, Helen Fung kum; Douki, S.; Gask, L.; Goldberg, D.; Gureje, Oye; Ivanov, Stanislav V.; Kanba, S.; Kastrup, Marianne; Maj, Mario; Riba, Michelle B.; Tyano, Sam; Wasserman, Danuta
Geneve. – 2009. – 4 bd.

Volume 1: Fundamentals

Volume 2: Physical illness and depression

Volume 3: Depression in specific population groups

- **Part 4: Cultural aspects of depression**

Kastrup, Marianne; Machleidt, Wielant; Behrens, Katharina; Calliess, Iris Tatjana

Volume 4: Methods of training and education about depression

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