THE ENCOUNTER BETWEEN CLINICIANS AND MIGRANT PATIENTS IN THE OUTPATIENT MENTAL HEALTH SERVICES IN DENMARK

A MIXED METHODS STUDY ON CULTURAL COMPETENCES AND THE CULTURAL FORMULATION INTERVIEW

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WHY

Immigrants make up approx. 8% of the Danish population. Studies show that migration is associated with an increased vulnerability and occurrence of mental disorders1,2. The number of patients of a different ethnic background conveys new challenges for the Danish health care system. Studies show that clinicians experience difficulty in their daily work when communicating with, diagnosing and treating people of a different ethnic background than Danish3,4, Likewise, migrant patients experience less trust and receptiveness as well as more discrimination than ethnic Danes when encountering the healthcare personnel5, Psychiatry in particular is faced with challenges due to language barriers and because the presentation, interpretation, understanding and treatment of mental health symptoms vary across cultures1,2,6.

There is a need for solutions on how to improve the encounter between the health services and migrant patients, and the solution is likely to be found in the notion of ‘cultural competence’. Cultural competent clinicians are better equipped to achieve therapeutic alliance and mutual understanding in the patient encounter, which will often improve the treatment-efficacy and increase patient satisfaction7,8.

This study takes its point of departure in the Cultural Formulation Interview (CFI) from DSM-57,8. With 16 questions, the interview examines how the patient perceives his/her problem, resources and strains within network, family, faith and cultural identity, and barriers regarding treatment. The CFI has a narrative approach and serves as a clinical resource for the systematic and individualised evaluation of cultural dimensions in psychiatric assessment.

OBJECTIVES

1. To describe cultural encounters and how they are understood and managed by clinicians, patients, and interpreters in outpatient mental health services.

2. To evaluate the implementation and clinical utility of a Danish translation of the CFI in outpatient mental health services.

METHODS

• Four sub-studies.

• Thorough analysis of the clinical utility of the CFI and the cultural encounter between the mental health services and migrant patients.

• Includes perspectives of clinicians, patients, and interpreters in a consultation context.

• Triangulation on perspective and methodology.

• Empirical data is generated at 4-5 Danish outpatient mental health services in the Capital Region of Denmark.

2. Kugus, G. et al. EPA guidance mental health services in the Capital Region of Denmark.

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