

# **CULTURAL PSYCHIATRY IN HELSINKI AND UUSIMAA HOSPITAL DISTRICT**

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## **IMMIGRANTS IN FINLAND IN 2015<sup>1</sup>**

- 6.1% of the whole population was born abroad
- 10.6% of the population in Uusimaa was born abroad
- 6.0% of the whole population had a mother tongue other than one of the official languages in Finland
- 11.3% of the population in Uusimaa had a mother tongue other than one of the official languages in Finland
- The most common reasons for migration include family, work and studying
- The number of refugees is increasing

## THE USE OF MENTAL HEALTH SERVICES

- Immigrants who live in Finland have right to the same health services as the rest of the population except for asylum seekers who are older than 18 years
- When assessing the need for services, the heterogeneity of the immigrant population, lack of research and methodological challenges have to be considered
- It seems that immigrants in Finland underuse mental health services compared both with Finnish-born population and the level of psychiatric symptoms they report<sup>2,3</sup>

- In a European study it was found that immigrants use more psychiatric emergency services, but they receive less psychotherapy and rehabilitation than non-migrants<sup>4</sup>
- Possible reasons for the underuse of services<sup>4,5,6</sup>
  - Problems related to language and communication
  - Lack of knowledge about services, stigma and lack of trust among immigrants
  - Lack of cultural competence among health professionals and discriminating practices in the service systems
- Some immigrants prefer services that do not belong to the official health care system

## **MENTAL HEALTH SERVICES SPECIFICALLY FOR IMMIGRANTS IN FINLAND**

- **Centres for Torture Survivors in Helsinki and Oulu**
  - Run by Deaconess Institute
  - Patients can be referred from the whole Finland
  - Primarily for adults, but projects for children and adolescents as well
  - The patients have a history of being tortured
  - Services are free, but the home municipality pays the interpreter
  - Multiprofessional, but small units
- **Psychiatric clinic for refugees in Tampere**
  - Part of the psychiatric services of the city of Tampere
  - Only for adults
  - Experienced, but very small unit

- **Services by the city of Helsinki**
  - A team providing multicultural services worked in 2012-2014 with external funding
  - Plans to have a smaller team with a coordinating role
- **The Finnish Association for Mental Health**
  - They have 22 crisis centres, some of which have a long experience in providing services to immigrants
  - Both individual counselling and groups
  - Electronic materials such as written guides and relaxation exercises in different languages

# HUS

A Joint Authority  
comprized  
of **24**  
municipaliti  
es with a  
population  
of  
hospitals  
**1,616,221**

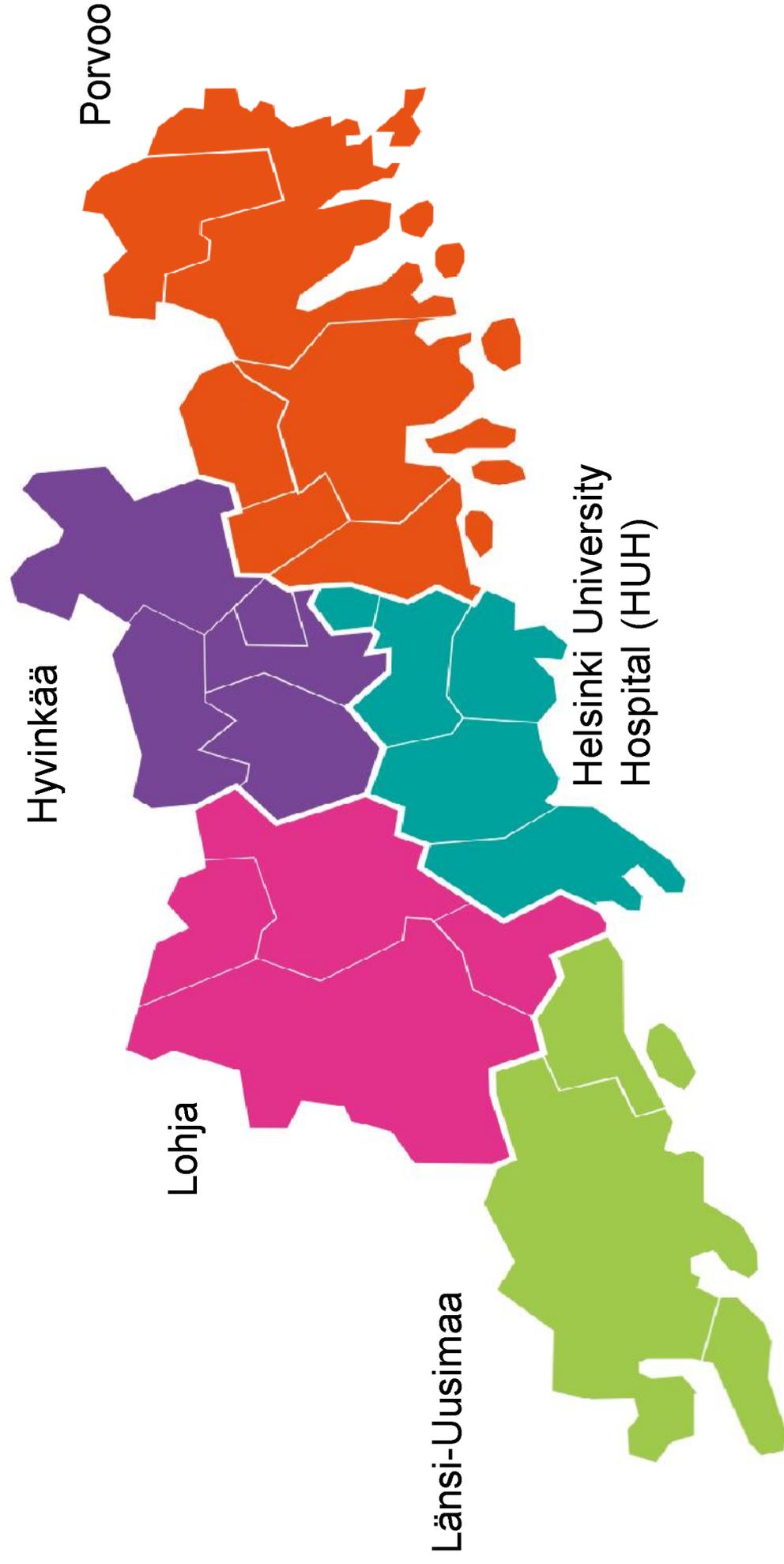
Operates in  
**23**  
hospitals

**2,396,066**  
patient  
visits

Revenue:  
**EUR 2**  
billion



# THE JOINT AUTHORITY CONSISTS OF 5 HOSPITAL AREAS



## **CULTURAL PSYCHIATRY OUTPATIENT CLINIC**

- A national psychiatric clinic for deaf people was founded in early 1990's, but the need for services decreased over the years
- The need for services for immigrants was urgent and their development was encouraged by the National Institute for Health and Welfare
- The services for deaf and immigrants were combined
- Planning started in 2013 and the first immigrant patients came in 2014
- In the beginning the only professionals working full-time were a nurse and an occupational therapist

## **AIMS**

- To support the psychiatric units in the region in assessing immigrant patients by providing both short consultations and longer assessments for complex cases
- To help in finding solutions to problems related to the relationship between the patient and the clinician
- To train mental health professionals in issues related to culture and psychiatry

## **REFERRAL CRITERIA**

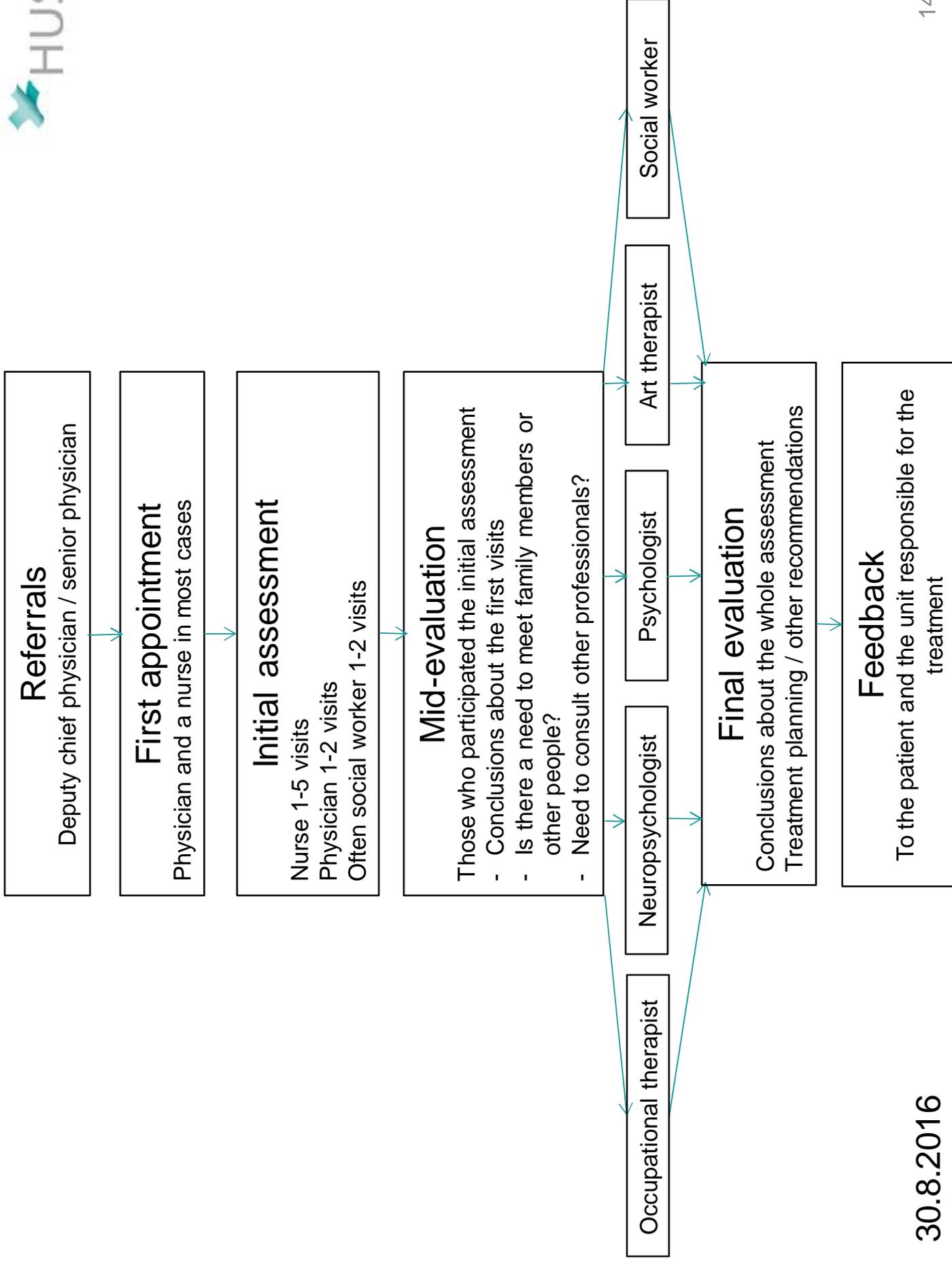
- The patient has been assessed in specialized psychiatric services
- Diagnostic assessment or planning / conducting treatment is difficult due to cultural factors
- The patient has a residence permit in Finland

## **COMMON REASONS FOR REFERRAL**

- **Diagnostic difficulties**
  - Can this behavior be explained by cultural factors?
  - Is it about psychosis, dissociation or traumatic brain injury?
  - Why does the patient have difficulties in learning?
- **Difficulties in treatment planning**
  - The treatment offered so far has not helped
  - The patient does not speak any Finnish
- **Problems in building the relationship**
  - There are problems in communication
  - The patient "wants to have secondary gain"

## **CURRENT STAFF OF THE CLINIC**

- Deputy chief physician
- Senior physician
- Nurse
- Occupational therapist
- Psychologist (part-time)
- Social worker (part-time)
- Art therapist (part-time)
  
- Neuropsychologist, neurologist and physiotherapist from our own organization can be consulted easily
- Collaboration with a family therapist has started this year



## **CHANGES TO THE "NORMAL PRACTICES"**

- Invitation letter with a short introduction and simplified instructions in eight languages
- Special arrangements if it is difficult to travel to the clinic
- Longer sessions
- Special attention to interpreter services
- The use of Cultural Formulation Interview



**AN APPOINTMENT HAS BEEN SCHEDULED FOR YOU AT THE CULTURAL  
PSYCHIATRY OUTPATIENT CLINIC**



**DATE AND TIME:** \_\_\_\_\_

**MEMBER OF STAFF:** \_\_\_\_\_

**ADDRESS: Tukholmankatu 8 F, Helsinki**

Please report to the third floor of stairway B before each visit. Take with you an ID card with a picture.

If the scheduled appointment is unsuitable for you, please let us know as soon as possible by telephoning 09 471 75451. Telephone hours are Monday–Thursday from 8:00 am to 11:00 am and from 11:45 am to 3:00 pm and Friday from 8:00 am to 11:00 am and from 11:45 am to 1:00 pm.

If you cannot make the appointment and have not cancelled it by midday on the previous day, you may be charged a penalty fee of €39.60.

**INFORMATION ABOUT THE CULTURAL PSYCHIATRY OUTPATIENT CLINIC**

Psychological well-being and need for support of patients with immigrant backgrounds is evaluated during scheduled appointments at the clinic. The aim is to pay special attention to culture and language. They often play a role in understanding problems and planning the required support. The evaluation is usually performed by a doctor and a nurse and, if need be, a social worker, a psychologist or an occupational therapist. We always provide an interpreter for the appointments if needed. We can discuss matters relating to the interpreting and your other wishes during your first appointment. If you have a contact with another psychiatric clinic, we will discuss how your appointments there will continue.

## **CULTURAL FORMULATION INTERVIEW**

- Helps the clinician in understanding the patient's own view of his/her health problem and related cultural issues
- Enhances validity of diagnoses, helps in treatment planning and improves the clinician-patient relationship
- Provides the clinician with qualitative rather than quantitative information
- Different versions internationally
- Included in the fourth version of the Diagnostic and Statistical Manual of Mental Disorders, updated in DSM-5

## **CULTURAL FORMULATION IN THE DSM-5**

- Core interview with 16 questions and instructions to the interviewer
- Informant's version
- 12 Supplementary modules

## **SECTIONS OF THE CORE INTERVIEW**

- Cultural definition of the problem
- Cultural perceptions of cause, context and support
- Cultural factors affecting self-coping and past help seeking
- Cultural factors affecting current help seeking

## EXAMPLES OF THE QUESTIONS

- 1. What brings you here today?

*IF INDIVIDUAL GIVES FEW DETAILS OR ONLY MENTIONS SYMPTOMS OR A MEDICAL DIAGNOSIS, PROBE:*

People often understand their problems in their own way, which may be similar to or different from how doctors describe the problem. How would you describe your problem?

- 4. Why do you think this is happening to you? What do you think are the causes of your [PROBLEM]?

**PROMPT FURTHER IF REQUIRED:**

Some people may explain their problem as the result of bad things that happen in their life, problems with others, a physical illness, a spiritual reason, or many other causes.

- 12. Often, people look for help from many different sources, including different kinds of doctors, helpers, or healers. In the past, what kinds of treatment, help, advice, or healing have you sought for your [PROBLEM]?

***PROBE IF DOES NOT DESCRIBE USEFULNESS OF HELP RECEIVED:***

What types of help or treatment were most useful? Not useful?

## ADVANTAGES OF CENTRALIZED SERVICES

- The clinic is able to support the other units and spend more time on complex cases
- Sometimes the consultations lead to higher motivation to treat immigrants at other units as well
- The clinic is able to contribute to the development of assessment methods and treatment strategies and to train others
- Collaboration with other specialists in the field locally, nationally and internationally is easier

## **CHALLENGES FACED AT OUR CLINIC**

- For some patients it is complicated to travel to the clinic
- The assessment takes sometimes very long and patients are often unwilling to move to another clinic when it is finished
- There are not too many clinics where patients could be referred for long term treatment
- The availability of psychotherapy and other forms of rehabilitation for immigrants is limited