

To be invited at friends

Psychiatric care problems for migrants

The football world championship is over, our hospitality and kindness was recognized worldwide, our positive image was improved. We are not only a part of the globalization but also shape it from a high position being the strongest exporting civilized nation of the world. During the last decades we Germans have achieved what Thomas Mann in "Lotte in Weimar" 1939 through Goethe expressed: "world-receiving and world-giving, the hearts wide open for each fruitful admiration, great through mind and love, being mediators.....".

On the other hand the rest of the world immigrates into our beautiful country for the first time in history for different reasons. This explains why each country of the world has a diaspora, 20% of us derive from immigrant families, 10% have a status of aliens. What about their psychiatric care? Since 1960 the Turkish residents hold the numerical majority, most of them being Moslems. In contrast to England or France immigrants mainly come from former colonies and often have learned the colonial language, yet our immigrants (also from the Mediterranean Sea or from East European countries) usually are not capable of the German language.

Additionally the low level of education and the distrust towards emancipatory treatment approaches often lead to increased prejudgements toward the "speaking medical science". Muslim men have less problems, are more integrated socially and speak German more often. Thus Muslim women raised independent, patriarchally shaped, with a low educational standard, incapable of the German language, form the biggest underserved group concerning the field of psychiatry and psychotherapy. Therefore, several physicians who were originally born in Turkey are completely overrun.

This explains why traditionally raised Moslems living in our country have to overcome familiar, social, cultural, shame and language barriers before they see a psychiatrist. They often suffer from depression (proportion women/men 2:1), feel weak and poor of energy and are thus unable to overcome this kind of resistance. This gap in the medical care system is utilized by fundamental providers controlling some Turkish speaking hospitals according to patients' statements. In cases of adjustment problems, conflicts and addictions they are usually more exposed to feelings of guilt, shame, uncertainty, anxiety than we are. The treatment of schizophrenia seems to be easier since it can be treated with medication, which is often taken more compliantly under the control of the family than by our patients. Additionally a positive familiar atmosphere is known to improve treatment outcome.

A good example in this context are the ambulances for Turkish patients in the hospitals „Rheinische Kliniken Vieren" and "Langenfeld", where Turkish and German physicians work together. In Viersen a multi-professional team provides a culture-related treatment, i. e. patients are being treated under consideration of their native language and their cultural and religious background.

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