



POLICY BRIEF

Cultural Competence and Training in Mental Health Practice in Europe: Strategies to Implement Competence and Empower Practitioners

Co-funded by the European Commission, the Office of the Portuguese High Commissioner for Health and the International Organization for Migration (IOM), the “Assisting Migrants and Communities (AMAC): Analysis of Social Determinants of Health and Health Inequalities” IOM-managed project provides a platform for dialogue on migration health priorities and fosters engagement from policy-makers at all levels to tackle health inequalities in Europe.



Further information is available at: www.migrant-health-europe.org

This policy brief is based on the background paper ‘Cultural Competence and Training in Mental Health Practice in Europe: Strategies to Implement Competence and Empower Practitioners’ elaborated within the framework of the AMAC project:

www.migrant-health-europe.org/background-papers

Opinions expressed in this brief are those of the authors and do not necessarily reflect the views of the European Commission or the Office of the Portuguese High Commissioner.

The achievement of good mental health levels is important for the economic and social welfare of a society. Due to the circumstances surrounding the migration process, migrant populations have been found to disproportionately face mental health problems when compared to host populations. On the other hand, in today’s EU multicultural societies, mental health care approaches are often ineffective, resulting in major disparities especially affecting migrant populations. Mental health is therefore an area where there is margin for improvement in European healthcare systems.

Why this topic?

Culture plays a major role in the expression and experience of mental health and ill-health; culture also affects the way people approach mental health services, how they use them, what they expect from them, how and where they look for them and ultimately how they interact with mental health service providers. Mental health is therefore a paradigmatic case for the need to build culturally sensitive health services.

A key issue for migrant populations is to have access to appropriate cross-cultural health services. Assessments on the impact of training of health professionals on cultural competence has revealed an increase in migrants’ utilization of health services and a decrease in migrants dropping out from services.

It is also important that an individual be assessed in his/her primary language. This is especially important in the area of mental health, where emotions play such a heavy role in the individual’s level of functioning.

Topic in context

Cultural competency is the acceptance and respect for difference and a continuous self-assessment regarding culture. Cultural competence involves awareness of the various ways in which culture, immigration status and ethnicity impact on the psychosocial development, psychopathology and therapeutic transactions. Cultural competence training involves the development of knowledge, skills and attitudes that can improve the effectiveness of care and treatment.

The current state of cross-cultural training for mental health professionals in the EU is difficult to assess. The lack of coherent national, let alone European, approach and training models is apparent. In very broad terms, northern and traditionally migration receiving countries have “older” and more developed approaches to training; southern and Mediterranean countries have more recently embraced the need for training and propose newer approaches; finally, there is an apparent lack of attention to cultural competence training in policy and practice in Eastern Europe.





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Best Practice

The Françoise Minkowska Centre (Paris)

The Minkowska Centre has gained broad knowledge in the past 10 years in cultural mediation and cultural competence training building on its 40 years of clinical field experience.

The Centre has developed a unique approach combining clinical practice, mediation and training for mental health professionals, and it has designed an innovative pedagogical tool (AMECLIN) for the training of any mental health professional on the intercultural practice and patient-doctor relationship (www.minkowska.com).

Fig. 1. The Minkowska Multimedia Tool (AMECLIN) is based on the concepts of clinical medical anthropology ("Illness, Disease, Sickness").



Recommendations for the European institutions:

- Foster cooperation at national and European level for the development of common tools, methods and practices and eventually for the creation of common European structures of expertise and training certificates in cultural competence;
- Promote dialogue and synergies between different EU member states' approaches to diversity; e.g. Difference-Blind (France) vs Difference-Sensitive (UK);

Recommendations for EU Member States:

- Support efforts of medical schools and healthcare institutions for training of mental health professionals and overall the improvement of mental health care practice for minority and migrant populations;
- Promote and harmonize the inclusion of appropriate cultural competence content in all formal and continuous education programmes for health professionals;
- Promote and support the exchange on and co-ordination of training strategies between EU countries;

Recommendations for national stakeholders:

- Promote the development of a migrant-sensitive workforce and a patient-centered health-care delivery model.
- Support the harmonization of training requirements for mental health practice and a curriculum for professional education.

