Refugee and Immigrant mental health challenges due to Language barrier and cultural differences

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Abstract:
Aim of work
Background: Language barrier and access to mental health services in refugee and immigrants. Refugees and immigrants experience specific mental health challenges during the process of adaptation due to linguistic and cultural differences.

Purpose: The purpose of this study is to investigate the relation between language barrier and lack of access to mental health services.

Method: Interviewed 19 refugees families including youth, children, and women who attended the clinic for anxiety PTSD, stress and stress related issues mainly from Sudan, Eritrea and Ethiopia for a period of 6 months. Using Eurostat data from 2016 to 2017 to show the number of refugees from the horn of Africa (34,245). In addition, reviewed previous publications from the 1990s. CAMH refugee mental health webinar provides extensive studies about refugee and the confusing health care strategies in addressing immigrant mental health.

Results: The results from interviewing refugees in the clinic showed that there is a strong link between mental health and lack of access to the available health care services due to language and communication difficulties. In particular women were suffering of ongoing abuse. Even where there are trained interpreters who are competent and appropriate to work with women in abusive situations, there are so few of these people available that few women have real access to their help. Sometimes you have to rely on people who are not trained properly. They feel inferior and humiliated because their personal life has become public knowledge. It is hard to answer phone calls or even asking for directions cannot be done, let alone to seek medical attention.

The youth were highly stressed and anxious complaining of losing their self-esteem and self confidence which stems from the loss of language and voice. They felt dumb and odd to try to make friends at school with people who were different from them. They simply stayed away from public places and became prisoners in their own home.

Conclusion: Losing language means losing respect and losing independence. Losing their voice brought extreme experiences of isolation, loss of self esteem and confidence and above all lack of trust in the system. Subsequently, the language barrier remains as an obstacle to seeking mental help and should be given greater priority.

Biography:
She is a Compassionate efficient medical professional with over 10 years of experience within the Canadian healthcare system and physician assistant roles and Medical doctor with strong clinical and research experience, focused on delivering the highest degree of patient care. Compassionate efficient medical professional with over 10 years of experience within the Canadian healthcare system and physician assistant roles. Medical doctor with strong clinical and research experience, focused on delivering the highest degree of patient care Excellent communication skills and strong ability to build rapport with clients quickly and effectively. Strong multi-linguist fluent in English, Arabic, Tigrinya, Tigre, Amharic and Italian. A thorough understanding of modern psychotherapeutic thoughts and approaches. Ability to work in collaboration with medical professionals to assess the healthcare needs of patient. Empathetic, culturally sensitive, highly organized and observational. Award-winning volunteer experience recognized by the government of Canada. Proficient in MS Office, Word, Excel, PowerPoint, Email and Internet Applications.

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