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A NOTE FROM THE EDITORS

Welcome to Volume 9, Issue 1 World Healer. We report on three recent well attended conferences: Dubai, San Diago and Shanghai. We include one book review. Four forthcoming conferences in Madrid, Athens, Tanzania and Gdynia will include transcultural presentations. Finally two Masters Degrees in QMUL and Durham will be of interest for those wishing to improve their knowledge and research skills in transcultural psychiatry. We hope you have a great summer

Simon Dein, Editor

Hans Rohlof Chair WPA TPS

WPA-TPS CHAIR'S REPORT

Hans Rohlof, MD
Chair, WPA-TPS

Chair's report

This issue of World Healer can best be read as a report of conferences and activities of the first half year of 2014, and as a view to the future of our Section.

Our Section was quite active in this period. We held the competition for the Young Researcher Award. This competition was also meant to prepare the next Section's issue of the peer reviewed journal Transcultural Psychiatry, which was thought to be filled by research from young scientists, especially from Low and Middle Income Countries (LAMIC). As you have probably seen on our website, we decided to give two prizes, one Young Researcher Award to Charlotte Sonne from Denmark, and one Runner Up Award to Ying Zhang from the People's Republic of China, as a representative of researchers from LAMIC countries. They received the certificates along with the prizes. Charlotte received the certificate from our co-chair Marianne Kastrup in Copenhagen. Ying received the prize from prof. Michael Wirsching from Freiburg, Germany, her current mentor in psychotherapy. See the pictures below. They also received € 1,000 and € 500 to spend freely.



Charlotte Sonne receiving the Young Researcher Award from Marianne Kastrup



Ying Zhang receiving the Runner Up Award from Michael Wirsching

The Transcultural Section was also co-sponsor of several international meetings.

There was the International Transcultural Psychiatry Conference in Dubai on the 3rd/5th of April, 2014. This very interesting conference in the Middle East attracted international attendance as well as many local interested colleagues. A report of the conference can be found in this issue.

From the 9th until the 11th of May a large psychotherapy conference took place in Shanghai, the 21st IFP World Congress of Psychotherapy. This conference was also co-sponsored by the Section. A report can also be

found below in this issue.

From the 15th till the 17th of May the Annual Meeting of the Society of the Study of Psychiatry and Culture (SSPC) took place in San Diego. The SSPC is a very respected sister organisation. Because your chair was present there, among a lot of other Section members, a short report of the meeting is also present in this issue.

This year will be a transition year. From the 14th until the 18th of September, the triennial World Congress of Psychiatry of the World Psychiatric Association will be held in Madrid, Spain. The Section organises several Symposia. Two symposiums are organised together with another Section, the Section on Psychiatry and Religion.

In this congress the newly elected Board of the Section will present itself to the members. Do not forget to vote: you have received an e-mail about this! The new Board will present plans for the future: new conferences, new Awards, maybe new plans about education, et cetera.

Please visit our website, and, if you have a Facebook account or Twitter account, do not forget to join our sites on these social media!

Hans Rohlof,



CONFERENCE REPORTS

. International Transcultural Psychiatry Conference, Dubai, 3rd/5th April, 2014.

Managing Mental Health in Multicultural Societies

In the beginning of April, 2014, The Emirates Medical Association together with the World Association of Cultural Psychiatry and the Transcultural Section of the World Psychiatric Association organised the first conference on Transcultural Psychiatry in the Emirates. It took place in the Al MuroojRotana Hotel in Dubai, a nice venue, and in a still moderate climate (with even some rain, very rare there). The local organisation was a great effort of Adel Karrani from Dubai, and Riyadh Al-Baldawi from Sweden and Dubai: they constructed the program and invited all the speakers.



The conference had a modest program, with nine symposiums in three days, but brought together highly qualified international speakers: five from North America, four from Europe, and fourteen from different Arab countries, Iran and Pakistan. Together with a lively and quite fundamental discussion with the attendees this conference produced new insights in the scientific field.

We will point out some of the most interesting topics.

Kamaldeep Bhui (U.K.) presented a lecture

about cultural consultation. He stressed the fact that this type of consultation would prevent inequalities in mental health care. And that consultation could bring along new initiatives in exploring unmet needs in populations who do not have easy access to care, or avoid asking help. For him, the promotion of better mental health among all population groups is part of the attempt to create a fairer society.

Walid Sarhan (Jordan) talked about the development of psychiatry in the Arab world. The Arab population of 380 million people contains one fourth of all the Muslims in the world, and has the highest number of young people, about 38 %. This affects the societies: they undergo a rapid change, especially after the 'Arab spring'. The result of this is a large proportion of psychopathology. Psychiatry is still underdeveloped, but science in general too: despite a historic wealth of science, Arab scientists at the moment have a marginal influence in the world. He pleaded for a larger contribution of the governments to science and education. Somatization of psychopathology is abundant, and physicians tend to explain all aches and pains somatically. More public education about the value of psychiatric diagnosis and treatment would be of help, but this is still underway.

Of interest on the second day was a special symposium on cultural psychiatry in the Iranian perspective. Many Iranian psychiatrists attended the conference, both from Dubai, where they have a special Iranian hospital, as well as from Iran. Their voices are rarely heard in international discussions, because of the many exclusions.

Majid Sadeghi, who is professor in Tehran, told us that in Iran they have 1400 psychiatrists for 80 million people, not very many, but also not a very low number.

Elham Shirazi presented an interesting lecture about cultural differences in child upbringing between East and West. Because in the West the children are not expected to contribute to the survival of the family, they can adapt a more independent and self-centered attitude. There are fewer differences between boys and girls in the West which results in less aggressive and dominant behaviour among

men. There is also a difference in the expression of emotions. Inhibited children are more accepted in Eastern communities, which results in the fact that shy-anxious children are seen as the norm. Formal education plays a major role in the East which results in less creativity. Probably all these differences are not always black and white, but it is good to realise them in regarding individual behaviour in children and adults.

AzarakhshMokri from the Iranian National Center for Addiction Studies Talked about the well developed addiction program in Iran. Nearly 20,000 physicians and other professionals work in 4,300 treatment centers for about 400,000 patients on substitution programs. They supply methadone, buprenorphine and even opium tincture substitution for heroin addiction, which is a large problem in Iran. From a cultural point of view he stressed that fatigue and the lack of virility are strong components in the start of misuse of cocaine, and reported as the major reason of relapse. Psychiatry has to find an appropriate solution for that, he stated.

Roberto Lewis Fernandez and Neil Aggarwal (U.S.A.) brought their findings of the worldwide research on the Cultural Formulation Interview, which is now included in the DSM-5. They promoted this interview as suited for countries with developing psychiatric practice, as it is a rather short and relevant semi-structured interview which can replace some parts of the general assessment. Their enthusiastic lectures will produce more interest for cultural psychiatry in the Arab world, for sure.



Many new friends were made, in the conference, many contacts were established, also with workers in Iran, one of the countries which are rather closed to us, and specially with colleagues in the Emirates and the Arab world. This conference should have a follow up.

Hans Rohlof

The 21st International Federation of Psychotherapy Congress of Psychotherapy, Shanghai, China, 9th – 11th of May, 2014

The I.F.P. congress in Shanghai was co-sponsored by the Transcultural Section. There were about 1500 attendees for 14 plenary lectures, 62 symposiums and forums, and 28 workshops. So, this was a large conference with, luckily, many Chinese attendees. Many lectures were given in Chinese, but they were excellently translated, some simultaneous and some sequential, by young Chinese psychologists who were fluent in English.

Of course, a conference like this is impossible to report completely. Each attendant would give a totally different report.



The Congress chairs with all the interpreters

We would like to highlight some of the topics which are relevant for our field of science.

Guangrong Jiang (China) gave a lecture about directiveness in psychotherapy. Although nondirective techniques are more common in the West, the Chinese patient expects a more hierarchical, directive approach from the therapist. This has to do with the tradition of a more teacher-like attitude which was induced in feudal times, but also in the era of communism. The Chinese patient expects directives, and advice from his therapist, and the speaker states that this is important to begin with in therapy, later on turning to a more nondirective approach. Directives in the beginning are good for the working alliance. But he had to admit that in the big cities people are evolving to more Western attitudes. Interdependence like in the East is evolving more to independence, there.

Gladys Mwiti (Kenya) talked about psychotherapy in Sub-Saharan Africa. In this part of Africa societies are more structured along kinship lines. She strongly advised to listeners to involve family members in therapy, even if the ties are not so close, and to administer rituals as much as possible. She gave an interesting case report of a female patient, in whom this approach was extremely helpful.

Mingyi Qian (China) gave an overview of the psychotherapy in China. There are about 3000 psychotherapists in the country, very few, but the number is rising quickly. Relations are cultural defined: as an example, refusing presents would be a great offense to the client. She did not tell, however, how great the presents could be!

Norman Sartorius (WHO, Switzerland) explained how to set up models for consultation for general practitioners in LAMIC countries. A model, in which a short course is provided by another GP with knowledge of psychiatry and psychotherapy, in the presence of a psychiatrist, is much better accepted than a long course by mental health workers. He advised to leave the telephone number to be called by GPs who have difficult cases. This method works and is also good in Western Europe, though!



Sergio Villasenor, Hans Rohlof and Xudong Zhao at the congress

There was much attention during the conference given to personalised treatment, and subtyping and staging of psychopathology. The days of Karl Jaspers come back! This is in line with newer insights of what patients need. The promotion of person centered diagnostic instruments like the Cultural Formulation Interview, as our Transcultural Section does, fits well with this approach.

Hans Rohlof

**Psychiatry and Culture
'Trauma, Recovery and Culture'
San Diego, California, U.S.A.
May 15-17, 2014**

Southern California had the warmest spring in history this May: very unusual, and it caused many wood fires. Luckily, the city of San Diego and its University were never in danger, so the Annual Meeting of the SSPC could go on.

This was an excellent meeting of around 120 members of this exquisite society, many of whom gave presentations on the theme.



Audience in San Diego

The conference started with three presenters, colleagues in the field, who underwent traumatic experiences themselves: Edie Eger, psychotherapist, who survived Auschwitz, Nang Du, clinical professor in psychiatry, who survived the Killing Fields in Cambodia, and John Kuek, psychologist, who survived adversities in South Sudan. All three work thus as professionals in the field of psychiatry and psychotherapy now.

Nobody can take away what is in your head, they taught us. They came to terms with their past, that was the best they could achieve. During adversities you have to learn to be helpless, because death can come easily. But remember that they can never catch your spirit. Nang Du expressed that caring for others helps him to become less traumatized, and that he sometimes teaches patients how to avoid. John Kuek stressed the importance of being active, making music, and reading the bible, to overcome.

There were more lectures about trauma. Mark Micale (Illinois) gave, as a historian, a good overview of the history of shell shock and PTSD, starting in World War 1. After this war there were already written 100 monographs and books, and more than 1,000 articles about these syndromes. Weak will, degenerate families, or physical damage were seen as causing this. The French writers saw it mainly as pseudoneurological symptoms. After the war, but with a delay of 10 years, there appeared more films, literature and so on, like Remarque's book; *Im Westen nichts neues*. At the moment young researchers focus on civilian war trauma, and sexual assaults. Later,

in World War 2, there were also peculiar experiences. Australian doctors who were in Japanese camps, showed almost no PTSD. This has probably to do with the great feeling of comradeship they experienced in the camp and after. More about this topic in Micale's book: 'Traumatic Past'.

There was also much attention to cultural trauma, the disappearance of American native culture in Inuit people and in American Indians. The 'Sixties Scoop' was the out-adoption of all Inuit children to Canadian families, and is now seen as a major crime against this group. William Hartmann (Ann Arbor) who gave the Charles Hughes Memorial Lecture, talked about the historical trauma of the American Indians. According to them, children can be heritage of the trauma of their ancestors. Sweat lodge and Sundance are widely used to overcome traumas, including the historical traumas the native Americans have surpassed.

In a symposium about Torture Rehabilitation Services in the United States data of almost 9000 torture victims were presented. In the United States some 40 services decided to work together in collecting data. Most of the data have to be analysed, still. On the second day we had an excursion to the San Diego service for Torture Survivors. Impressing how the support and treatment was organised with very few means, with volunteers giving lessons, and residents from the university spending free hours to meet patients.

Of the asylum seekers 30 % get permits to stay, and only 5% get US citizenship. On the other hand, employment is probably better than in countries where there is more control: after one year 30% of the asylum seekers have a paid job.

Dilip Jeste (UCLA) presented a nice lecture on resilience in the elderly. His research showed that mental health is improving in the elderly, in contrary to physical health. The older the person, the more he accepts physical handicaps. Culture has an important influence on this resilience.

Ademola Adeponle (Montreal) gave a lecture on psychosis and culture. In Africa there are

more short psychotic outbreaks. In which part these are connected with PTSD is unknown. But cultural elements play a large role.

There was much, much more, and a nice abstract book showed many examples of good research. Meeting all these enthusiastic scholars in an academic surrounding is quite stimulating for your own work. So, thank you, organisers at the SSPC, for this excellent conference!

BOOK REPORT

Book Review

Bereavement After Traumatic Death: Helping the Survivors

Edited by D. De Leo , A. Cimitan , K. Dyregrov , O. Grad , K. Andriessen
ISBN: 978-0-88937-455-3
Boston etc., Hogrefe, 2014
xiv + 208 pp.

Many intercultural encounters between caregivers and patients occur against a background of loss of loved ones. For example, most help-seeking refugees have suffered losses of family members or friends in traumatic circumstances. Both somatic and psychological problems are more likely to occur in persons who lost a loved one. Therefore, it is essential that caregivers are familiar with the distress associated with bereavement, especially after traumatic loss, and how to cope with it.

"Bereavement After Traumatic Death: Helping the Survivors" addresses this subject in a highly accessible way. The book is packed with practical and insightful tips for the bereaved as well as those who support them, including clinicians. Despite the practical approach, the book is firmly rooted in the scientific literature. It consists of 18 chapters, starting with a chapter on theories of adaption, and ending with a chapter on future perspectives on assisting the bereaved. The lack of an index makes the book somewhat less suitable as a

reference book.

Special emphasis lies on bereavement after suicide. In the book, suicide is identified as an important cause of traumatic bereavement. Support for the suicide-bereaved, also termed 'postvention', involves social networks, support in the work and school environment, self-help groups, as well as professional support. Highly organized professional support is illustrated using a Norwegian example. In Norway, postvention is offered according to guidelines automatically and in a preordained way to all suicide survivors. Specifically, designated crisis teams are mobilized by the police after each suicide. Crisis team members provide practical as well as emotional support to survivors within 24 hours. The crisis team identifies who is in need, and what kind of help is required. Support may range from information, organization of informal support, to longer-term monitoring and professional help. One chapter is explicitly devoted to cultural aspects of suicide and postvention. Only a limited number of (mainly European) countries have programs directed towards suicide survivors. Culturally sensitive approaches to postvention seem crucial. This is exemplified by some rural African cultures where, according to the author of this chapter, "a person who has hanged himself must be buried below the hanging tree, the tree burnt down, and the deceased never be mourned (p.178)." Evidently, this subject merits much more attention of researchers, clinicians, and policy makers.

Thus, this highly readable book fills a huge gap in the scientific literature on traumatic bereavement. Further explorations of cultural aspects of traumatic bereavement are highly needed.

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UPCOMING INTERNATIONAL CONFERENCES



WPA 16th World Congress of Psychiatry

Madrid

September 14 - September 18



Focusing on Quality, Access and Humane Care

The 16th World Congress of Psychiatry will feature a thought-provoking programme that will explore the latest perspectives, trends and clinical research in global psychiatric care and practice. We will also take time to commemorate the 18th anniversary of the Madrid Declaration (1996).

Details

Start:

2014/09/14

End:

2014/09/18

Event Categories:

Conferences, Events

Website:

<http://www.wpamadrid2014.com>

Organizer

Spanish Society of Psychiatry (SEP)

Website:

www.sepsiq.org

Living with schizophrenia. World Federation of Mental Health

Athens

October 9 @ 8:00 am - October 11 @ 5:00 pm

| €200



The theme of this congress is identical with the theme we have selected for this year's World Mental Health Day.

“Living with Schizophrenia” is both important

and timely. It is important because of the great burden imposed by schizophrenia on the family and on society as a whole but essentially on the patient him (her) self. The degree of suffering of the persons with this illness can be understood only if one considers the very strong self-destructive potential of people with this condition, a fact often ignored. It is timely because we are now in the middle of a transition from institutional care to community care in many parts of the world. The world economic crisis has had a serious negative effect on this process and psychiatric reform in many countries has been arrested or is at risk. The impact of these developments on "living with schizophrenia" has to be evaluated and brought to the attention of decision-makers. It would be catastrophic if "living with schizophrenia" would continue or (even worse) return behind the doors of mental asylums.

"Living with Schizophrenia" can be approached from many perspectives. Who are those who live with schizophrenia? It is basically the patients themselves. The experience is an intense, long-lasting and often unbearable pain coupled with a perception of social isolation produced by prejudice and discrimination.

Yet, the relatives (the carers) also live with schizophrenia and such is also the case with the professionals, the advocates and society as a whole. All these groups share the experience of the sufferers and, depending on their degree of empathy and solidarity, they can be of great help.

Fortunately, since the 1950s, considerable progress in biological psychiatry coupled with a novel psychosocial vista centered on community care increased the therapeutic potential of mental health professionals and also empowered the consumers to achieve greater autonomy.

Acceptance and implementation of concepts like positive mental health, person-centered medicine, resilience and recovery have had a decisive influence on the mentality of professionals and the public and the consumers have been empowered to develop a voice of their own and the capacity to decide about their future in an autonomous way. Autonomy is now a very strong constituent in the ethics codes of most professional organizations.

In addition to the experience of "Living with Schizophrenia" this congress will deal with scientific facts about this illness. We have to know what we are talking about. Solidarity and empowerment are not enough. There should also be management of the patients who suffer from it and this management should be evidence-based and person-centered. We should always remember the Hippocratic dictum that we should treat patients and not illnesses.

I wish to thank the Hellenic Psychiatric Association for having accepted our invitation to co-organize this International congress with us and especially Helen Gretsas, Administrative Director and Androniki Gazelaki, Secretary, for their invaluable assistance, the organizing office ERA Ltd (especially Rena Toli and Dimitra Marandou) for their expert work, the members of the EC and the Board of the WFMH for their productive collaboration, Lundbeck pharmaceutical company and especially Sofie Ustrup, for their support with an unrestricted grant and, lastly, our dedicated WFMH staff members Elena Berger and Deborah Maguire for their support and assistance.

I hope that this congress will contribute to a better understanding of the experience of schizophrenia, to greater empathy with the persons who experience it and to a consequent improvement in our attitude and practice towards the persons who suffer from it.

Professor George N. Christodoulou
President of the World Federation for Mental Health

Details

Start:

2014/10/09 8:00 am

End:

2014/10/11 5:00 pm

Cost:

€200

Event Categories:

[Conferences, Congresses, Events](#)

Organizer

World Federation of Mental Health

Website:

<http://www.wfmh2014.gr/index.html>

Tanzania 2014

November 3 - November 4

| €100

Event Navigation



The program in Tanzania starts with a two day conference in Dar es Salaam, attended by Tanzanians, the Dutch group and other foreign delegates.

The conference program is drawn up by Dr. R.V. Schwarz of Spoor6, in close cooperation with the Mental Health Association of Tanzania (MEHATA) and the Department of Psychiatry, University of Dar es Salaam. The format will be highly interactive: not only plenary, also parallel sessions and workshops.

The main topic for 2014 is “Living with Severe Mental Disorder.” There will be ample room for free papers.

After the Dar es Salaam meeting, foreign

delegates will proceed by air to Moshi, a small town in the North of Tanzania, but also the capital of Kilimanjaro region.

In Moshi the first day will be devoted to Tanzanian health services, mental health services in particular. The last two days of the conference are dedicated to site-visits. With local guidance participants will visit health facilities, such as dispensaries, health centres and hospitals in and around Moshi. Visits to a school for mentally challenged children, a traditional healer and a rehabilitation village are also included. Every day is wrapped up by a plenary session, where findings are compared. Our Tanzanian guides will be present to provide more information.

Before returning home the foreign delegates can take part in a 4-day visit to the National Parks in Northern Tanzania.

The program thus provides not only for continuing education, but also immerses the foreign delegates in the Tanzanian community, culture and nature.

See: <http://dokterenintanzania.nl/>

For English brochure, see:

http://dokterenintanzania.nl/wp-content/uploads/2014/02/3-luik-Eng-Tanzania-2014_Opmaak-1.pdf

Details

Start:

2014/11/03

End:

2014/11/04

Cost:

€100

Event Category:

[Events](#)

Website:

<http://dokterenintanzania.nl>

Organizer

Mension

Phone:

+31 23 542 36 75

Email:

ln.noisnem@ofni

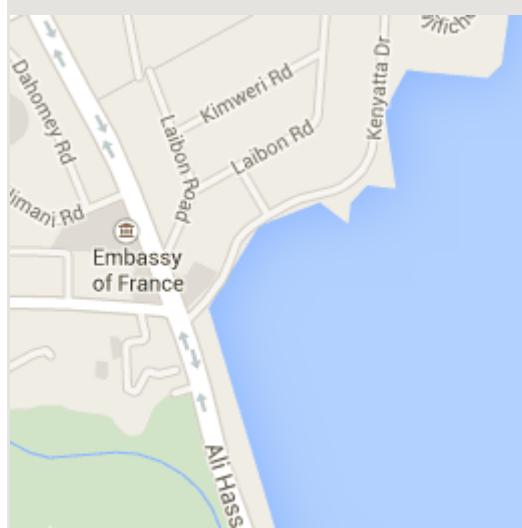
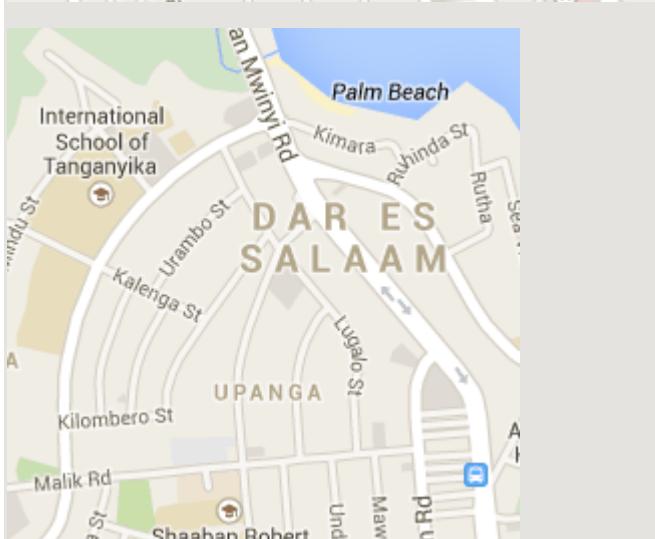
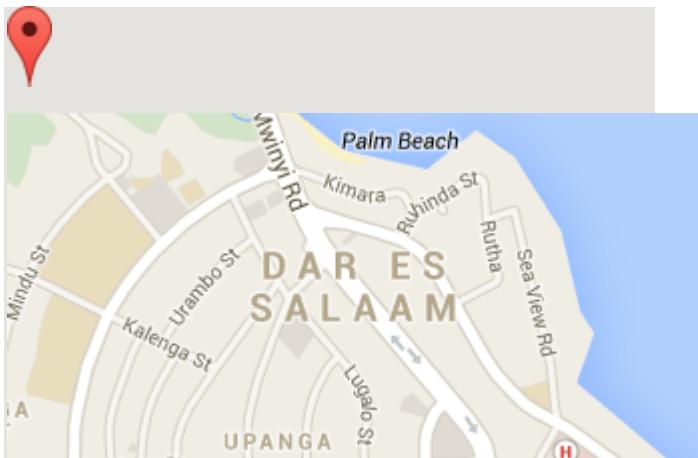
Website:

www.mension.nl

Venue

University of Dar es Salaam

Dar es Salaam, Tanzania, United Republic Of
[+ Google Map](#)



Map

Satellite

First International Conference on Transcultural Psychiatry in Central European Countries

2015/04/24 - 2015/04/26



INVITATION

In a rapidly changing world, psychiatry faces numerous challenges. In response to these rapid societal changes, psychiatry needs to be prepared to meet the challenges of migration, acculturative change and acculturative stressors. Transcultural psychiatry focuses on the study of all these phenomena. In a rapidly changing world, the culture of psychiatry itself is also changing, from a more medically constricted perspective to a more inclusive scientific approach integrating the perspectives of the social sciences and public policy along with medicine and its related clinical disciplines.

That is why we invite you to learn about these developments and to discuss their implications in this conference – the **First International Conference on Transcultural Psychiatry in Central European Countries**. We will discuss the characteristics of rapid culture change over the past two decades, theoretical and practical issues related to the mental health care for migrants, intercultural marriage and its implications, culture change within psychiatry, and a number of other related subjects.

The conference objective is to enable presentations by experienced researchers, clinicians and policymakers from a number of European countries, as well as those from countries around the world.

The long-range goal of the conference is the greater cultural integration of immigrants and refugees in all countries, along with the reduction of stigma related to migration and minority status

in all countries.

Artur Broclawski, Solmaz Golsabahi-Broclawski, Marianne Kastrup, Hans Rohlof, Ron Wintrob

Details

Start:

2015/04/24

End:

2015/04/26

Event Categories:

[Conferences, Events](#)

Website:

<http://www.wpa-gdynia-2014.org>

Organizer

Conference Organizing Committee

Phone:

+49 521 98927820

Email:

ue.ktim@tairaterkes

Website:

www.wpa-gdynia-2014.org

Venue

Hotel Nadmorski ****

Phone:

+48 58 667 77 77

Ul. Ejsmonda 2, Gdynia, 81-409 Poland
[+ Google Map](#)

Website:

www.nadmorski.pl

Courses

Spirituality, Theology and Health; Durham University

2014/09/01 - 2015/07/01



This is an exciting new inter-professional, interdisciplinary programme for those interested in Christian theology and those in Health related professions.

The programme is a collaborative venture with the Department of Theology & Religion, focusing on the interdisciplinary and inter-professional issues that emerge in the study of spirituality and wellbeing, particularly in the healthcare context.
The aim of the programme:

To provide a taught postgraduate programme on which theologians and scientists, clery/chaplins and healthcare workers may reflect together on their understanding of the interdisciplinary field of spirituality, theology and health.

To assist practitioners in acquiring and extending their ability to reflect theologically on their pastoral and clinical work in spirituality and healthcare.

To provide practitioners and researchers with subject specific knowledge and skills supportive of progression to teaching others about spirituality, theology and health.

To provide a depth of knowledge of the literature and in research skills prior to undertaking a doctoral programme of study (PhD or DThm) in this field.

To assist those who, already having a master's degree or doctorate in a different but related field, wish to enter this as a new academic field for research or teaching.

To allow students to conduct, on their individual initiative, a substantial piece of academic research with a primary focus on either theology (MA route) or health (MSc route).

Details

Start:

2014/09/01

End:

2015/07/01

Event Categories:

[Events, Seminars](#)

Venue

Durham University

Mental Health: Transcultural Mental Healthcare

***Postgraduate Diploma (1 year Full-time /
2 years Part-time)***

QMUL , London

•

Overview

Mental health is an ever-growing field and the care for mental illness is developing accordingly worldwide. There is an overall sense of enhanced awareness on mental health, leading to a need for new knowledge and applications of good practice. Phenomena such as globalisation, and displacements of

populations, create new strengths and vulnerabilities in mental health. London, in particular, is a culturally diverse community which requires its practitioners to be culturally sensitive to the individual needs of their clients.

We offer two programme pathways: Mental Health: Psychological Therapies; and, Mental Health: Transcultural Mental Healthcare, both leading to an MSc, Postgraduate Diploma or Postgraduate Certificate. All of the courses are available by blended or distance learning modes of delivery.

The primary aims of this programme, Mental Health: Transcultural Mental Healthcare, are to develop your ability to think critically about working in mental health and mental health research, and to provide greater knowledge and skills, while also imparting the professional values and attitude necessary in health and social care.

The Transcultural Mental Healthcare pathway primarily focuses on cultural capability in health and social care, and provides training in health services research. You will develop a knowledge base derived from anthropological, medical, sociological, epidemiological, pharmacological disciplines, as well as cultural understandings of the presentation, expression and management of psychological distress amongst ethnic minorities. Students undertake a placement related to Transcultural Mental Healthcare for improving reflective practice and complete a research project or systematic literature review on a related topic.

This programme will:

- Allow you to develop a more advanced understanding of the basis of assessment, diagnosis, formulation and care management of psychological disorders in general, and then in diverse racial, ethnic and cultural groups drawing on cultural psychiatry, social sciences and allied disciplines
- Give you access to an academic programme that prepares you to be a competent practitioner, able to deliver effective mental health treatments for

- people with psychological problems
- Develop your knowledge of research methods and systematic and critical review techniques
- Develop and give you access to a network of mental health professionals and established academics.

Why study your MSc in Mental Health: Transcultural Mental Healthcare at Queen Mary?

Barts and the London School of Medicine and Dentistry is comprised of two world renowned teaching hospitals, St Bartholomew's and The Royal London, which have made, and continue to make, an outstanding contribution to modern medicine. We are one of the top five in the UK for medicine in the 2008 Research Assessment Exercise.

Mental Healthcare Studies is taught in the Centre for Psychiatry at the Wolfson Institute of Preventive Medicine at Barts and The London School of Medicine and Dentistry.

The Centre for Psychiatry has research interests in psychiatric epidemiology and social psychiatry, cultural psychiatry, liaison psychiatry and forensic mental health. Current research focuses on aetiology of common mental disorder, particularly examining the role of social factors, and on explanations for inequalities in mental health in adults, psychosomatic illness and mental health in ethnic minorities.

- This pathway equips you with invaluable skills that will be directly applied in clinical work. It enhances and sensitises people interested in acquiring in-depth knowledge on the differences between cultures, from a mental health point of view
- This course addresses the current gap in training for professionals working in multi-cultural populations where mental health issues are important
- The lectures are primarily taught by external speakers, which gives you the chance to be taught by experts in each particular field
- It provides a stimulating environment in which the curiosity about race,

- culture and ethnicity and management of health issues can be explored in the spirit of advancing knowledge and education in order to improve quality of care to black and ethnic minority groups
- It promotes critical thinking about research on mental health issues of black and ethnic minority groups, and develops new research methodologies to deliver high quality research outputs.

Open

Campus:
[Charterhouse Square](#)

Find out more:

[Wolfson Institute](#)

Tel: +44 (0)20 7882 5511

email: pgsmd@qmul.ac.uk



Facilities

You will have access to Queen Mary's comprehensive libraries, including the Postgraduate Reading Room, and The British Library can also be accessed as a research resource.

Specialist resources include:

- The Blizard Building. At the heart of the Whitechapel development is the Blizard Building, which houses state of-the-art facilities for students and staff: open-plan research laboratories, office space, a 400-seat lecture theatre and a cafe
- You will have access to a large collection of basic medical and dental texts in the main library at Mile End. The Library is open seven days a week. This resource is complemented by the two large medical and dental archives based at the Royal London and at Barts in older, architecturally distinguished buildings that are well worth a visit just to experience their atmosphere.

The course director, Professor Kamaldeep Bhui, introduces this programme:

For more details please visit: www.mental-health-studies.org.uk

For further information, you can also visit [Barts and The London School of Medicine and Dentistry](#) website.

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