

WEBINAR REPORT

Working with migrants
and refugees - why do
we need cultural
competence?

November 4th, 2022

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Letstudy Founder



Webinar Details

Webinar Title: Working with migrants and refugees - why do we need cultural competence?

Date: November 4th, 2022

Landing Page: <https://letstudy.gr/webinars/wpa-webinar-4/>

Speakers:

Prof. Roberto Lewis-Fernández: Cultural competence: The Cultural Formulation Interview and its role in mental health assessment

Dr. Hans Rohlof: Role of cultural competence in the clinician-patient relationship

Prof. Ahmet Tamer Aker: Cultural competence in working with traumatized migrants and refugees

Dr. Margaret Uddin Ojeahere: Cultural competence in working with internally displaced persons (children) challenges and lessons

With increasing globalization and movement of people across national boundaries due to more frequent conflicts and disasters, it is important for service providers to become aware of the various needs of the patients they look after. This implies that psychiatrists and patients are more likely than ever to come from different cultural backgrounds. The inclusion of cultural competence into psychiatric-psychotherapeutic training and practice is therefore a matter of growing relevance. It is inevitable that patients will present to clinical settings with diverse clinical needs, and it must be kept in mind that immigrants and refugees are a heterogeneous group in a number of ways.

Cultural competency represents good clinical practice with the goal that all patients, especially those from migration and refugee groups, feel acknowledged and supported. Similarly, when minority clinicians are not aware of the majority culture, conflicts may arise. Cultural competency focuses on skills that a clinician can employ to understand the cultural values, attitudes, and behaviors of patients, especially those whose cultural background differs from that of the mental health professional. Cultural competency does not require that the clinician learn the language or adopt the cultural values of a patient, but rather it involves respecting differences and making sure that these are bridgeable so that they do not negatively impact upon the diagnostic and therapeutic process.

In this webinar, we will focus on cultural competence and discuss why it is needed in working with migrant and refugee patients.

Speakers

Prof. Roberto Lewis-Fernández:

Cultural competence: The Cultural Formulation Interview and its role in mental health assessment



Past-President of the World Association of Cultural Psychiatry (WACP)
Professor of Clinical Psychiatry, Columbia College of Physicians & Surgeons, Director, Center of Excellence for Cultural Competence, New York State Psychiatric Institute, Research Area Leader, Anxiety, Mood, Eating and Related Disorders, New York State Psychiatric Institute, Director, Hispanic Treatment Program, New York State

Psychiatric Institute, Lecturer on Global Health and Social Medicine, Harvard University, President-elect, American Psychopathological Association

Dr. Hans Rohlof:

Role of cultural competence in the clinician-patient relationship



Board member and Treasurer of the World Association of Cultural Psychiatry (WACP)

Board member and Treasurer of the Dutch Division of Transcultural Psychiatry, Secretary of the Johannes Wier Foundation on Health Care and Human Rights, Former Chair of the Section on Transcultural Psychiatry of the World Psychiatric Association (WPA-TPS), Consultant

Psychiatrist and Psychotherapist, M.D., Ph.D. Transparant GGZ, Transparant Mental Health Institute

Prof. Ahmet Tamer Aker:

Cultural competence in working with traumatized migrants and refugees



Istanbul Bilgi University, Trauma and Disaster Mental Health Department, Faculty Member.

Trauma Studies; Specialist in psychotraumatology

Dr. Margaret Uddin Ojeahere:

**Cultural competence in working with internally displaced persons
(children) challenges and lessons**



Consultant Psychiatrist at Jos University Teaching Hospital

Psychiatrist with special interests in children and adult mental health, mental health of vulnerable groups, biological psychiatry, community and global mental health

Webinar Poster



Working with migrants and refugees - why do we need cultural competence?

Friday 4th November 2022, 2 PM (CET - Central European Time)

Duration 2 hours

Sponsored by:

World Psychiatric Association

Working Group on Providing mental health care for refugees and migrants and the Section on Transcultural Psychiatry

Webinar Directors:

Prof. Dr. Afzal Javed

Prof. Dr. Meryam Schouler-Ocak

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Programme:

14:00 - 14:10	Introduction (Afzal Javed, President of the WPA)
14:10 - 14:30	Cultural competence: The Cultural Formulation Interview and its role in mental health assessment (Roberto Lewis-Fernández, USA)
14:30 - 14:50	Role of cultural competence in the clinician-patient relationship (Hans Rohlof, Netherlands)
14:50 - 15:10	Cultural competence in working with traumatized migrants and refugees (Ahmet Tamer Aker, Turkey)
15:10 - 15:30	Cultural competence in working with internally displaced persons (children) challenges and lessons (Margaret Uddin Ojeahere, Nigeria)
15:30 - 15:40	Closing remarks (Afzal Javed, President of WPA)
15:40 - 16:00	Q&A Session

For all Enquiries please email: wpawebinars@letstudy.gr

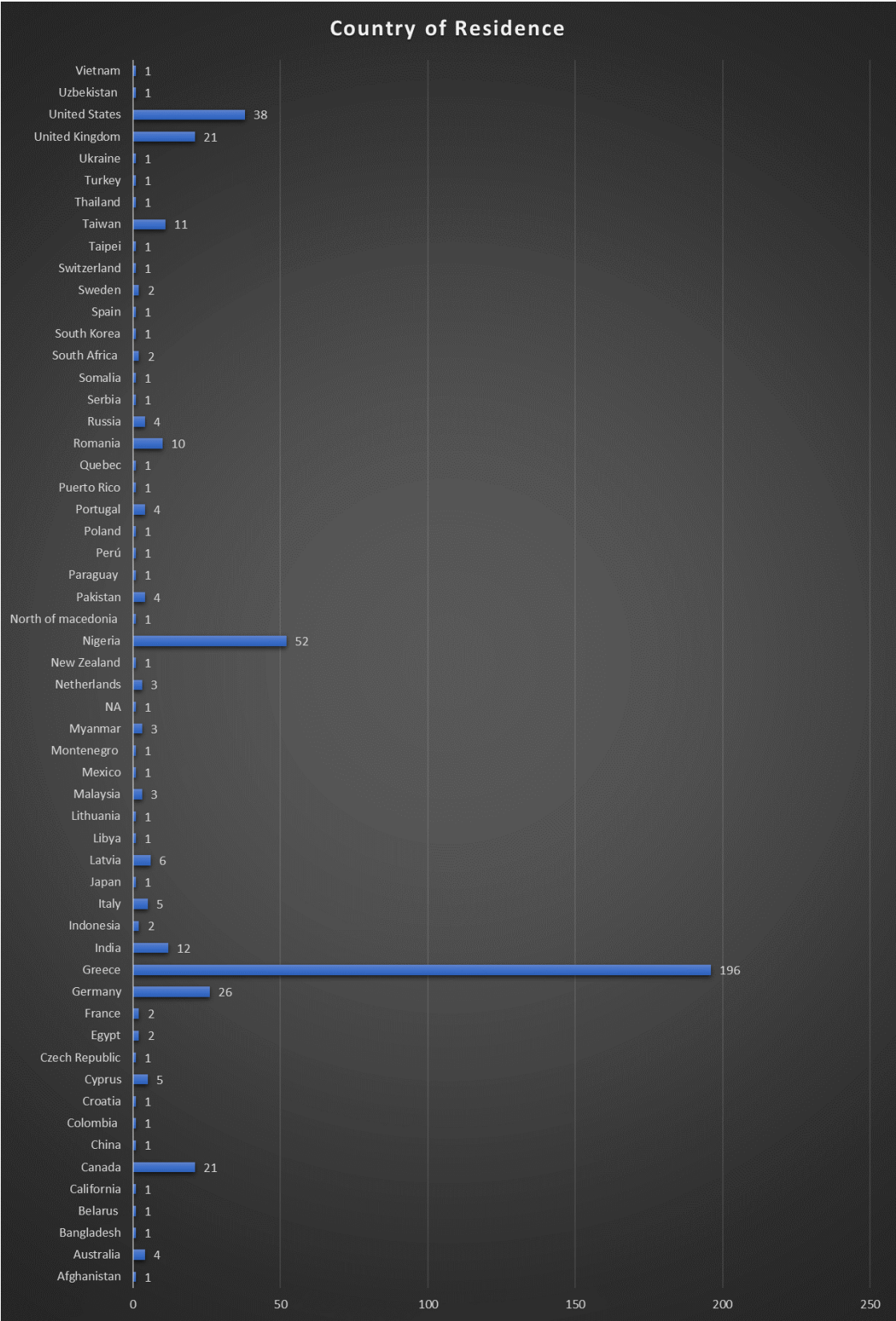
REGISTRATION

Free access to the webinar. For Registration, please visit: <https://letstudy.gr/webinars/wpa-webinar-4/>

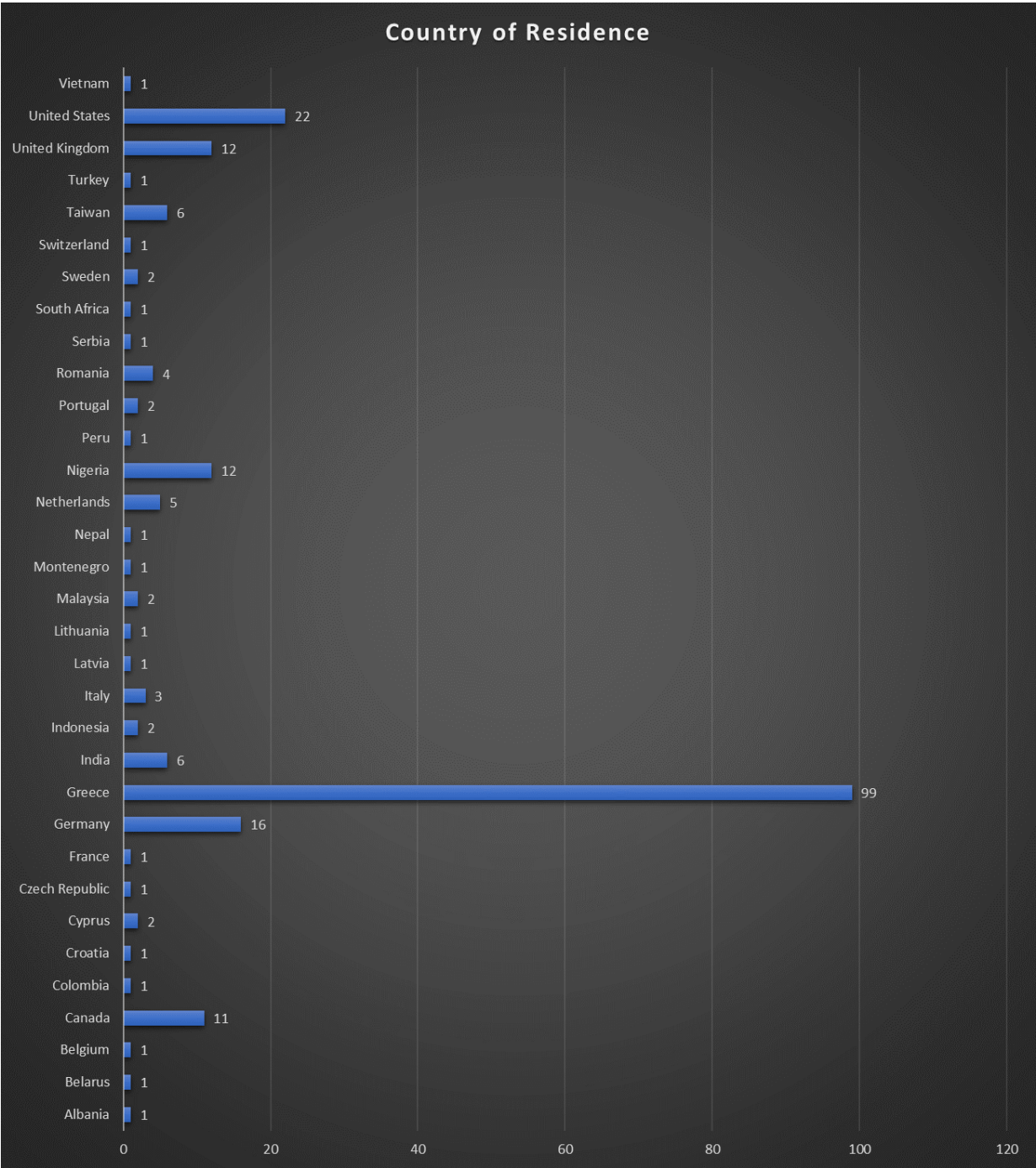
This meeting is supported by an unrestricted educational grant from Viatrix. The sponsor had no influence on the design and development of the programme or any associated materials.

Webinar Registration and Attendance

A total of 470 individuals from 56 different countries registered for the webinar. In the graph below, you can see the registrants’ country of residence distribution.



Out of the total 470 registrations, **223** participants attended the webinar (47,44%)



Questions and comments posted in the webinar:

1. Hello, thank you for organizing this event. Will it be possible to enable the subtitle to make it more inclusive. Thank you.
2. Americans are an utter failure in cultural competence. Why do you think that is?
3. American for Americans are only White AND Black? Apart from this group they are like frogs in a pond. Americans can never become socially and culturally competent. What say?
4. If a sociocultural assessment is a process, who should do this assessment: a persons who takes care of an intake or the therapist who does the treatment (often in the Netherlands thsese are different professionals)?
5. Hello ! After webinar we will receive any material of webinar in our email exept the certtification ?
6. Hello, congratulations for the webinar
7. I connected to late, how can we achieve the DSM-5 CFI
8. "I just want to say hello to my friends Pr Afzal,Pr Roberto Lewis and Pr Hans Rohlof.
9. Rachid Bennegadi,President of the World Association of Social Psychiatry ."
- 10."For Prof Hans Rohlof, could you please write the book title and authors in one of your slides, 'Intercultural counselling ...'
- 11.Thank you.
- 12.Andrian Liem from Monash University Malaysia"
- 13.how much access trauma refugess have to psychology in particular trauma work?
- 14.Could it be that cultural competence is more important than cultural matching?
In most cases cultural matching is not easy to achieve. Comment please!
- 15.Are there disorders that are more common in migrant populations or is it tha the stress of migration brings to the surface even latent problems?
- 16.I love that term "louder conversations"!
- 17.what does the panel think: do internally displaced fare better than externally displaced?
- 18."What about a phenomenological approach;
- 19.Question to Pr Roberto
- 20.Rachid"
- 21.The social determinants of mental health was incorporated as part of the DSM-5-TR Outline for Cultural Formulation in section C. Please comment on the value of bringing together social structural and cultural formulation.

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22. Hi there, I really appreciate the alliance-building potential of this interview. I wonder whether using it mainly for 'data-gathering', where someone other than the clinician who will be meeting the person is gathering the information, might be in some cases counter-productive. My gut reaction is that this feels very impersonal. I can imagine that if I were in the patient situation, I might feel a bit like a 'case', not a person. Thoughts?
23. Meryam - any chance to share the slide presentation
24. Thank you very much for organising this webinar, very very useful, and as Dr J Afzal put it should be included.
25. Congratulations for the wonderful event. Would you say that other types of minorities (such as native ethnic groups, LGBTQI+, minority religions and other minority groups) have their own "cultures" (i.e. praxes, modes of communication and beliefs)? If so, shouldn't we also strive to become more culturally competent even for those?
26. Any cultural competence recommended for service providers?
27. This has been a great webinar. Thank you!
28. In NY, temporary housing has many migrants coming into the state as a central hub where these folks get care and resources. What do you think about training non clinical staff on how not to potentially exacerbate mental health challenges with these newer members to the community and not just therapists?
29. Thanks for Organising . Very useful and educational