



MESU NYT

NR.3 8. ÅRGANG 28.SEPTEMBER 2018

Fattigdom og Sundhed blandt Migranter

MESU og Dansk Selskab for Indvandrersundhed holdt seminar om "Fattigdom og sundhed blandt indvandrere og deres børn"

Dansk Selskab for Indvandrersundhed afholdt for to uger siden et seminar med titlen "Fattigdom og sundhed blandt indvandrere og deres børn". Præsentationerne og efterfølgende diskussion viste, at fattigdom er stigende i Danmark, og at nogle indvandrergupper er særligt hårdt ramt blandt andet på grund af forskellige politiske initiativer, der forsøger at fremme integration som brugerbetaling på dansk undervisning, integrationsydelse og brugerbetaling på tolk i sundhedsvæsenet. Den efterfølgende diskussion viste, at flere faggrupper og organisationer efterhånden mærker den fattigdom i arbejdet med deres patienter/klienter eller målgrupper. Dansk Selskab for Indvandrers Sundhed vil gå videre med at få sat emnet på en mere politisk dagsorden.

Af Marie Nørredam

MESU Sommertur

I silende regnvejret tog en lille delegation af MESU-ansatte på sommertur til Sct. Hans Hospital. Vi fik en rigtig spændende rundvisning på Sct. Hans Hospitals Museet af tidligere overlæge, Karin Garde, som fortalte levende og med mange eksempler om hospitalets historie som psykiatrisk hospital.

Efterfølgende gik vi ned til Sct. Hans Have, hvor vi fik en rundvisning og introduktion til projektet. I Sct. Hans Have tilbyder man plads til mennesker med psykiske diagnoser, hvor de kan være frivillige i køkkenet eller haven, og have samvær med projektets andre frivillige.

Det var en rigtig god dag på trods af vejret og MESU blev rystet endnu bedre sammen.

Af Kristine Sorgenfri Hansen



Kalender

Webinar

Knowledge Hub on Health and Migration
Webinar #7
28. september 2018, kl. 13.30-15
<https://globalhealth.ku.dk/events/2018/webinar-winds-of-change-over-turbulent-seas-the-future-of-refugee-and-migrant-health-in-europe/>

Konference

International Conference on Migration Health
1.-3. oktober 2018, Rom, Italien
<http://www.istm.org/imm2018>

CAGE-seminar

Seminar om mindreårige flygtninge,
9. oktober 2018, kl. 14.00-16.00
<https://mesu.ku.dk/events/2018/cage-seminar-2018/>

Konference

Røde Kors conference "Meeting humanitarian needs in the next EU migration agreements".
10. oktober 2018, kl. 9.30-13.30
Tilmelding: <https://www.rodekors.dk/eu-migration-agreements>

Konference

World Health Summit 2018 10th anniversary
14.-16. oktober 2018, Berlin, Tyskland
<https://www.worldhealthsummit.org/>

Konference

The Political Origins of Health Inequities and Universal Health Coverage
1.-2. November 2018, Oslo, Norge
<https://www.uio.no/english/research/interfaculty-research-areas/globalgov/globalgov-for-health/news-and-events/events/2018/the-political-origins-of-health-inequities-and-uni/index.html>

Konference

Nordisk integrationskonference
20. november 2018, kl. 10-17
Tilmelding:
<https://nmnr.wufoo.com/forms/z1wvynk1c6miuu/>

Konference

11th European Public Health Conference
28. november–1. december 2018, Ljubljana, Slovenien
www.ephconference.eu

Nyt projekt: Den sundhedsmæssige modtagelse af asyl- og flygtningebørn i Norden – et historisk perspektiv

Jeg hedder Camilla Michaëlis og er kandidat i Folkesundhedsvidenskab ved Københavns universitet.

Jeg har fra 1. august været ansat hos MESU som videnskabelig assistent på forskningsprojektet CAGE - Coming of Age in Exile, der undersøger udviklingen af asyl- og flygtningebørns levevilkår i Norden. Som en del af CAGE-projektet undersøger jeg den sundhedsmæssige modtagelse af asyl- og flygtningebørn, herunder modtagelsespolitikker og praksis i de nordiske lande fra perioden 1980-2018. Formålet med studiet er således at belyse både den historiske og nuværende sundhedsmodtagelse med henblik på at afdække de overordnede tendenser og sammenligne modtagerpraksis i Norden.

Sundhedsmæssige konsekvenser for det enkelte barn af systematiske forskelle i de nordiske lande er endnu ukendte og at blive undersøgt i fremtidige studier.

Projektet løber frem til årets udgang og skal resultere i CAGE's tredje Policy Report. Tidligere rapporter har belyst adgangen til uddannelse og arbejdsmarkedet.



Af Camilla Michäelis

Nyt projekt: Sundhed og trivsel blandt gravide udokumenterede migranter og deres børn i Danmark

Mit navn er Mathilde Boye, og jeg er netop blevet ansat på MESU som videnskabelig assistent. Jeg har en baggrund i Folkesundhedsvidenskab og Global Health, begge fra Københavns Universitet.

Jeg er ansat frem til foråret 2019 på projektet "Sundhed og trivsel blandt gravide udokumenterede migranter og deres børn i Danmark", der er et samarbejde mellem MESU og Røde Kors' sundhedsklinik.

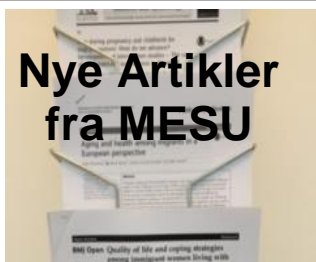
Mit delprojekt er en kvantitativ undersøgelse af fødselsudfald for migranter uden legal opholdstilladelse, sammenlignet med migranter med legalt ophold i Danmark. Formålet med undersøgelsen er bl.a. belyse, hvorvidt udokumenterede migranter i højere grad oplever komplikationer under fødslen, samt andre risici i starten af den nyfødtes liv. Studiet er baseret på en journalgennemgang fra landets fødesteder.

Sammen med projektets andre delstudier bidrager det til at forstå, hvad der påvirker trivslen for de gravide og deres børn, og deraf hvordan man bedst kan målrette interventioner til denne gruppe. Projektet er finansieret af OAK Foundation.



Af Mathilde Boye

Nye Artikler fra MESU



What can we learn from unaccompanied refugee adolescents' perspectives on mental health care in exile?

Jarlbj, F; Goosen, S; Derluyn, I; Vitus, K; Smith Jervelund, S.

European Journal of Pediatrics 2018.

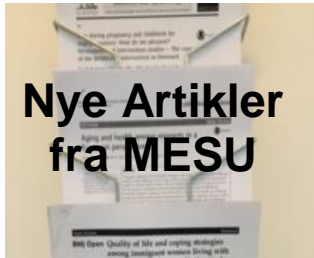
<https://link.springer.com/article/10.1007%2Fs00431-018-3249-0>

AIM: Unaccompanied refugee adolescents who have fled war and persecution often have poor mental health. Yet, little is known about their own perspectives on what can relieve their mental health problems. The aim was to explore unaccompanied refugee adolescents' perspectives on healing and the mental healthcare offered to them when resettled.

METHODS: The study was based on methodical triangulation of participant observation in a Danish municipal institution for unaccompanied refugee minors, semi-structured individual interviews with experts, social workers and male refugee minors and a focus group interview with refugee minors.

RESULTS: Results show that the refugee adolescents associated traditional conversational therapy with discussing negative and stigmatising aspects of their past and carrying risks of re-traumatisation. Instead, alternative activities were proposed, through which resources could be accumulated and they could be met without stereotype.

CONCLUSION: To enhance the complex mental health needs of unaccompanied minors' mental healthcare, the perspective of the refugee adolescents should be taken into account. This calls for a holistic approach to mental healthcare in their daily lives, where they are met in a non-stigmatising manner in which their unique capabilities are the main focus. Moreover, a trusting relationship constitutes the fundament to support good mental health among refugee adolescents.



Health, Education and Employment Outcomes in Young Refugees in the Nordic Countries: A Systematic Review.

Børsch, Anne Sofie; de Montgomery, Christopher Jamil; Gauffin, Karl; Eide, Ketil ; Heikkilä, Elli; Jervelund, Signe Smith.

Scandinavian Journal of Public Health, 01.08.2018, s. 1-13.

<http://journals.sagepub.com.ep.fjernadgang.kb.dk/doi/pdf/10.1177/1403494818787099>

AIM: Since 2000, approximately 500,000 refugees have settled in the Nordic countries, about a third of them being children and young people. To identify general trends, and to detect gaps in the existing knowledge about the socioeconomic and health status of these young refugees, this review discusses the literature regarding three key areas related to welfare policy: health, education and employment.

METHODS: A systematic search in PubMed, Scopus, SocINDEX, Sociological Abstracts, Embase and Cochrane, and a search for publications from relevant institutions were undertaken. All publications had to be original quantitative studies published since 1980. The total number of studies identified was 1353, 25 publications were included.

RESULTS: Young refugees had poorer mental health than ethnic minority and native-born peers. Mental health problems were related to pre-migration experiences but also to post-migration factors, such as discrimination and poor social support. Refugees performed worse in school than nativeborn and few progressed to higher education. Experiencing less discrimination and having better Nordic language proficiency was associated with higher educational attainment. A higher proportion of refugees were unemployed or outside the labour force compared with other immigrants and native-born. Assessment instruments varied between studies, making comparisons difficult.

CONCLUSION: The study suggests pre-migration factors but also postmigration conditions such as perceived discrimination, social support and Nordic language proficiency as important factors for the mental health, education and employment outcomes of young refugees in the Nordic countries. Further Nordic comparative research and studies focusing on the relationship between health, education and employment outcomes are needed.



Ethnic differences in cardiovascular morbidity and mortality among patients with breast cancer in the Netherlands: a register-based cohort study.

Deen, L; Buddeke, J; Vaartjes, I; Bots, M. L; Norredam, M; Agyemang, C.

BMJ Open. 2018 Aug 17;8(8)

<https://www.ncbi.nlm.nih.gov/pubmed/30121599>

AIM: Cardiovascular disease (CVD) is of increasing concern among breast cancer survivors. However, evidence on ethnic differences in CVD among women with breast cancer is sparse. We assessed ethnic differences in cardiovascular morbidity and mortality among patients with breast cancer in the Netherlands.

METHODS: A nationwide register-based cohort study comprising all women with a first admission for breast cancer (n=127 714) between 1996 and 2010 in the Netherlands was conducted. Differences in CVD admission, CVD mortality and overall CVD event, which comprised a CVD admission and/or CVD mortality, between the largest ethnic minority groups (Surinamese, Moroccan, Turkish, Antillean and Indonesian) and the Dutch general population (henceforth, Dutch) were investigated using Cox proportional hazard models.

RESULTS: The incidence of cardiovascular outcomes varied by the ethnic group. The incidence of an overall cardiovascular event was significantly higher for women with breast cancer from Suriname (HR 1.46; 95% CI 1.29 to 1.64) and Turkey (HR 1.25; 95% CI 1.03 to 1.51), compared with Dutch women with breast cancer. In contrast, Indonesian women with breast cancer had a significantly lower risk (HR 0.88; 95% CI 0.81 to 0.96) of a cardiovascular event compared with Dutch women with breast cancer. The risk of a cardiovascular event did not differ between Moroccan and Dutch women with breast cancer, whereas for Antillean women the risk was not significantly higher.

CONCLUSION: Our findings suggest that Surinamese and Turkish women with breast cancer are disadvantaged in terms of cardiovascular outcomes compared with Dutch women with breast cancer. More work is needed to unravel the potential factors contributing to these differences.
retrospektivt register studie

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Indsendelse af indlæg til MESU NYT skal ske til mesu-office@sund.ku.dk inden **den 20. november 2018 kl. 12.00**