



# Existence of probable psychological distress in African and Brazilian immigrants in Portugal.

Godinho M, Alarcão V, Carreira M, Portugal R

Institute of Preventive Medicine (Director: Professor José Pereira Miguel), Faculty of Medicine, University of Lisbon, Portugal



## Background

Migration is a complex social phenomenon which at an individual level leads to a number of changes and difficulties, often identified as risk factors for the development of mental pathologies. In Europe some studies addressed the prevalence of mental illnesses, suicide, alcohol and drugs consumption in migrants and also their access and use of mental health services<sup>[1]</sup>. In Portugal only the last National Health Survey (2005/2006) presented nationwide statistics on the prevalence of mental health in migrants, although with a sample not representative of the different migrant communities living in Portugal. Still little is known about migrant's mental health.

Aims of this study were to determine the prevalence of probable psychological distress in two migrant groups (African Portuguese Speaking Countries and Brazilian immigrants) and correlate this condition with variables related to the migration process.

[1] J. Lindert, M. Schouler-Ocak, A. Heinz, S. Priebe; Mental health, health care utilisation of migrants in Europe; European Psychiatry 23 (2008) S14–S20

## Methods

A geographical random cluster sampling was carried out using Geographic Information System (GIS). There were sampled twenty clusters (squares of 50x50 m) in each county of Lisbon and Setubal Districts and routing tools, available on the Internet, were also used to create pathways to guide interviewers in the field.

The study population was constituted by migrants (men and women) older than 15 years from the African Portuguese Speaking Countries and Brazil, and living in the districts of Lisbon and Setubal (districts with higher proportions of these migrant communities, according to Census 2001). We also considered as members of these communities naturalized and descendants of migrants, to the third-generation.

Data were collected from a study called "Evaluation of Health and Health Assessment of African and Brazilian Immigrants in Portugal" conducted in 2007 in which a questionnaire adapted from 4th National Health Survey was applied during a home visit by trained interviewers.

A short five items version of the Mental Health Inventory (MHI5), sub-scale of the SF36, was applied to evaluate the existence of probable psychological distress. The interviewees were asked to answer the following questions concerning the four weeks before the interview:

- 1) How long have you been a very nervous person?
- 2) How long have you felt so down in the dumps that nothing could cheer you up?
- 3) How long have you felt calm and peaceful?
- 4) How long have you felt downhearted and blue?
- 5) How long have you been a happy person?

These 5 questions were grouped according to a six categories Likert scale, ranging from "Always" (value 1) to "Never" (value 6). Since questions 3 and 4 were referred to positive sentiments, the scale was reversed ("Always" corresponding to value 6 and "Never" to value 1)

The cut-off point used was 52: individuals with less or equal to 52 were classified as having probable psychological distress and those with more without probable psychological distress.

Cross-tabulations were used to illustrate the distributions of demographic and immigration variables according to the MHI-5, and chi-square were used to test the association between them.

## Results

Study population was constituted by 2485 migrants, 58% were woman; mean age was 34±13.2; 69% were from the African Portuguese Speaking Countries and 31% from Brazil.

Prevalence of probable psychological distress was 31% (Picture 1). This result is slightly superior to the result from the 4th National Health Survey where prevalence of probable psychological distress in the Portuguese population was 28%.

In general there are more women suffering from this condition ( $p<0.001$ ). Equal tendency is observed on the results from the 4th National Health Survey. Also Brazilians have shown a greater propensity to this condition ( $p<0.001$ ). (Picture 2)

Being in a legal situation is important, once the undocumented are more likely to show this problem (38%) ( $p<0.05$ ) (Picture 3). Other studies also reveal that legal status of migrants in the country of immigration is highly correlated with their perception of their own mental health <sup>[2]</sup>.

[2] Schenk L, Bau AM, Borde T, Butler J, Lampert T, Neuhauser H, et al. A basic set of indicators for mapping migrant status. Recommendations for epidemiological practice. Bundesgesundheitsblatt Gesundheitsforschung Gesundheitsschutz 2006;49(9):853-60

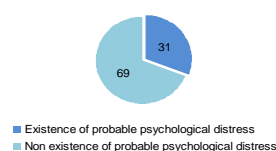
## Results

The existence of probable psychological distress is also related with the number of years in Portugal (Picture 4). There seems to be a tendency of decreasing in the inclination for this condition with the increase of the years of permanence in national territory ( $p<0.001$ ). Also Portuguese-born seem to be less vulnerable ( $p<0.001$ ).

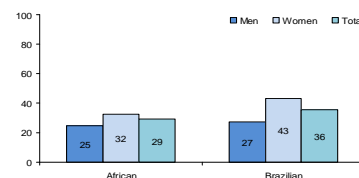
The age of arrival in Portugal is another variable associated with this condition ( $p<0.05$ ). Tendency to have probable psychological distress increases with age of arrival.

No association was found between education level and this condition.

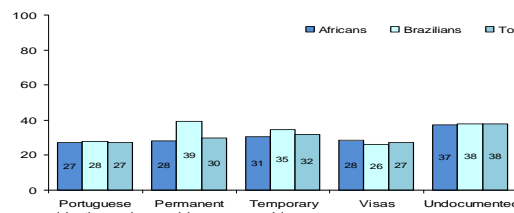
Picture 1 - Existence of probable psychological distress (%)



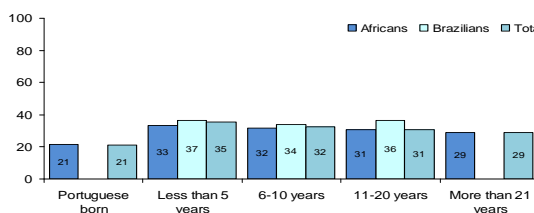
Picture 2 - Existence of probable psychological distress according to sex and nativity (%)



Picture 3 - Existence of probable psychological distress according to legal status and nativity (%)



Picture 4 - Existence of probable psychological distress according to time of staying in Portugal and nativity (%)



## Conclusions

Among other risk factors the age of arrival in Portugal, legal status and the number of years in Portugal are related to the existence of probable psychological distress. This may lead us to think that this condition is probably associated with the difficulties faced along the process of integration.

Knowledge about mental health of migrants in Europe is still limited. Therefore, further studies should be conducted in this area, in order to achieve a better understanding of the factors that relate ethnicity with this condition, especially longitudinal studies that allow to follow every stage of the migration process.

## Grant

