

Does immigration increase the risk for poorer mental health?

M.L. Imaz; J.M. Ginés; R. Navinés; E. Fdez. Egea; A. Gabilondo; C. García-Ribera
 Institut d'Assistència Psiquiàtrica, Salut Mental i Toxicomanies. Servicio de Urgencias.
 Hospital del Mar. IMAS. Barcelona

Introduction

Immigration has become one of the most important political and social issues in the world. In our country is a new social phenomena which started five years ago. In 2003, 2% of general population was immigrant. Catalonia was the Spanish Autonomous Community with the highest number of immigrants (3.5%). City of Barcelona concentrated 70% of this population and our hospital attend the crowded immigrant population of the city. These characteristics facilitate the study on the relationship between immigration and mental health.

Objective

To study retrospectively the immigrant population who are visited in the Psychiatric Emergency Service (PES) of a General Teaching Hospital during one year and to compare with autochthonous population.

Material and Methods

We studied retrospectively all visits performed in a PES of a General Hospital (n=3.148) during one year (2003). We analyzed data from a routine computerized protocol which include: socio-demographic data, reason for consultation DSM-IV diagnosis, the total score of the Spanish version of Severity of Psychiatric Illness Scale (SPI) (Bulbena et al., 1997), and need time observation at the PES and derivation.

Results

402 psychiatric emergencies (12,8%) were from immigrant patients. Most of them have been citizens of Barcelona (67%) since at least one year. In Fig. 1 we could see the countries of origin. Table I shows the sociodemographic differences between both groups, immigrants and non-immigrants. Table 2 shows the clinical variables.

Table 1. Socio-demographic characteristics

Variables	Immigrants (n=402)	Non-immigrants (n=2.746)	p
Men (%)	56,5	44,8	*
Age (x+DT)	33,1+11,9	40,9+15,4	*
Social problems (%)	42,8	22,1	*
Legal problems (%)	12	5,1	*
Economic prob. (%)	38,6	16,3	*
Homeless (%)	15	3,2	*
Non-public Insurance (%)	35,8	2,3	*

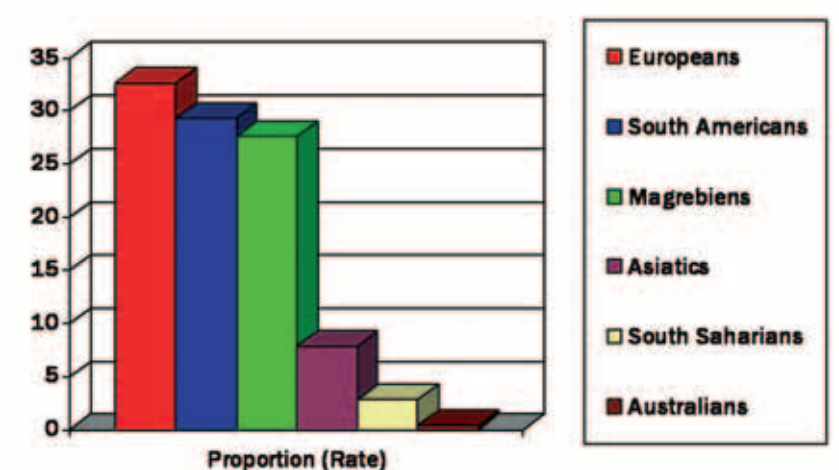
Chi-square, Test de Student; * p <0,000

Table 2. Clinical variables

Clinical variables	Immigrants (n=402)	Non-immigrants (n=2.746)	p
Psychiatric background	62,2	81,2	*
Previous contact MSH	48,6	74,9	*
Actual contact MSH	24,6	57,3	*
DSM-IV diagnosis:			
-Schizophrenia spectrum disorders	23,4	17,2	*
-Affective disorders	20,9	27,3	*
-Anxiety disorders	22,7	19,8	*
-Substance use disorders	17	13,3	*
-Personality disorders	8	14,9	*
-Others	8	7,5	*
Stay in observation ward	46,3	37,2	*
Psychiatric hospitalization	22,7	16,3	*
Drugs consumption	32,6	29,1	NS
Dual diagnosis	16,6	18,8	NS
Total SPI: x (+ DE)	10,4 (+ 6)	9,5 (+ 5,3)	**

*Chi-square. * p <0,000; **Kruskal-Wallis, p <0,000

Fig. 1



Conclusions

The origins of immigrants patients visited at the PES was: 32% Europeans; 28% South-Americans, and 27% Magrebiens. In comparisons with the non-immigrants group these patients were younger, males, with more socio-economics and legal problems. They were diagnosed of a major mental disorders, mainly psychosis or anxiety disorders. They had a higher SPI total score. Finally there was a group of patients who needed more time observation at the PES and higher frequency of hospitalization according to its level of severity of illness.

References

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