“LIKE AN ENGLISHMAN IN NEW YORK” – FOREIGNER PATIENTS IN THE PSYCHIATRIC WARD

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Objectives : With this project, through an observational, cross-cut and descriptive study, the authors aimed to analyze and categorize different clinical and demographic variables, among foreigner patients admitted in a Portuguese acute care psychiatric ward.

Background: Culture influences our understanding of health and illness, methods of treatment as well as health-seeking behavior such as attitudes to preventative and curative care, attitudes to providers and expectations towards the healthcare system. Culture modifies the way we cope with everyday problems and to more extreme types of adversity. Much of the literature suggests that mental health professionals and institutions need to focus on ethno-specific approaches to mental health. In a world of globalization and an increasingly multiethnic Portugal, we are more frequently exposed to different nationality patients and, therefore, to a different expression and subjective experiences of mental illness.

Materials and Methods:
The sample includes all foreigner patients admitted to the acute care psychiatric ward of Centro Hospitalar de Leiria from January **2014** to January **2019**. We excluded all patients that have been living in Portugal for over a 10 year period.

Results: In a group of 62 patients, 45% were male and 55% female. The average age group was 41,98 years. They were born in 24 different countries (graphic 1) and most of them were living in Portugal for more than 6 years (table 1). Almost 34% of the patients did not have any kind of family or social support in Portugal. From what we were able to find about 40% of patients had no psychiatric history. Of the hospitalized patients, 10% were compulsive. The distribution of diagnoses can be seen in graph 2, with the largest number of patients in the group of pathologies such as schizophrenia, schizotypal and delusional disorders. Graph 3 shows the diagnosis by country in Brazil, Ukraine, Cape Verde and France (where data was more significant): should be highlighted the number of Brazilian patients with affective disorders.

Table 1 - Period living in Portugal	
Travelling	14,5% (n=9)
<1 year	3,23% (n=2)
1- 5 y	56,25% (n=18)
6-10 y	53,2% (n=33)

Conclusions: We would need a bigger sample to draw more consistent conclusions about this topic. Due to the worldwide migration flow whose Portugal is included, there is a need to prepare clinicians for the different expressions of psychiatric pathology in order to positively influence the treatment and prognosis of these patients. To achieve this goal is important that we value cultural beliefs and different suffering types of cultural languages, explore psychopathology extensively and invest in therapeutic relations, family interviews and investigate the country's culture.