Symposium

**==** 2025年9月28日(日) 10:40 ~ 12:10 **==** Session Room 8 (Meeting Room 1)

## [Symposium 91] Navigating Mental Health Systems: Informal Care, Multilingualism and Professional Interpreting

Moderator: Mike Mösko (University of Applied Science Magdeburg-Stendal)

[SY-91-02] Navigating Mental Health Systems: Informal Care, Multilingualism and Professional Interpreting

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キーワード:Migrants、Language barrier、EHealth

Migrant populations have a higher risk of suffering from specific mental health disorders compared to non-migrant populations. However, their acces to receiving culturallysensitive mental healtcare is oftentimes severely impeded due to language barriers. Hence, during a three-year multidisciplinary research project the MentalHealth4all consortium, comprising 13 academic and practice partners based in nine European countries, systematically developed and evaluated an evidence-based multilingual communication platform to enhance access to mental healthcare for migrants with low language proficiency in their host country's dominant language(s). Main components of this platform are a resources database, a location map with mental healthcare services, and various animated videos to further educate both (potential) patients and mental healthcare professionals on how to mitigate language barriers. This study prospectively conducted the platform's effect- and process-evaluation by means of a pretest-posttest survey study in all consortia countries. Primary outcomes were four dimensions of access to mental healthcare services: availability, approachability, acceptability and appropriateness. Secondary outcomes were actual platform usage and satisfaction with the different platform components. Statistical analyses (e.g., repeated measures ANOVAs) and Latent Dirichlet Allocation (LDA) topic modelling were applied to analyse closed- and open-ended questions respectively and identify opportunities for further improvement of the platform. Findings show that the platform significantly improved migrants' (n=302) perceptions on access to mental healthcare for all four dimensions. It also significantly improved providers' (n=56) perceptions in terms of appropriateness, but their perceptions on other dimensions did not significantly change. Migrants and providers used the platform for a substantial amount of time (about 17 vs. 56 minutes respectively) and were satisfied with different platform components. The findings of this study indicate that the MentalHealth4all platform holds great potential in promoting access to mental healthcare for migrants with low language proficiency in their host country's dominant language(s) across Europe, thereby reducing exisiting health inequities.