== 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]

Navigating Mental Health Systems: Informal Care, Multilingualism and Professional Interpreting

Mike Mösko¹, Barbara Schouten², Rowan Madzamba³, Muhammed Talha Topcu¹ (1.University of Applied Science Magdeburg-Stendal(Germany), 2.University of Amsterdam(Netherlands), 3.Stellenbosch University(South Africa))

[SY-91-01]

Integration of professional interpreters in outpatient mental health care services – Germany's first model project

*Mike Mösko (University of Applied Science Magdeburg-Stendal(Germany))

[SY-91-02]

Navigating Mental Health Systems: Informal Care, Multilingualism and Professional Interpreting

*Barbara Schouten^{1,2}, Yuhui Chen³, Julia van Weert^{1,2}, Liza van Lent¹ (1.University of Amsterdam(Netherlands), 2.Center for Urban Mental Health(Netherlands), 3.KULeuven(Belgium))

[SY-91-03]

'We have been completely immersed in frustration and trauma': Ambivalence in informal migrant care systems in South Africa

*Rowan Madzamba¹, Asithandile Nozewu¹, Kitso Setswe¹, Christine Anthonissen¹, Mike Mösko^{2,3}, Ieslie Swartz¹ (1.Stellenbosch University(South Africa), 2.University Medical Center Hamburg-Eppendorf(Germany), 3.Magdeburg-Stendal University of Applied Sciences(Germany))

[SY-91-04]

(Therapeutic) Relationship qualities in interpreter-mediated psychotherapy: A qualitative study with therapists, interpreters and patients in Germany.

*Muhammed-Talha Topçu (University of Applied Sciences Magdeburg-Stendal(Germany))

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キーワード: Multilingualism、professional interpreter、carer、Trust、migrant

This symposium brings together four interdisciplinary contributions that examine how migrants navigate mental health systems with the emphasis on conditions of multilingualism, structural, and emotional precarity.

The first presentation investigates informal caregiving practices among migrants in South Africa, revealing the emotional ambivalence and psychological toll of supporting others while lacking formal access to care oneself. These grassroots forms of care challenge dominant narratives and call for recognition of migrants as both caregivers and care recipients. The second presentation introduces the *MentalHealth4all* project, a multilingual digital platform developed across nine European countries to improve access to mental health services for migrants with low host-language proficiency. The platform significantly enhanced perceptions of access among migrants and professionals, demonstrating the promise of digital innovations in overcoming language barriers. The third presentation discusses Germany's first model project for integrating professional interpreters into outpatient mental health care. Despite structural support and cost-free availability, uptake remains limited, highlighting motivational and organizational barriers that hinder broader implementation. The final presentation explores the relational dynamics in interpretermediated psychotherapy. Through qualitative interviews with patients, therapists, and interpreters, the study identifies trust, nonverbal communication, and emotional presence as key elements for building effective therapeutic relationships within triadic constellations.

Collectively, these contributions offer a nuanced understanding of how multilingual care is navigated, delivered, and experienced across informal, digital, and institutional settings. They underscore the importance of culturally and linguistically responsive strategies that go beyond mere access to engage with the complexities of trust, multilingual communication, and systemic inclusion in mental health care for migrants.

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

[SY-91-01] Integration of professional interpreters in outpatient mental health care services – Germany's first model project

*Mike Mösko (University of Applied Science Magdeburg-Stendal(Germany)) キーワード:professional interpreter、health care services、outpatient、model project

Background: In order to overbridge language barriers in mental health care services, a range of (in-)formal practices takes place globally, including use of family members, cleaning or security staff as ad-hoc interpreters, the use of receptive multilingualism, relying on machine translation or the rare use of professional interpreters. Due to missing political and legal support and unclear financing professional interpreters are hardly integrated into health care services. Germanys first model project is trying to overcome these barriers in outpatient mental health care services.

Methods: The model project consists of free of charge interpreters for all outpatient mental health professionals (n=1.900) in the state of Hamburg (Germany). For evaluation a mixed methods approach was used. Before the implementation a baseline-study was being conducted to all MHPs working in outpatient services. The process quality was assessed by 14 semi-structured qualitative interviews of interpreters and MHPs. **Results:** Two third of all professionals (67%) replied to the survey. 8% off all patients do not speak German sufficient for adequate diagnosis or treatment. If the funding of professional interpreters was well regulated 56% of the professionals would integrate them more into work. After now eight years of the model project a total of 100 MPHs participate, a total of 5% of all MHPs. Currently 105 professional interpreters are providing services in 53 languages. In regard to working in the triad MHPs and interpreters mentioned different challenges and resources.

Conclusion: A significant number of patients, do not speak German sufficient. Despite a high willingness of the MPHs to work with professional interpreters, the vast majority of the professionals does not participate in this free of charge interpreter service. Integration of professional interpreters in mental health care services is not just a question of money, but also of motivating MHPs to work in a triad.

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

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

*Barbara Schouten^{1,2}, Yuhui Chen³, Julia van Weert^{1,2}, Liza van Lent¹ (1.University of Amsterdam(Netherlands), 2.Center for Urban Mental Health(Netherlands), 3.KULeuven(Belgium))

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.

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

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

[SY-91-03] 'We have been completely immersed in frustration and trauma': Ambivalence in informal migrant care systems in South Africa

*Rowan Madzamba¹, Asithandile Nozewu¹, Kitso Setswe¹, Christine Anthonissen¹, Mike Mösko^{2,3}, leslie Swartz¹ (1.Stellenbosch University(South Africa), 2.University Medical Center Hamburg-Eppendorf(Germany), 3.Magdeburg-Stendal University of Applied Sciences(Germany))

キーワード:Ambivalence、Migration、Care、Trauma、Ethics of Care

This paper explores the everyday experiences and emotional complexities of migrant caregivers in South Africa, who often require care themselves yet continue to support fellow immigrants within their communities. Drawing on rich qualitative data, the study foregrounds the ambivalence and reciprocity within informal care systems in migrant contexts, challenging linear and simplistic conceptions of caregiving roles. The research is part of the international MiM2M (Multilingualism in Migrant Mental Health Care) project, which examines migrant health communication and care across five countries South Africa, Germany, China, Romania, and the Netherlands. Fifteen in-depth, semi-structured interviews were conducted with migrant carers affiliated with People Against Suffering, Oppression, and Poverty (PASSOP), a migrant rights organization in Cape Town. Participants were purposively sampled to reflect a range of caregiving contexts, national backgrounds, and gender identities. Culturally sensitive, trauma-informed methodologies were used to ensure ethical engagement, including multilingual facilitation where needed. Thematic analysis revealed that caregiving within migrant networks is shaped by precarious legal statuses, emotional fatigue, and constrained access to formal health and social services. Participants described feelings of being "completely immersed in frustration and trauma, highlighting how caregiving is both a survival strategy and a source of psychological burden. At the same time, these acts of care challenge dominant narratives that portray migrants as either passive victims or self-reliant achievers. Instead, they reveal complex negotiations of identity, obligation, and solidarity. This paper contributes to broader discussions on care ethics, migration, and social inclusion by highlighting the invisible, yet essential care labour performed by migrants. It calls for more inclusive care and health policies in South Africa that recognize and support the intertwined realities of caregiving and receiving care within migrant communities.

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[SY-91-04] (Therapeutic) Relationship qualities in interpreter-mediated psychotherapy: A qualitative study with therapists, interpreters and patients in Germany.

*Muhammed-Talha Topçu (University of Applied Sciences Magdeburg-Stendal(Germany)) $+\neg \neg - F$: Language barriers、Cross-Cultural Psychotherapy、Interpreter-Mediated Psychotherapy

Due to globalisation, global crisis and migration the number of forcibly displaced population increases. Psychological stressors play a significant role influencing the mental well-being of migrating populations. Among a variety of barriers to access and provide mental health care to this vulnerable population, language barriers significantly hinder migrants' access to psychotherapeutic care. Interpreter-mediated psychotherapy has emerged as an effective method for overcoming these challenges but introduces a more complex relationship structure: the classical dyad evolves into a triad. Despite the utilisation of the assistance of interpreters, little research exists on the specific dynamics and relationship qualities within this triad. Relational qualities like as trust, empathy and such are known to be indicators for a good and positive therapeutic relationship. This study aims to explore the quality of relationships in interpreter-mediated psychotherapy, focusing on trust-building, the role of nonverbal communication, and relationship development among all parties involved. To address this, 21 semi-structured interviews were conducted with mental health care providers (n=6), interpreters (n=6), Turkish- and Arabic-speaking patients (n=6), and experts in migration and mental health (n=1), relationship building in psychotherapy (n=1), and translation studies (n=1). The interviews were audio-recorded, transcribed verbatim, and analysed using qualitative content analysis. This study identified overarching relational qualities while suggesting that trust plays a central role for all participants. Clear information about confidentiality fosters patient openness, while patients particularly value nonverbal communication and the therapist's emotional presence and responsiveness. Interpreters emphasized the importance of accurate translations in building trust between therapists and patients. The patients' perspective offers valuable insights into their experiences and underscores the importance of interpreter-mediated psychotherapy as a crucial form of support for migrants.