“I am not crazy!”
Portuguese-Speaking Immigrants’ Changing Views on Mental Health

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Objectives of this Presentation

• Review larger psychosocial changes among Portuguese immigrants in the context of the US society.

• Review past and present mental health trends regarding Portuguese and Brazilian immigrants in the Boston area.

• Specific ways PMH has helped facilitate acculturation among Portuguese-speaking immigrants.
Basic Facts

• Culture is fluid, not monolithic

• Interactions with the environment and other people are also fluid

• Immigrants experience additional layers of fluidity due to two cultures

• A few immigrants never acculturate while others disengage from the community of origin
Portuguese Generational Fluidity

New Immigrant
- Portuguese culture
- American culture

Acculturation
- American culture
- Portuguese culture

Third Generation
- American culture
- Portuguese culture

Integration
- Food
- Language
- Family/grandmothers
- Feasts

Small bridge to US culture
- Work
- Children’s school
- Health care
General Past Psychosocial Trends of the Last Wave of Portuguese Immigrants (1970’s to 80’s)

Social/political context of fascism
poverty, catholic beliefs, patriarchal family and new country:
• Reserved, respectful, cautious, thoughtful, modest, shameful, proud, self-reliant, frugal, friendly.
• Hard working for basic needs
• Monolingual Portuguese
• Limited education
• Celebrating religious and family events
• Vacationing in Portugal

America was different:
• jobs available
• dollar higher value
• “melting pot”- English
General Present Psychosocial Trends Among Portuguese Immigrants

- Integrated
- Educated
- Hard working
- Bilingual, monolingual English
- Celebrating our ethnic roots
- Matriarchal
- Financial worries and bigger spenders.
- Celebrating religious and family events
- Vacationing in the world

America is:
- more open - ethnicity, language
- more punitive - undocumented
  - economical crisis - less jobs, higher cost of living
- Internet
Portuguese Mental Health Clinic in the Past The Egas Moniz Clinic - CHA - 1970’s to 80’s

- Portuguese clients, few Cape Verdean
- Legal residents
- Female clients mostly, families with adolescent and marital issues, major mental illness
- Stigma of mental health and cautious of the unknown therapy
- Seeking services in acute situations.
- Multidisciplinary team (6) working with medical staff

- Free Care
  - no interpreters
  - no linguistic services
  - no cultural services
Portuguese Mental Health Clinic in the Present

- Clients: Brazilian, Portuguese, CV
- 15-20 referrals a week
- Clients still with limited English fluency
- Female clients - more males
- Legal and undocumented clients
- Fear of deportation
- Clients on preventive health care
- Multidisciplinary team (11) working with medical staff.

- Medical Home Model
  - Insurance driven
  - No free care
  - Less focus on culture
  - Interpreters - law 2000
  - Still few community services
What is the Medical Home Model?

Primary care system
Chronic disease management model
• Accessible care
• Continuity of care
• Comprehensive care
• Coordination of care
• Interdisciplinary Team Practice
• Quality and Safety
• Information technology
Ongoing Portuguese and Brazilian Mental Health Trends: “I am not crazy!”

• More receptive and informed--TV, Internet--about emotional issues and services, e.g., psychotherapy, domestic violence advocacy and law, positive thinking

• Still stigma of mental health and addictions

• Still fear of gossip - adult individual, child, family, couples, avoid groups

• Adjusting their treatment, usually without disclosure:
  - medication dosages
  - traditional herbal remedies and healers
Portuguese Mental Health Clinic Facilitating Acculturation

- Linguistic and culturally informed providers
- Confidentiality
- Treating depression, anxiety, trauma, domestic violence, adjustment issues, bipolar, schizophrenia, addiction, sexual and gender issues, sexual preferences, parenting, marital problems, child depression and ADHD, elderly depression, dementia and psychosis, families
- Psych education and language (e.g., agonies/agonias)
- Psychotherapy includes psychodynamic, cognitive behavioral methods, casework, translation and interpreting, referrals and collaboration with MAPS
- Psychotherapists as part of the support network.
Conclusion

• Portuguese immigrants have evolved and the US society changed
• Portuguese immigrants are integrating into mainstream society.
• Without new immigrants, it is the Portuguese language (7th in the world, 2nd or 3rd in MA), the food and history that will mark our presence in the US
• Stigma of mental health and addictions is present in both societies
• There is still need for affordable linguistic and culturally appropriate services in our communities
• Legalization is a must to have full benefits
• Develop mental health connection with Portugal?
References

- Interpreter Services in Massachusetts Acute Care Hospitals. Office of Health Equity, November, 2008.