

## TREATMENT OF MIGRANT PATIENTS WITHIN A LOCAL CARE NETWORK

Our aim is to transfer our theoretical and clinical experience in psychiatry to the general hospital situations.

The difficulties that we have encountered in our treatment can be summarized as follows:

- a) theoretical resistances
- b) political and administrative resistances
- c) institutional resistances

The three seem to be interrelated.

Institutional resistances derive from insufficiently understood theoretical ones, as well as from mayor political and administrative problems.

For instance, as far as Switzerland is concerned, we find that the asylum seeker is usually confronted with mayor difficulties in obtaining a resident permit, which, in turn places him/her in a precarious social situation.

Moreover, the above-mentioned situation affects the family identity and that of some of its members. As children become rapidly proficient in their new language, they begin to feel more concerned and responsible, while the father may lose his role as head of the family.

As our etiological models seem to be insufficient, we need to undertake the study of other ones.

Interpreters, who function as cultural mediators also introduce differences in the classical dual relationship. By some therapists, their presence is felt as intrusive.

Further difficulties are encountered in regard to our own culture when we realize that our traditions, our established social norms, etc., which usually have a containing function, do not always apply to the migrant's culture.

And, finally, we are often confronted to the unspoken and eternal question: Who is this stranger? What is he doing here? What does he really want from us? These are, of course, the very primitive persecutory elements which will often emerge and have to be taken into account in our counter-transference.

At present we are still dealing with these new and difficult, as well as very exciting experiences.

Should the outcome be fruitful, we would like to join our efforts with that of other therapeutic institutions, such as for instance the general hospital.

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