New Directions in Refugee Mental Health Research: Informing Interventions

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Mental Health of Refugees

- Elevated rates of psychological disorders in refugees and asylum-seekers
- Epidemiological studies in Australia & US
  - 12 month prevalence for PTSD: 1-3.9%
    (Creamer et al., 2001, Psychol Med; Kessler et al., 1999, Arch Gen Psychiatry)
- Refugee and conflict-affected populations
  - PTSD: 30.6% (Steel et al., 2009, JAMA)
  - Refugees 5 years or longer after displacement: PTSD: 4.4-86% (majority of studies 20%+)
    (Bogic, Njoku & Priebe, 2015, BMC Int Health Human Rights)
Treatment of PTSD in Refugees

- Growing evidence base (e.g., Crumlish & O’Rourke, 2010; Nicholl & Thompson, 2004; Nickerson et al., 2011; Nose et al., 2017)

- Support for trauma-focused interventions

- Many trials have methodological limitations

- Variable outcomes
  - Attrition
  - Symptom improvement

- Need for more evidence
Resilience, Recovery or Psychological Distress
Resilience, Recovery or Psychological Distress?
Potential Underlying Processes

COGNITIVE PROCESSES

MEMORY PROCESSES

EMOTION PROCESSES
Potential Underlying Processes

**COGNITIVE PROCESSES**
- Perceptions of traumatic events
- Control (Basoglu et al., 2007)
- Harm (Kannien et al., 2002)
- Moral injury (Nickerson et al., 2015)
- Benevolence/ justice (Basoglu et al., 2005)

**MEMORY PROCESSES**
- Relationship between psychological symptoms and trauma memories (Mollica et al., 2007)
- Overgeneral memory bias (Graham et al., 2014; Moradi et al., 2008)
Emotion Processes

- Difficulties in managing strong emotions associated with posttraumatic stress symptoms (Benoit et al., 2010; Ehring et al., 2006)
- Heightened following exposure to interpersonal trauma (Walsh et al., 2011)
- Affect dysregulation is symptom cluster in Complex PTSD diagnosis proposed for ICD-11
- Represents important potential treatment target
Cross-Sectional and Observational Studies
How Do Refugees Manage Emotions?

- Difficulty identifying & describing emotions associated with greater PTSD symptoms (Park et al., 2015; Sondergaard & Thoerell, 2004)
- Refugees with PTSD more likely to disengage from others (Hooberman et al., 2010)
- Emotional regulation difficulties mediate relationship between trauma, living difficulties and psychosocial outcomes (Nickerson et al., 2013)
Cross-Sectional and Observational Studies

Longitudinal Research
How Does Emotion Regulation Change over Time?

- Emotion-focused coping associated with lower PTSD in aftermath of trauma (Kanninen et al., 2002)
- Problem-focused coping associated with lower distress several months after trauma (Kanninen et al., 2002)
- Over 9 months, increased difficulty naming emotions associated with greater PTSD symptoms (Sondergaard & Thoerell, 2004)
How Can We Help Refugees to Effectively Manage Strong Emotions?

- 76 refugees with varying levels of PTSD symptoms
- Randomly assigned to:
  - Emotional suppression
  - Cognitive reappraisal
- Viewed emotional images of trauma scenes
- Measured intrusive memories over subsequent 2 days

Nickerson et al., 2017, *Clin Psych Sci*
How Can We Help Refugees to Effectively Manage Strong Emotions?

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Cross-Sectional and Observational Studies

Longitudinal Research

Experimental Studies

Intervention Development
Building an Evidence Base

- Testing specific psychological strategies in pre-clinical studies
- Developing psychological interventions that target mechanisms
  - E.g. Skills Training in Affective and Interpersonal Regulation (Cloitre et al., 2010, Am J Psychiatry)
- Need more evidence to identify and understand key processes
## Acknowledgments

Thank you to...

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