Background

- Over 110 million individuals are forcibly displaced from their homes, creating a global refugee crisis.
- Resettled refugees in the United States are historically underserved and understood.
- Nearly 15,000 Afghan refugees are currently in the Houston area, according to local resettlement agencies, making up one of the largest percentages of resettled refugees locally.
- Understanding the specific needs of each unique refugee population is crucial for improving health outcomes via individual, local, and national support.
- Insecure residency status and limited access to services, work, and education worsens refugee mental health.
- Refugees may avoid mental health services due to stigma or lack of trust in and knowledge of services.

Objective

- To assess levels of mental distress, substance use, and utilization of mental health services in an Afghan refugee community in Houston, Texas.

Methods

- 74 Afghan Refugees were surveyed via interpreter (77% female, 23% male; age range 30-59 years)
- Participants attended several physical or emotional symptoms and distress levels as outlined by the Refugee Health Screener-15 (RHS-15). RHS-15 is a widely used and validated tool for mental health screening in refugees that has been translated into many languages.
- An average score of ≥ 0.88 on the RHS-15 was considered positive for a high risk of PTSD and/or MDD.
- A self-reported distress score ≥ 5 (out of 10) indicated a clinically significant level of distress.
- Participants assessed utilization of mental health services and substance use.

The Refugee Health Screener-15

<table>
<thead>
<tr>
<th>SYMPTOMS</th>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
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</thead>
<tbody>
<tr>
<td>1. Muscle, bone, joint pain</td>
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<td>2. Feeling down, sad, or blue most of the time</td>
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<td>3. Too much thinking or too many thoughts</td>
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<td>4. Feeling hopeless</td>
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<td>5. Usually scared for no reason</td>
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<tr>
<td>6. Fainting, dizzy, or weakness</td>
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<tr>
<td>7. Nervousness or quickness inside</td>
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<tr>
<td>8. Feeling cold, can’t keep warm</td>
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<tr>
<td>9. Crying easily</td>
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</tbody>
</table>

0. Generally not true
1. Slightly or a little true
2. More or a moderate true
3. Much or most true
4. Totally or absolutely true

ADD TOTAL SCORE OF ITEMS 1-14: ___
CIRCLE ONE: SCREEN NEGATIVE SCREEN POSITIVE

RHS-15 is a widely used and validate tool for mental health screening in refugees that has been translated into many languages. This Afghan refugee population demonstrates theoretical rates of PTSD and depression higher than the average American. Although tobacco use was slightly lower than the national average, there is still a need for intervention and education in current tobacco users.

The discrepancy between RHS-15 scores and perceived need suggest a personal knowledge gap regarding when and how one should seek mental health care.

Possible future steps include connecting culturally-competent psychiatric services with the community, psychiatric home visits, and community-based approaches.

The Distress Thermometer

The Distress Thermometer

- A positive RHS-15 score was present in 38.7% of the adult population.
- 35% of participants reported a distress score ≥ 5.
- At least 10% of this population likely needs mental health services but does not believe they need help.
- Parents perceived their children to be less in need of mental health services than themselves.
- Tobacco use was reported by 16.7% (slightly lower than the national average), all who reported using cigarettes.

Mental Health Service Need and Utilization in an Afghan Refugee Community

Over a third of Afghan refugees qualified as high risk for PTSD and depression on the RHS-15.

However, only 10.7% have utilized mental health services in the past 12 months.

And only 10.7% who did not use those services reported having needed them.

References


Key Findings

Over a third of Afghan refugees qualified as high risk for PTSD and depression on the RHS-15.

However, only 10.7% have utilized mental health services in the past 12 months.

And only 10.7% who did not use those services reported having needed them.

Figure 1. Self-reported utilization and perceived need of mental health services in the past 12-months of Afghan refugees and their children.

<table>
<thead>
<tr>
<th>Had Used Mental Health Services n (%)</th>
<th>Had Not Used Mental Health Services and Needed Them n (%)</th>
<th>Had Not Used Mental Health Services and Did Not Need Them n (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adults</td>
<td>6 (10.7%)</td>
<td>6 (10.7%)</td>
</tr>
<tr>
<td>Children</td>
<td>0%</td>
<td>4 (11.1%)</td>
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</tbody>
</table>

Conclusions

- This Afghan refugee population demonstrates theoretical rates of PTSD and depression higher than the average American.
- Although tobacco use was slightly lower than the national average, there is still a need for intervention and education in current tobacco users.
- A self-reported distress score ≥ 5 (out of 10) indicated a clinically significant level of distress. The Distress Thermometer

Acknowledgements

- This project could not have been completed without the excellent interpretation services of Manisha and Sameer, community connections of The Alliance Wellness Center, and the support of Sophia Banu and the Clinic for International Trauma Survivors.

Figure 1. Self-reported utilization and perceived need of mental health services in the past 12-months of Afghan refugees and their children.