

2018

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Mushtaba Yuridullah
University of Vermont

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Recommended Citation

Yuridullah, Mushtaba, "Depression Screening and Prevention Among VT Bosnian Refugees" (2018). *Family Medicine Clerkship Student Projects*. 347.

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DEPRESSION SCREENING & PREVENTION AMONG VT BOSNIAN REFUGEES

Mushtaba Yuridullah | UVMCOM MS3

Family Medicine Clerkship Project | Colchester, VT.

PROBLEM AND NEED

- **Problem:** Mental health and mental health disorders are stigmatized in our society today. Many people suffer from mental health disorders but are not willing to seek treatments due to various concerns. One big factor is lack of awareness about mental health disorders and brushing mental health issues as something “non-medical” or “all in your head.” This view is especially prevalent among our refugees and new immigrant communities.
- **Need:** There needs to be more awareness regarding mental health issues in our communities today and an emphasis on the true medical nature of mental health disorders and the availability of treatments.

PUBLIC HEALTH COST

- **1 in 5 Adults have a mental health condition.** That's over 40 million Americans
- **Public stigma** and lack of information plays a big factor in motivating individuals to avoid, fear and or reject treatment of their mental health disorders
- Individuals with mental health are more likely to experience discrimination in the workplace amounting to \$193 billion in lost earnings to companies per year
- Lack of adequate treatment can lead to devastating outcomes such as suicides or homicides
- In Vermont during the year 2015, the rate of suicide per every 100k individuals was 14.3
- This lack of awareness regarding mental health issues is especially prevalent in our new-immigrant communities

COMMUNITY PERSPECTIVE

- “There’s a need for mental health awareness in our Vermont refugee communities especially since many refugees come here escaping difficult situations back home. In terms of percentages, we have the highest number of refugees from the following three countries: Bosnia, Somalia, and Nepal.” – **Representative, Vermont Refugee Resettlement Office (VRRP). Winooski, VT**
- “The incidence of depression and PTSD is high amongst the Bosnian-American community living here in the Chittenden County. Many folks work multiple jobs in order to escape their mental disorders. There’s a big stigma against mental health and that needs to change. Mental disorder are seen as something not real.” – **Sanda Kukobat (Bosnian-American), CCA at Colchester Family Health. Colchester, VT**

INTERVENTION

- I propose developing an ad-campaign that aims to not only raise awareness regarding mental health issues – (namely depression in this project), but also puts an emphasis on the true medical nature of the disorder and the availability of treatment options.
- The project will aim to develop targeted ad-campaigns in the Chittenden County of Vermont, USA that are aimed at our local immigrant populations, more specifically our largest local immigrant population – our Bosnian-American friends and neighbors.
- First, I conducted a literature review to understand the impact of depression and the public health impact of mental health disorders such as depression on wider-communities.
- Second, I met with local area refugee representatives and got their input on the usefulness of such a project. I then found out which communities are in most need. I did that by getting the raw estimates of the number of different refugee populations living here in Vermont today. I then created a poster using Adobe Photoshop that aims to raise awareness about depression and translated the English version into Bosnian with the help of a local Bosnian translator.

METHODOLOGY AND RESULTS

- **Methodology:** The campaign will feature an ad outlying the screening PHQ-2 depression questionnaire that is translated into Bosnian
- The ads will be designed to reach maximum audiences and will be displayed in local clinics and at the Vermont Refugee Resettlement Program offices (VRRP) in Winooski, VT.
- **Results:** The poster was shown to local representative, and the responses from local area refugee representatives and community health workers were very positive
- Providers and local area refugees councilors feel positive that the campaign will deliver on its promise of raising awareness regarding mental health issues in the local Bosnian-American community and helping them identify their most vulnerable individuals

RESULTS CONTINUED



SYMPTOMS OF DEPRESSION

Over the last two weeks how often have you been bothered by any of the following problems?

Little interest or pleasure in doing things
Feeling down depressed or hopeless

HELP IS AVAILABLE
Talk to your doctor

KEY FACTS:
Depression is a common mental disorder
More women are affected by depression than men
At it's worst, depression can lead to suicide
There are effective treatments for depression

Poster: English Version



SIMPTOMI DEPRESIJE

U poslednje dve nedelje, koliko vam cesto uznemiravaju neki od sledecih problema?

Malo interesovanja ili zadovoljstva u vršenju stvari
Osjećanje, depresija ili beznačajnost

POMOC POSTOJI
razgovarajte svojim doktorom

KLJUCNE CINJENICE:
Depresija je uobicajeni mentalni poremećaj
Žene su više pogođene depresijom nego muškarci
U najgoroj slučaj, depresija može dovesti do samoubistva
Efikasni tretmani postoje za depresiju

Poster: Bosnian Version – On Display

EVALUATIONS AND LIMITATIONS

- **Evaluating Effectiveness:** Quantifying new patient encounters and administering a quick patient feedback form inquiring about the patient's knowledge of the ad-campaign and whether it was instrumental in motivating them to seek medical help
- Gathering qualitative feedback from local refugee councilors and staff at the VRRP regarding the effectiveness of the ad-campaign and avenues for improvement
- **Limitations:** Reaching target audience; not feasible to continuously monitor audience feedback and effectiveness
- Posters, while effective and eye-catching can still miss to target their audiences. Some might overlook the poster and not pay much attention to it. While the aim was to create an effective poster, that limitation does exist. The aim has been to create an effective minimalist design with the most important information and few words to get the point across. The hope is that the poster will relay it's message across effectively and succinctly

FUTURE DIRECTIONS

- There are several directions that this project can take. One idea brought on by the staff members at the VRRP office in Winooski, was to survey and interview refugees regarding mental health and to find out about the various ways that they use in order to deal with their issue in their cultures and communities. The idea is that in many different cultures, depression and mental health can manifest in different ways/symptoms. For example, as Sanda Kukobat of Colchester Family Practice astutely pointed out, many Bosnians in her community work multiple jobs and night-shifts in order to stay busy and create an avenue to escape their PTSD and other mental health problems. Gathering such information can be effective in not only creating future ad-campaigns that better target our audiences but also in understanding our culturally rich and diverse patient populations so that we can better serve them.
- Another possible direction could be raising awareness through social media and blog-posts. Raising awareness regarding mental illness and availability of treatments. Many folks today are quiet active on the social media front and using that medium can potentially broaden our reach.

REFERENCES

1. **American Psychiatric Association. Task Force on DSM-V.** Diagnostic and Statistical Manual of Mental Disorders: DSM-V. 5th ed. Washington, D.C.: American Psychiatric Association; 2013.
2. **Prevalence of and risk factors for mental disorders in refugees.** Giacco D, Laxhman N, Priebe S. Semin Cell Dev Biol. 2017 Nov 25
3. **Elucidating postpartum depression through statistics** Rubin, Leah H et al. The Lancet Psychiatry , Volume 2 , Issue 1 , 6 – 8
4. **Posttraumatic stress disorder and comorbid depression among refugees: Assessment of a sample from a German refugee reception center.** Belz M, Belz M, Özkan I, Graef-Calliess IT, Transcult Psychiatry. 2017
5. **Depression Fact Sheet.** WHO | Depression 2017
<http://www.who.int/mediacentre/factsheets/fs369/en/>
6. **Mental Health Fact Sheet – Mental Health in America**
<http://www.mentalhealthamerica.net/issues/state-mental-health-America>. Accessed December 20th 2017
7. **Screening for Depression – American Family Physician**
<https://www.aafp.org/afp/2012/0115/p139.html>. Accessed January 6th 2018
8. **Vermont Scoreboard | Vermont Dept. of Health**
<http://www.healthvermont.gov/scorecard-mental-health>. Accessed January 4th 2018