Equator Evaluation Study

No registrations found.

Ethical review Positive opinion **Status** Recruiting

Health condition type -

Study type Interventional

Summary

ID

NL-OMON24709

Source NTR

Brief title

N/A

Health condition

treatment effectiveness; mental health; refugees; social integration Behandel effectiviteit; psychische gezondheid; vluchtelingen; sociale integratie

Sponsors and support

Primary sponsor: AMC De Meren

Source(s) of monetary or material Support: European Refugee Fund

Intervention

Outcome measures

Primary outcome

1. Mental health:

Impact of Event Scale-Revised (IES-R) (Weiss & Marmar, 1997).

T0: start of intervention

T1: end of intervention (T0 + 6 months)

T2: 3-months follow-up

T3: 6-months follow-up

Method: Assisted self administering using a structured questionnaire. Questionnaire is translated in the mothertongue of the respondent.

Complete questionnaire:

- A. Diagnostics:
- a. Psychopathology (MINIPlus; Sheehan et al., 1998)
- b. PTSS (CAPS; Blake et al., 1995);
- B. Socio-demographics: Traumatic Events (SLE-Equator; questionnaire developed for this particular study);
- C. Mental Health:
- a. Impact of Events (IES-R; Wess & marmar, 1997)
- b. Anxiety and depression symptoms (HADS; Zigmond & Snaith, 1983)
- c. Disability and wellbeing (MOS-sf-36; Ware et al., 1996)
- d. Somatic complaints (SHC; Eriksen, Ihleback & Ursin, 1999)
- D. Social Integration:
- a. Social Capital (ASCAT; McKenzie, 2006)
- b. Social Support (SSL-I; van Sonderen, 1993)
- c. Acculturation questionnaire (LAS; Mooren et al., 2001)
- d. Loneliness (questionnaire developed for this particular study)
- e. Frequency and quality of interaction/communication (questionnaire developed for this particular study)
- E. Patient satisfaction

Secondary outcome

Study description

Background summary

Suffering from mental health problems constitutes a major obstacle for successful integration into Dutch society for refugees. The majority of refugees reports one or more psychiatric disorders, often related to previously experienced traumatic events. To those refugees whose problems are of such severe nature that mental health treatment is indicated, AMC De Meren offers the Equator day care treatment. Equator day care treatment aims at the decrease of trauma related mental health problems. Moreover, the treatment aims at strengthening the patient's self relience, and offers techniques for the improvement of social (re)integration. This study has the objective to evaluate Equator day care treatment and to define factors effecting treatment effectiveness. Consequently the study hopes to increase the body of knowledge with respect to the relationship between mental health and social integration. The research questions of the study are:

- 1) What is the relationship between mental health and social integration?
- 2a) What are the short and long term effects of the Equator day care treatment on the mental health of refugees?
- 2b) What are the short and long term effects of refugees of the Equator day care treatment on the social integration ?

In this study 30 Equator day care patients and 30 refugees from the general population are assessed on indicators of mental health and social integration over a 1 year period.

Study objective

General hypothesis of the study is that the Equator day care treatment results in a significant improvement on indicators of mental health and social integration, compared to a control group consisting of respondents that did not receive Equator day care treatment.

Intervention

Equator day care treatment is a three days a week group intervention over a 6 months period. Patients of Equator day care treatment are adult refugees with severe trauma related mental health problems. Per year, around 40 refugee patients attend the Equator day care treatment. Most patients are men (+/- 70%), as most refugees in The Netherlands are men. The background of these patients are Afghan, Irakese, Iranese, Sierra Leonese, Rwandese, Burundese, Angolese, Somalian etc.

The treatment integrates a psychiatric and a community approach to mental illness. The psychiatric approach aims at stabilizing the mental health status and regaining control over affect and behaviour. Medication is central in this approach. Individual counseling with a psychologists or psychiatrist has a supporting nature. If indicated a psychotherapeutic or trauma focused therapy is started. The community approach consists of a sociotherapeutic

intervention. This intervention aims at increasing social functioning. The therapeutic environment helps in regaining a basic sense of security.

The control group will be sampled from the adult refugee population living in the Netherlands. The control group will be matched on sex, ethnicity and living area.

Contacts

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Eligibility criteria

Inclusion criteria

Treatment group: Equator day care patients

Control group: refugees in population, matched on sex, age, etnicity and living area.

Exclusion criteria

- 1. Disturbed reality testing;
- 2. Mentally retardation;
- 3. No residence permit;

4. Simultaniously receiving comparable mental health treatment.

Study design

Design

Study type: Interventional

Intervention model: Parallel

Allocation: Non-randomized controlled trial

Masking: Open (masking not used)

Control: N/A, unknown

Recruitment

NL

Recruitment status: Recruiting
Start date (anticipated): 14-08-2006

Enrollment: 60

Type: Anticipated

Ethics review

Positive opinion

Date: 16-02-2007

Application type: First submission

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register ID

NTR-new NL659
NTR-old NTR910
Other : N/A

ISRCTN ISRCTN52861559

Study results

Summary results

N/A