Effectiveness of an intercultural module added to the treatment guidelines for Moroccan and Turkish migrants with depressive and anxiety disorders.

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The main objective is to optimalize the treatment of Moroccan and Turkish patients with depressive and/or anxiety disorders by increasing the cultural competence of the mental health workers who treat these patients. The mental health workers will...

Ethical review	Approved WMO
Status	Recruitment stopped
Health condition type	Other condition
Study type	Interventional

Summary

ID

NL-OMON33808

Source ToetsingOnline

Brief title

Moroccan an Turkish migrants with depression and anxiety / MIDA .

Condition

- Other condition
- Psychiatric disorders

Synonym depression and anxiety

Health condition

tevens angststoornissen

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Research involving

Human

Sponsors and support

Primary sponsor: GGZ Buitenamstel (Amsterdam) Source(s) of monetary or material Support: ZonMw

Intervention

Keyword: anxiety disorder, cultural competence, Depressive disorder, migrants (Turkish and Moroccan), treatment guidelines

Outcome measures

Primary outcome

Drop-out is the primary outcome measure. Drop out is defined as :not attending follow up sessions against the advise of the therapist. Therapists and doctors will try to motivate the patients and if they do not visit the clinic, try to make a new appointment twice. If they do not succeed in motivating the patient, the therapists will register the drop-out in the electronic patient dossier (EPD).

Secondary outcome

From the Electronic Patient Dossier no-show and the treatment modalities that

have been offered, will be extracted . Additionally we will administer the

Nivel Consumers Panel Questionnaire on Trust in Mental Health Care), the

Perceived Needs for Care Questionnaire (Meadows).

To assess determinants of drop-out we will administer the following questionnaires: WHO-DAS II (WHO disability assessment schedule), Social support (Close Person Inventory), Acculturation (Lowlands Acculturation Scale), Discrimination (from the *National Survey of Midlife Development in the United States*), severity of anxiety and depression symptoms(IDS and BAI). Most of

these questionnaires were used in the 'Amsterdamse Gezondheidsmonitor ' and

are translated in Turkish and Arabic.

Study description

Background summary

Since the sixties of the last century, many people from Morocco and Turkey have come to work and live in the Netherlands. It has been found that depression and anxiety symptoms are very common among these immigrants. In the last decade, Moroccan and Turkish patients have found their way to organizations for mental health care. However, they often drop-out from treatment, and therefore they do not receive adequate treatment as proposed in treatment guidelines for depressive and anxiety disorders . If not adequately treated, they have a higher risk to develop a chronic course of the depressive and anxiety disorders, leading to long term disabilities in daily functioning. Problems in the communication with the therapists and different expectations regarding treatment seem to be causal factors for the early drop- out from therapy .

Study objective

The main objective is to optimalize the treatment of Moroccan and Turkish patients with depressive and/or anxiety disorders by increasing the cultural competence of the mental health workers who treat these patients. The mental health workers will be trained in the cultural interview and in techniques bridging the (cultural) gaps between them and their patients. We hypothesize that this intercultural module for mental health workers will result in a decrease in the drop-out percentages.

We will also study whether the patients in the intervention condition will be offered more often evidence based treatment modalities than patients in the control condition, and we will compare treatment effectiveness in both conditions.

Study design

A randomized clinical trial will be performed.

Intervention

Therapists will be trained in an intercultural module. They will learn about Turkish and Moroccan cultural aspects, and will practice in using the Cultural

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Formulation. They will also be trained in working with a translator. Furthermore attention will be payed to the existing Dutch intercultural addenda to depression and anxiety treatment guidelines.

Study burden and risks

This research carries no specific risks for the participants . They will have to fill out several questionnaires.

Contacts

Public GGZ Buitenamstel (Amsterdam)

AJ Ernststraat 887 1081 HL Amsterdam NL **Scientific** GGZ Buitenamstel (Amsterdam)

AJ Ernststraat 887 1081 HL Amsterdam NL

Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age Adults (18-64 years) Elderly (65 years and older)

Inclusion criteria

Patients of Turkish and Moroccan origin with depressive and/or anxiety disorders (age 18-65)

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Exclusion criteria

organic brainsyndrome, psychotic disorder, bipolar disorder, severe personality disorder (cluster A personality , antisocial-, borderline personality disorder, alcohol abuse and dependence as a main diagnoses.

Study design

Design

Study type:	Interventional
Intervention model:	Parallel
Allocation:	Randomized controlled trial
Masking:	Single blinded (masking used)
Control:	Active
Primary purpose:	Treatment

Recruitment

MI

Recruitment status:	Recruitment stopped
Start date (anticipated):	04-01-2010
Enrollment:	150
Туре:	Actual

Ethics review

Approved WMO	
Date:	02-11-2009
Application type:	First submission
Review commission:	METC Amsterdam UMC

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 Other CCMO ID is aangevraagd NL26186.029.09