

Identifying Barriers: Interpreting the EPDS for Refugees

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Introduction

- Refugees: Our Global Burden
 - Definition:
 - 90% of the refugees resettle in the US, Canada, and Australia
- Mental Health and Refugees
 - Acculturation Priority
 - Reactions that stressors bring about
 - Mental Health Screenings
 - Recommended by the United States Preventative Services Task Force
 - Patient Health Questionnaire-9 (PHQ-9)
 - Refugee Health Screener-15 (RHS-15)
 - Edinburgh Postpartum Depression Scale (EPDS)

Background

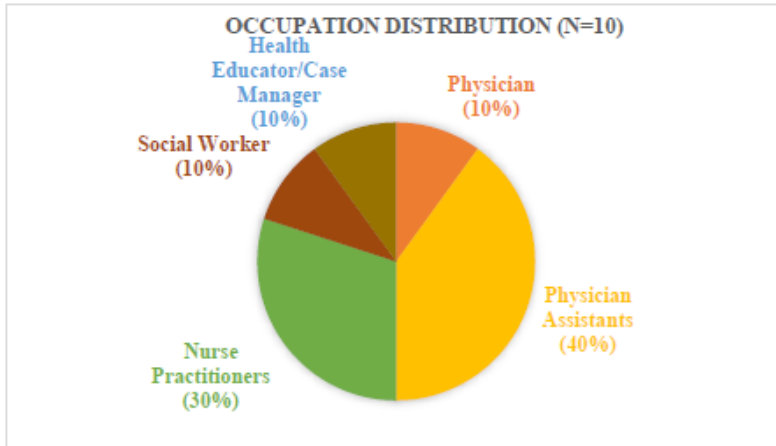
- Edinburgh Postpartum Depression Scale (EPDS)
 - Clinton Family Clinic-Women's Center
 - Concerns with validity in regards to the Refugee Population
- Identifying potential barriers
 - Health Care Workers
 - Interpreters
- Assess Effectiveness
 - Patient Follow-up Analysis

Methodology

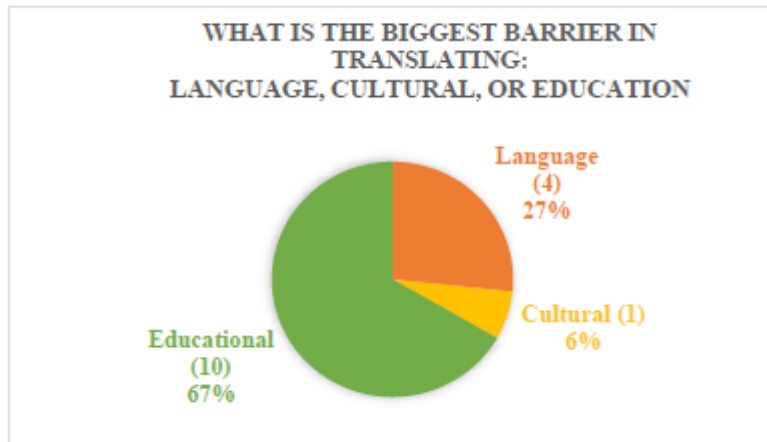
- Health Care Worker
 - surveyed weeks 2-4
- Interpreter Survey
 - Called Christian Family Center for interpreters
 - Interpreted: Spanish, Burmese, Nepali, and Karen
 - weeks 2-4
- Gathered patient information
 - Compared: age, diagnosis, medications, MH Services, Hx of Abuse
 - weeks 3 and 4
- Data was analyzed week 5



Results



Survey Questions	Never	Somewhat	Mostly	Always
The EPDS is reliable when administering it to my English speaking Patients? (n= 5)	0	2	3	0
The EPDS is reliable when administering it to my refugee, non-English speaking Patients? (n=4)	1	2	1	0



Survey Questions:	Yes	No	If yes, which questions
Have you ever interpreted the EPDS?	47% 7	53% 8	
Do you feel the EPDS is not culturally sensitive?	13% 2	87% 13	3 & 6
Is the EPDS difficult to translate due to lack of patient Education?	47% 7	53% 8	1, 2, 3, 4 & 6 *Note: 6 was a response 3 times
Do you feel the EPDS is difficult to translate because of Language barriers?	33% 5	67% 10	1, 3, 4, & 6 *Note: 6 was a response 2 times

Discussion

- Health Care Workers: results were questionable with the Refugee patients
- Interpreters: Lack of Patient education was the biggest barrier
 - Other challenges
 1. Explaining concepts: difficult and time consuming (Examples)
 2. Answer choices were challenging to interpret
- Screening ability: there was no difference between Refugee and non-Refugee

Recommendations

- Investigate cases of depression where the patients had a low EPDS score
- Repeat study in other locations
 - To eliminate the possibility that difficulties in interpreting the EPDS is unique to the Clinton Family Clinic Women's Center



Conclusion

- Usage of Depression Screening tools should be encouraged to Health Care Workers
- Barriers such as Language, Patient Education, & Cultural Sensitivity should be kept in mind with the EPDS (for Refugee Patients)

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