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

OCCUPATION DISTRIBUTION (N=10)
- Health Educator/Case Manager (10%)
- Social Worker (10%)
- Nurse Practitioners (30%)
- Physician Assistants (40%)
- Physician (10%)

WHAT IS THE BIGGEST BARRIER IN TRANSLATING: LANGUAGE, CULTURAL, OR EDUCATION
- Language (4) 27%
- Educational (10) 67%
- Cultural (1) 6%

Survey Questions
<table>
<thead>
<tr>
<th>Survey Questions</th>
<th>Never</th>
<th>Somewhat</th>
<th>Mostly</th>
<th>Always</th>
</tr>
</thead>
<tbody>
<tr>
<td>The EPDS is reliable when administering it to my English speaking Patients? (n=5)</td>
<td>0</td>
<td>2</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>The EPDS is reliable when administering it to my refugee, non-English speaking Patients? (n=4)</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>0</td>
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</tbody>
</table>

Survey Questions:
- Have you ever interpreted the EPDS? 47% Yes, 7% No
- Do you feel the EPDS is not culturally sensitive? 13% Yes, 2% No
- Is the EPDS difficult to translate due to lack of patient Education? 47% Yes, 7% No
- Do you feel the EPDS is difficult to translate because of Language barriers? 33% Yes, 5% No

*Note: 6 was a response 3 times

*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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