

Adolescent refugees and mental health

Can a new intervention, delivered by lay providers, improve the psychological wellbeing of young Syrian refugees?

Trialling a new approach in Jordan

The World Health Organization has developed a new brief group program called Early Adolescent Skills for Emotion (EASE). This group-based intervention provides 7 group sessions to teach young people skills to enhance psychological coping with depression, anxiety, and distress, and also includes 3 sessions focused on parents/caregivers.

This trial showed that EASE can reduce internalizing problems in young adolescent Syrian refugees when delivered by lay providers, which is significant as internalizing is a particular cause of psychological distress in young people. It suggests parenting interventions should be explored further. EASE did not reduce overall distress, suggesting more work is needed to assist refugee adolescents.



An EASE training session for lay providers in Jordan. Credit: Study team

Background

Young adolescents in countries affected by humanitarian crises are significantly more at risk of mental health problems. There is a need for scalable interventions that can improve the mental health of young adolescents in poorly resourced settings, where there is usually limited access to specialist mental health services. This trial was set in Jordan where 1.3 million Syrian refugees live. A high percentage of Syrian refugees in Jordan are children or adolescents. This trial tested a new program developed by the World Health Organization called Early Adolescents Skills for Emotions (EASE) that is delivered by lay providers.

How the research was conducted

A randomized controlled trial was conducted of Syrian refugees in Amman aged 10-14 years. Adolescents were identified through after household screening in Amman, and 471 who indicated psychological distress were enrolled into the trial. Adolescents and their caregivers received either the EASE program or Enhanced Usual Care (involving referral to local services) and were assessed before, after, and 3 months after the program.

Key findings

- The trial indicated that EASE can achieve moderate reductions in internalizing problems in young adolescents 3 months after the program, which was greater than observed in Enhanced Usual Care. Despite this, EASE did not lead to greater reductions in overall psychological distress or in externalizing problems in adolescents.
- EASE also led to greater reduction in caregivers' psychological distress and greater reductions in inconsistent disciplinary parenting at 3 months compared to caregivers who received Enhanced Usual Care
- For participants in EASE, the greater reductions in inconsistent disciplinary parenting was associated with greater reductions in internalising problems. This suggests that a key factor in reducing internalising problems in adolescents may be improved parenting behaviour in the caregivers.

Implications for humanitarian practitioners and policymakers

- EASE may represent a viable means for agencies to address mental health problems, and particularly internalising problems, in young adolescents in the context of humanitarian crises. This is a significant contribution because internalising is a major form of psychological distress in young people.
- The important advantage of EASE is that it can be trained to lay providers in 8 days, allowing for scale-up in poorly resourced agencies.
- This trial was conducted during the COVID-19 pandemic and EASE needs further testing to determine if it can improve overall psychological distress in other studies.
- The finding that improved parenting was associated with better emotional wellbeing in their children suggests policymakers may consider the benefits of parenting programs. The utility of parenting programs need to be fully evaluated in these settings.
- EASE did not reduce overall distress, suggesting more work is needed to assist refugee adolescents.

Recommendations for future research

There is a strong need for replication research to test the effectiveness of EASE. There is also an urgent need to evaluate the role of parenting programs that can reduce maladaptive parenting behaviours, such as using inconsistent discipline, as a means of achieving better mental health in young adolescents.

About the study team

The project was a collaboration between the University of New South Wales (Australia), the Institute for Family Health- Noor Al Hussein Foundation (Jordan), and the World Health Organization, along with the support of other agencies and investigators who contributed to testing the program.

The Principal Investigator was Professor Richard Bryant.

Keywords

Young adolescents; mental health; task-shifting; parenting; controlled trial

Articles and further reading

Project page on Elrha website:
<https://www.elrha.org/project/evaluation-scalable-interventions-improve-mental-health-syrian-refugee-youth/>



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<http://www.elrha.org/programme/research-for-health-in-humanitarian-crises/>