Online guided self-help intervention for refugees proves effective

This randomised controlled trial, with Syrian refugees in Lebanon, took place during the COVID-19 pandemic.

First trial to show effectiveness of a digital self-help psychological intervention for depression in refugees

The World Health Organization (WHO) and partners developed ‘Step-by-Step’, a digital intervention targeted at supporting adults suffering from depression. This trial tested Step-by-Step with Syrian refugees in Lebanon through a partnership with the National Mental Health Programme.

Results show that those who used Step-by-Step experienced improved mental health. The intervention should be culturally adapted to be most effective, which requires formative research. WHO and partners continue to adapt, test and pilot Step-by-Step in a range of settings.

Background

Among people affected by humanitarian crisis, mental health conditions such as depression and anxiety often go untreated. In Lebanon, evidence suggests increasing mental health conditions among the large Syrian refugee population, with improved but limited access to services. Global guidelines recommend the use of self-help psychological interventions for depression, and as access to smartphones increases, online channels may be able to provide low-cost, accessible mental health treatment.

Step-by-Step is an online 5–8-week self-help programme accessed through an app or website. It uses a narrated illustrated story to teach users skills for coping with symptoms of depression, such as stress management and behavioural activation. Guidance for users is provided by non-professional "e-helpers" for 15–20 minutes per week via phone or email.

How the research was conducted

An RCT was conducted with 569 Syrian displaced people in Lebanon. Participants with symptoms of depression were randomised to receive Step-by-Step or enhanced usual care. Feasibility, acceptability and (cost) effectiveness of the intervention were assessed. A separate parallel trial was conducted testing Step-by-Step with Lebanese and other populations in the country.

Key findings

- Participants who received Step-by-Step showed improvements on primary outcomes—depression and functional impairment, compared with the control group.
- The intervention received positive feedback from users and other stakeholders.
- Step-by-Step appeared to be a cost-effective treatment option for Lebanon’s healthcare system.

An ‘e-helper’ provides support over the phone.
Credit: Sally Khoury.
Implications for humanitarian practitioners and policymakers

- This randomised controlled trial demonstrates that Step-by-Step can contribute to improve mental health among Syrian refugees in Lebanon, and potentially other communities affected by adversity in humanitarian or low-income settings.

- It is important that Step-by-Step is culturally adapted to ensure that language, local idioms, etc. support the effectiveness of the intervention. For example, the ‘helper’ who appears in the Step-by-Step narrative is currently a doctor, but this will not always be appropriate.

- A countrywide implementation project for all people in Lebanon is currently underway to further understand how to implement and scale up Step-by-Step. Step-by-Step is now being provided as a free-to-access national programme in Lebanon, reaching nearly 2000 people in the first 18 months of implementation.

- Step-by-Step was found to support people with depressive symptoms in a context of adversity. Some people will require specialist care and it is recommended that the intervention is implemented in an integrated mental health system with referral options to specialist support.

Recommendations for future research

Implementation research will provide insights on various sustainable implementation models of Step-by-Step in different humanitarian settings.

Keywords

Mental health; Syria; Lebanon; refugees; mobile health; humanitarian response; mobile technology; depression

About the study team

This study was a partnership between the WHO; the National Mental Health Programme (NMMP) at Ministry of Public Health (MoPH) in Lebanon; International Medical Corps (IMC); VU University Amsterdam; United Nations High Commissioner for Refugees (UNHCR); AFMM & St Joseph University, Lebanon; University of Zurich, Freie Universität Berlin. The Principal Investigator was Mark van Ommeren, World Health Organisation.

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Articles and further reading


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