Refugee Mental Health

It is estimated that about 1% of the world’s population has been displaced either from their home or from their home country. In addition to physical injury, these persons are at high risk for chronic mental health disorders because of the multiple stressors they experience before, during, and after their flight. They are at particularly high risk for posttraumatic stress disorder (persisting recurrent and disturbing memories and flashbacks of a witnessed or experienced trauma, along with other symptoms such as difficulty sleeping, feeling detached from people and current experiences, and exaggerated startle responses), depression, and somatization (emotional trauma or stress experienced as physical symptoms).

Refugees are persons who flee their home country to a different country to escape conflict. The term refugee includes asylum-seekers (individuals who are forced to leave their country to avoid persecution often due to political or religious beliefs). Internally displaced persons are persons who are forced to leave their home and move to a new site within their home country. The August 3, 2005, issue of JAMA is a theme issue devoted to articles on violence and human rights and includes articles about mental health problems in refugee populations.

RISK FACTORS

Experiencing or witnessing traumatic events is a major risk factor for mental health problems.

The presence of the following factors before flight may be associated with poorer mental health outcomes:
- Being unprepared for trauma and refugee status
- Older age
- Higher socioeconomic status
- Higher level of education
- Female sex
- Living in a rural area

The presence of the following factors after flight may be associated with poorer mental health outcomes:
- Unstable living arrangements
- Lack of economic opportunity in the new living situation
- Internal displacement
- Return to the country from which the refugees fled
- Lack of resolution of the conflict from which they fled

DIAGNOSIS AND TREATMENT

In addition to treating any medical conditions that may have developed prior to or during flight from conflict, doctors treating refugees will ask about the presence of physical symptoms including pain, loss of appetite, and difficulty sleeping and also about the presence of emotional symptoms. Because these mental health conditions may be severe and long-lasting, specialized treatment may be required and can be located through the organizations listed in the sidebar.

Source: United Nations High Commissioner for Refugees

FOR MORE INFORMATION

- United Nations High Commissioner for Refugees
  www.unhcr.ch
- Centers for Disease Control and Prevention
  International Emergency and Refugee Health Branch
  888/232-6789
  www.cdc.gov/nceh/ierh
- United States Department of Health and Human Services Office of Refugee Resettlement
  202/401-9246
  www.acf.dhhs.gov/programs/orr
- Doctors Without Borders
  www.doctorswithoutborders.org
- United States Committee for Refugees and Immigrants
  www.refugees.org

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To find this and previous JAMA Patient Pages, go to the Patient Page link on JAMA’s Web site at www.jama.com. Many are available in English and Spanish. A Patient Page on posttraumatic stress disorder was published in the August 1, 2002, issue.

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