Seminars in Cell & Developmental Biology xxx (2017) xxx–xxx

Contents lists available at ScienceDirect

Seminars in Cell & Developmental Biology

journal homepage: www.elsevier.com/locate/semcdb

Review

Prevalence of and risk factors for mental disorders in refugees

Domenico Giacco*, Neelam Laxhman, Stefan Priebe

Unit for Social and Community Psychiatry (WHO Collaborating Centre for Mental Health Service Development), Queen Mary University of London, London, United Kingdom

ARTICLE INFO

Article history:
Received 16 May 2017
Received in revised form 3 November 2017
Accepted 21 November 2017
Available online xxx

Keywords:
Refugees
Prevalence
Risk factors
Mental disorders

ABSTRACT

Given the increasing numbers of refugees worldwide, the prevalence of their mental disorders is relevant for public health.

Prevalence studies show that, in the first years of resettlement, only post-traumatic stress disorder (PTSD) rates are clearly higher in refugees than in host countries' populations. Five years after resettlement rates of depressive and anxiety disorders are also increased.

Exposure to traumatic events before or during migration may explain high rates of PTSD. Evidence suggests that poor social integration and difficulties in accessing care contribute to higher rates of mental disorders in the long-term.

Policy and research implications are discussed.

Contents

* Corresponding author at: Newham Centre for Mental Health, Glen Road, E13 8SP, London, United Kingdom.
E-mail address: d.giacco@qmul.ac.uk (D. Giacco).

https://doi.org/10.1016/j.semcdb.2017.11.030
1084-9521/

Please cite this article in press as: D. Giacco, et al., Prevalence of and risk factors for mental disorders in refugees, Semin Cell Dev Biol (2017), https://doi.org/10.1016/j.semcdb.2017.11.030

1. Introduction

According to the United Nations, a refugee is an individual who "owing to a well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group or political opinion, is outside the country of his nationality, and is unable to, or owing to such fear, is unwilling to avail himself of the protection of that country" [1].

The number of forcibly displaced people in line with this definition is increasing in the last decades due to wars and political instability in different parts of the world. Figures reported by the United Nations High Commissioner for Refugees (UNHCR) in 2016 [2] show that there are 65.3 million forcibly displaced people around the world; 21.3 million have achieved refugee status. Over half of them are under 18 years old. Ten million forcibly displaced people are currently stateless and many others are in process of applying for asylum. The extent of the current problem may be illustrated by another figure: UNHCR has estimated that 34,000 people are forcibly displaced every day and seek asylum and refuge in other areas or countries. These people are usually referred to as refugees in the media and common parlance, as well as in research studies, although many of them may not have obtained a formal refugee status. Obtaining formal refugee status takes time and sometimes unwieldy procedures, whilst people live in precarious conditions such as residing in refugee camps and/or being unable to work or find independent housing [3–5].

The increase in the number of forcibly displaced people may pose a substantial pressure on mental health services in the countries where they are hosted. In the first instance, the arrival of such high numbers of people in a short period of time requires an appropriate response in terms of ensuring their right to basic health care is met. Moreover, they are exposed to risk factors for their mental health before, during and after migration and often encounter barriers to accessing appropriate care once they have re-settled [3–5].

For the purpose of this review, we have focused on studies which addressed refugees as this population is more represented in the scientific literature than other groups such as asylum seekers and undocumented migrants. For a number of practical and legal reasons, the prevalence of and risk factors for mental disorders have been more extensively studied and established for refugees than for those other groups [3]. However, there is some evidence that asylum seekers, irregular migrants and stateless people share many risk factors for mental disorders and barriers to access care, and may experience additional traumatic events such as uncertainty about the right to stay in a country and detention in immigration removal centres [3].

Information on prevalence rates of, and specific risk factors for, mental disorders in refugees is needed to help policy planning and inform the provision of appropriate care in the host countries.

In this review, the evidence on prevalence rates for mental disorders in refugees is summarised, including psychotic disorders (F20-29) in the International Classification of Disease, [6], mood disorders (F30-39), anxiety, stress and somatisation disorders (F40-49) and substance use disorders (F10-19).

We summarised evidence from available systematic reviews and reports [3,7,8] and conducted a systematic search on papers published after a meta-analysis conducted in 2005 [7] using similar search terms in order to identify the most updated evidence. The Embase, Medline and PsychInfo databases were searched. The search was finalised in January 2017.

Most studies identified in the literature focused on prevalence rates of mental disorders in refugees who had arrived in a host country within the preceding five years (i.e. short-term resettled refugees). For each disorder, these studies are presented first, followed by those on refugees resettled for more than five years (long-term re-settled refugees). The latter show higher prevalence rates for some disorders, particularly depressive and anxiety disorders.

This is followed by an overview of risk factors for mental disorders to which refugees are particularly exposed.

Finally, policy and research implications for addressing mental health needs of refugees in the host countries are discussed.

2. Prevalence rates of mental disorders in refugees

Studies on refugees have found wide variability in the rates of mental disorders across different refugee groups. This variability may occur because the groups have different backgrounds and characteristics [7–9], and live in more or less supportive contexts within the given host country [10]. However, the findings may also reflect that the type and quality of research methodologies varies substantially across studies. In particular, some findings suggest that the sampling method is a relevant factor influencing the identified prevalence rates of mental disorders. When an opportunistic or convenience sample (i.e. a sample in which people have not been randomly selected from a larger population) is adopted, prevalence rates tend to be higher than in more representative samples. Overall, studies of higher methodological quality tend to show lower prevalence rates of mental disorders than studies of poorer quality [3,7,8]. Another problem is whether the current diagnostic systems can be adapted to the way individuals interpret, react and emotionally expresses their psychological suffering in different cultures. This can lead to emotional suffering being either overlooked or excessive medicalised in refugee populations. The assessment of psychological symptoms in refugee or migrant populations can also be made more difficult by language barriers. Research shows that when using native speaker researchers, the rates of mental disorders in refugees tend to be lower than when using non-native speaker researchers [7].

2.1. Psychotic disorders

Only two studies assessed rates of psychotic disorders in short-term resettled refugees [11,12]. These studies included Hmong people resettled in the United States [11] and Vietnamese people resettled in Norway [12]. About 2% of these refugees were diagnosed with a psychotic disorder.

One study on long-term resettled refugees in Western European countries from the Balkan wars found a prevalence of psychotic

Please cite this article in press as: D. Giacco, et al., Prevalence of and risk factors for mental disorders in refugees, Semin Cell Dev Biol (2017), https://doi.org/10.1016/j.semcdb.2017.11.030