

Stress Management versus Cognitive Restructuring: a randomised clinical study on traumatised refugees

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Presented as part of the symposium *From Pioneers to Scientists: Establishing Evidence-Gathering Models in Trauma Mental Health Services for Refugees* at The 31st Nordic Congress of Psychiatry in Copenhagen 2015 - 'Psychiatry works'.

ABSTRACT

There is a lack of evidence regarding which kind of psychotherapy that is the most effective when treating traumatised refugees. Studies on the effect of psychotherapy among other patient groups with PTSD suggest a good effect using Cognitive Behavioural Therapy (CBT). The Competence Center for Transcultural Psychiatry (CTP) has specialised in the treatment of traumatised refugees. Both research results and the clinical experience at CTP suggest that Cognitive Restructuring is not always a useful tool and that stress reducing techniques could be more useful. This hypothesis was tested in the present study.

The objectives were to study the effect of CBT with a focus on either Stress Management or Cognitive Restructuring in a clinical sample of traumatised refugees with PTSD and to identify predictors for the treatment effect. Methods: All patients (n=143) referred to CTP from June 2011 – March 2012 and fulfilling the inclusion criteria were offered to participate in the study. Participants were offered combined treatment with a psychiatrist (psycho-education and psychopharmacological treatment when needed) and a psychologist (CBT). The duration of the treatment was 6-7 months. The participants were randomised to either: CBT with a focus on Stress Management or CBT with focus on Cognitive Restructuring. The primary outcome was PTSD measured by the Harvard Trauma Questionnaire. The results are presently being analysed and will be presented at the symposia.

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