Idioms of Distress in Muslim Refugee Communities: A Literature Review and Training Project

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Abstract

Based on five years of volunteer work with refugee agencies and their clients in the Midwest and a six month project including training agency staff about idioms of distress from refugee clients, this poster explores the ways that health care providers often misunderstand the mental health needs of Muslim-identifying refugees. Given the paucity of literature about this population, this poster sheds light on idioms of distress for this community.

Methodology

1. Literature review on idioms of distress among communities served.
2. Survey to ascertain knowledge about barriers to care and confidence level in working with clients.
3. "Barriers to Care" and "Idioms of Distress" presentations to staff. Creation of one-page primers.
4. Post survey to gauge knowledge about barriers to care and belief that the presentations would help respondents to work with clients.

Introduction

This project had human subjects research approval from Case Western Reserve University and included a literature review and training intervention capstone project from June to December of 2016. After eliciting idioms of distress in the communities served, agency staff received training presentations to better support their refugee clients in their mental health care seeking behaviors.

Research Setting

1118 Afghan, Iraqi, and Syrian refugees resettled in Cuyahoga County between 2002 and the end of October, 2019. Refugees were resettled through three agencies including Us Together, Inc. Run by refugees for refugees, its Cleveland location also worked with Bhutanese and Congolese refugees at the time of this project.

Idioms of Distress

As defined by Mark Nichter in 1981, idioms of distress are adaptive responses or attempts to resolve a pathological situation in a culturally meaningful way. They can present as somatic complaints, possession, or other significant culturally bound experiences. Since they reflect and influence the stigma associated with illness, and stigma worsens the experience of an illness, it is important to know how to respond to these idioms for both agency staff and healthcare providers.

Respondents identified transportation, language, and different cultural contexts as barriers to accessing care. They also stated that in their belief, Iraqi and Syrian refugees refused to seek mental health care due to fear of being considered "crazy.

The range of confidence in recommending options to clients was "unconfident" to "very confident" which highlighted a need to provide basic options to staff for working with clients reticent to accessing mental health care.

Presentations

Both presentations were held onsite at the UST Cleveland office. The first "Barriers to Care" outline barriers to care from the literature using a case study of Lia Lee, whose experience was depicted in The Spirit Catches You and You Fall Down. This presentation ended with a discussion of the ways that UST is uniquely prepared to help their clients discuss their mental health concerns.

"Idioms of Distress" followed the first presentation and defined the term and outlined idioms commonly found among the communities that UST Cleveland served at the time. One page primers were provided to the staff.

Post Survey Results

After the presentations, UST staff responded to a survey to ascertain their new level of knowledge of barriers to care and idioms of care, as well as new confidence level with working with their clients. The respondents were all extremely satisfied with the presentations, were able to explain what an idiom of distress is, and were more confident in discussing clients’ concerns.

One Page Primers

Idioms of Distress in Afghan Refugees