



The  
CENTER for  
VICTIMS of  
TORTURE

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### **Randomized Control Trial Finds Mental Health Intervention During Primary Care Benefits Refugees**

**ST. PAUL, Minn.** — A new study published in BMC Family Practice by the Center for Victims of Torture™ (CVT) demonstrates the impact of providing intensive mental health services in primary care for refugees with depression.

The study, "[Intensive psychotherapy and case management for Karen refugees with Major Depression in primary care: a pragmatic randomized control trial](#)," is the first known trial of its kind.

"Despite an unparalleled global refugee crisis, there are almost no studies in primary care addressing real-world conditions and longer courses of treatment that are typical when resettled refugees present to their physician with critical psychosocial needs and complex symptoms," said Andrea Northwood, Ph.D., LP, CVT director of client services and lead author of the study.

Conducted over five years, the randomized control trial occurred in partnership with two St. Paul primary care clinics with substantial Karen refugee patient populations, M Health Fairview Clinic – Roselawn and M Health Fairview Clinic – Bethesda. Both clinics are known for providing exceptional care for refugee populations and were generous, ethical partners throughout the study.

"Several of my patients that received the embedded case management and psychotherapy services from CVT here at Roselawn Clinic were completely transformed. I saw their depression and PTSD symptoms improve dramatically and very meaningful improvements in their social functioning. It is great to see those anecdotal findings verified by the study results, and I hope this model expands to many other clinics," said Jim Letts, M.D., family physician at M Health Fairview Clinic – Roselawn and an author of the study.

The trial divided participants (n=214) into two groups; one received a year of intensive psychotherapy and case management provided by CVT clinicians in tandem with primary care administered at the clinics; the other group did not receive the CVT mental health intervention. As stated in the study's conclusion, "[a]dult Karen refugees with depression benefited from intensive psychotherapy and case management coordinated and delivered under usual

conditions in primary care. Intervention effects strengthened at each interval, suggesting robust recovery is possible.”

“Many Karen refugees fled extreme violence, war and torture. We know that for healing to occur, it is imperative that physical health, mental health and social functioning are all attended to. By co-locating CVT’s intensive behavioral health services at the primary care clinics where Karen refugees receive care, we were able to work with our primary care partners to attend to needs in a holistic, coordinated and streamlined way. Intervention at the right time and the right place can make a big difference in mental and physical health outcomes,” said Alison Beckman, MSW, LICSW, CVT senior clinician for external relations and an author of the study.

CVT’s work to apply a holistic, team-based approach to bring intensive care to Karen clients is known as “Healing Hearts, Creating Hope,” and today is an ongoing mental health services program. CVT also published a [toolkit](#) in March 2019 for providers to guide interactions with refugee patients.

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*The Center for Victims of Torture is a nonprofit organization headquartered in St. Paul, MN, with offices in Atlanta, GA, and Washington, D.C.; and healing initiatives in Africa and the Middle East. Visit [www.cvt.org](http://www.cvt.org)*