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Traumatized refugees, PTSD, function and ICF

# HoNOS

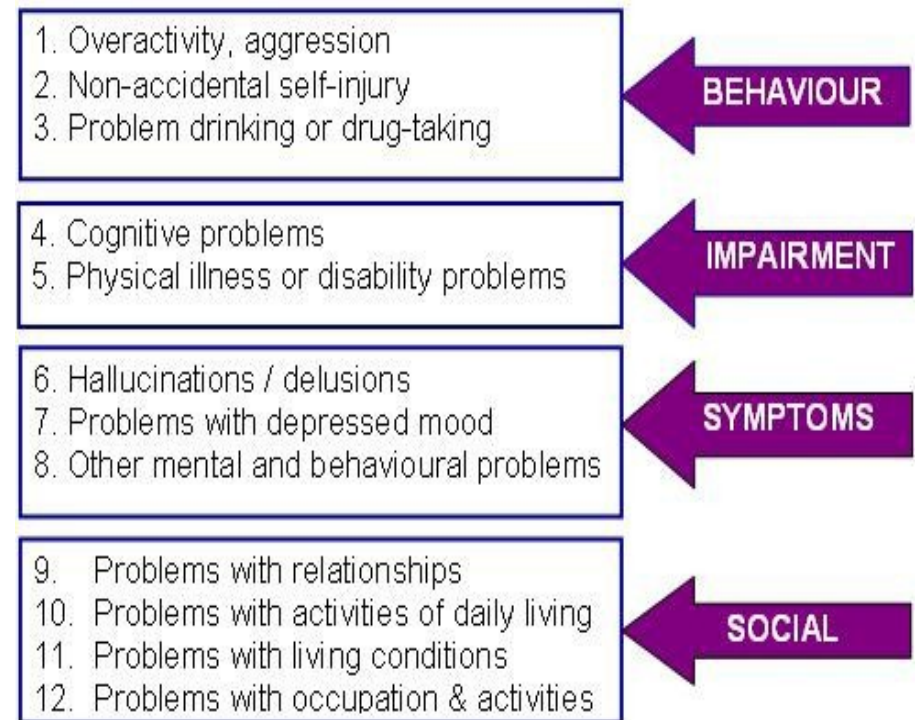
## Comparison of psychiatric disability of the Health of Nations Outcome Scale shows that

Outpatient traumatized refugees

have higher levels of psychiatric disability at pre-treatment

compared to most inpatients.

BioMed Central sit - Research article 2014 - Comparison of psychiatric disability on the health of nation outcome scales (HoNOS) in resettled traumatized refugee outpatients and Danish inpatients



# HoNOS

The most prevalent comorbidities for refugee outpatients were

- anxiety
- hyper-vigilance related to PTSD and
- sleep disturbance.

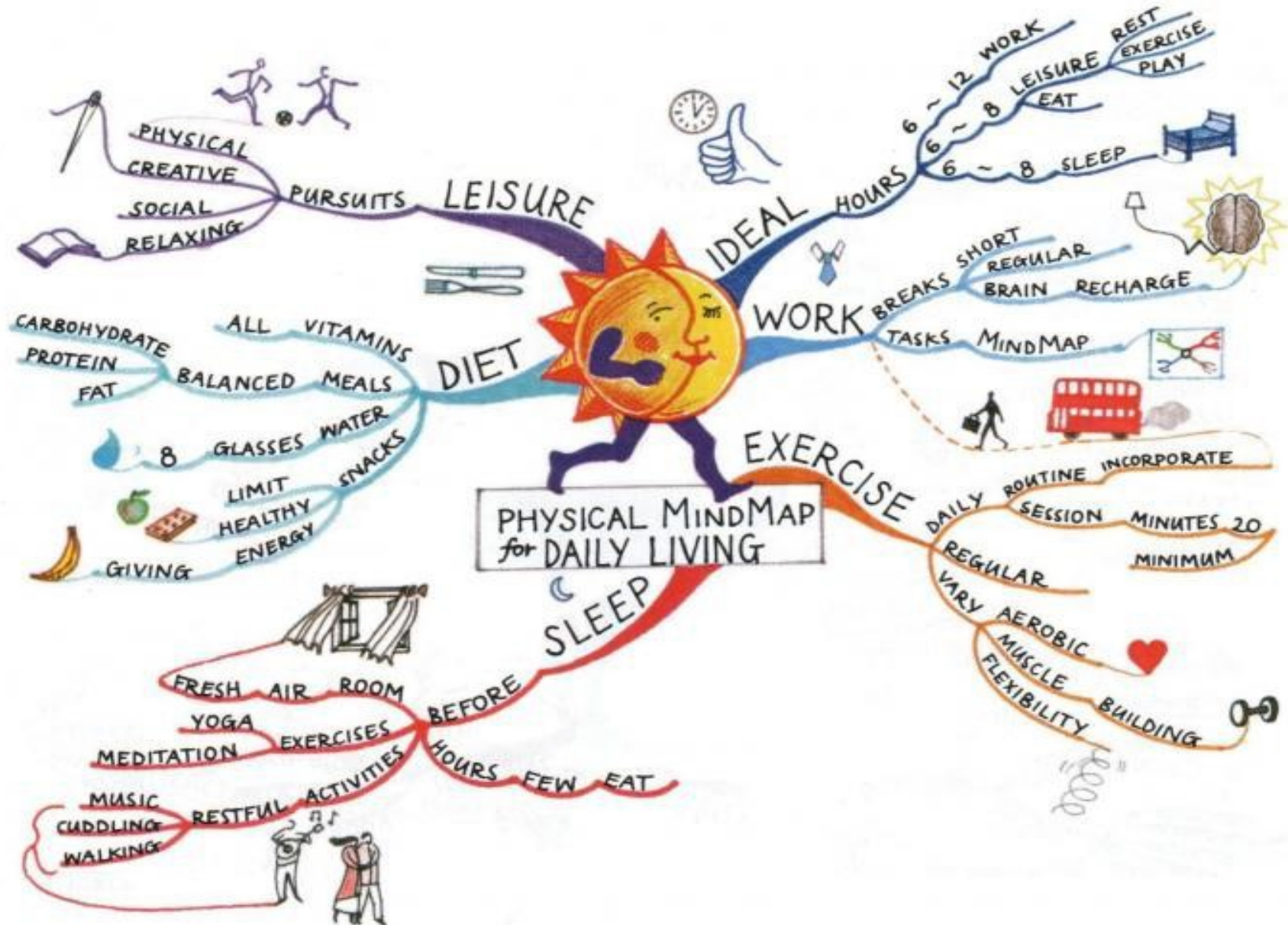
# HoNOS

## Social problems

The traumatized refugees had significantly higher clinical rated scores than all groups of psychiatric inpatients on problems with

- relationship
- activity and daily living
- occupation

# Relationship, activity and daily living, occupation







# PTSD symptoms

## Intrusive symptoms

- re-experiencing symptoms - reliving the event

Memories of the traumatic event can come back at any time. You may feel the same fear and horror you did when the event took place. For example:

- You may have **nightmares**.
- You may feel like you are going through the event again. This is called a **flashback**.
- You may **see, hear, or smell** something that causes you to **relive** the event. This is called a **trigger**. News reports, seeing an accident, or hearing a car backfire are examples of triggers.



=>



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# PTSD symptoms

**Avoidance symptoms** - avoiding situations that remind you of the event



You may try to avoid situations or people that trigger memories of the traumatic event. You may even avoid talking or thinking about the event. For example:

You may

- **avoid crowds**, because they feel dangerous.
- **avoid driving if you** were in a car accident or if your military convoy was bombed.
- If you were in an earthquake, you may **avoid watching** movies about earthquakes.
- **keep very busy or avoid seeking help** because it keeps you from having to think or talk about the event.



# PTSD symptoms



## **Hyperarousal** - feeling keyed up

You may be jittery, or always alert and on the lookout for danger. You might suddenly become angry or irritable. This is known as hyperarousal. For example:

You may

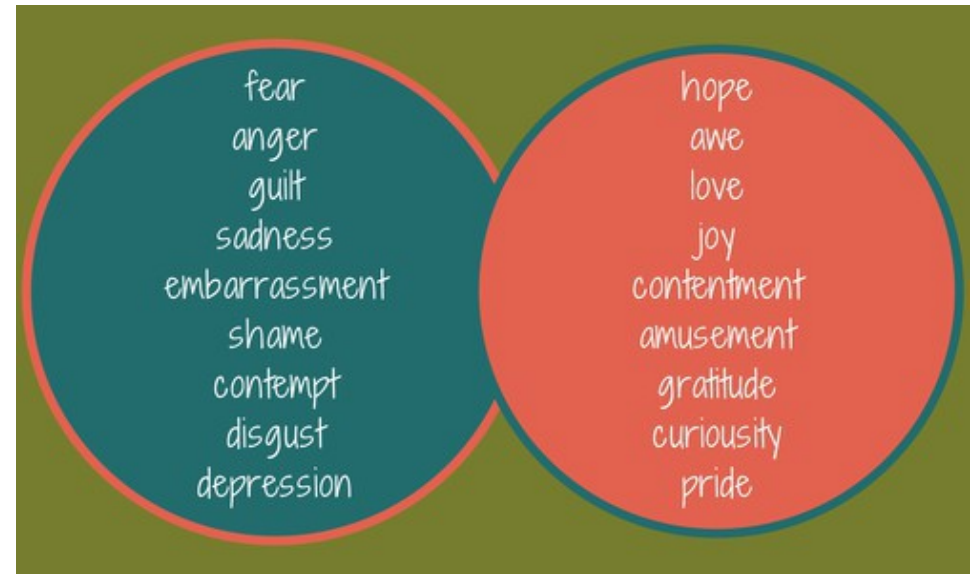
- have a hard time **sleeping**.
- have trouble **concentrating**.
- be **startled by a loud noise or surprise**.
- want to have your back to a wall in a restaurant or waiting room.

# PTSD symptoms

=> Negative changes in beliefs and feelings

**“The world is entirely dangerous”**

**“I am completely incompetent to cope with it”**



You may

- not have positive or loving feelings toward other people and may stay away from relationships.
- forget about parts of the traumatic event or not be able to talk about them.
- think the world is completely dangerous, and no one can be trusted.

# Chaos



Life is chaos

- there is no way

- no hope

- if not for my children I would rather die.

# From Chaos to Order and Approach

But -

who suffers from what - and to which extension?

what to do - where to start with the rehabilitation?

Concrete experiences with focusing on function -  
- in which way is he hindered with this disease

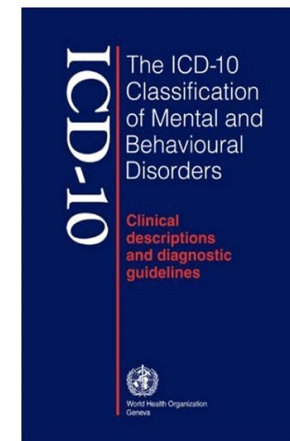
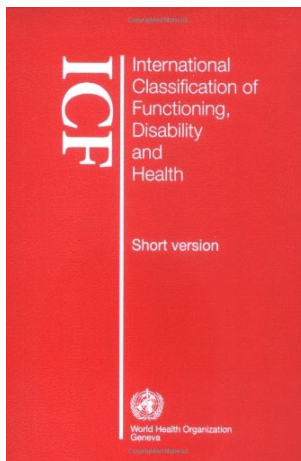
# WHO - ICD & ICF

## ICF

- International Classification of Functioning, Disability and Health.

## ICD

- International Classification of Diagnosis



# Diagnosis vs. Function



**Evald Krogh, born 1944 - Muscular dystrophy from childhood**

**severely physical handicapped - needs respiratory air, enteral feeding, electric wheelchair, personal helper 24 / 7 for everything practical**

**no psychological or mental damages or handicaps**

**ordinary, healthy upbringing, middle class, stable life and surroundings**

**girlfriend, 1 grown-up well established daughter**

**student, studies in law and latin, studier i jura og latin, founder and chairman of the Muscular dystrophy Organisation in DK**

**full of faith, initiatives, energy, jokes.**

**His motto: "Anything is possible!"**



**Laila Golush, born 1964 - Traumatized (bombs, lost child and family, difficult and dangerous flight) from 2000**

**no physical damages or handicaps of importance, but many complaints from pain and disturbances, many infections**

**damages memory, concentration, chronic hyperarousal, anxiety, chronic too little sleep and of bad quality**

**ordinary, healthy upbringing, higher middle class, war and fights in the country and surroundings from childhood**

**married, 6 children with no problems with learning or behaviour**

**6 years of primary school from time to time interrupted by riots, no further education and work experience**

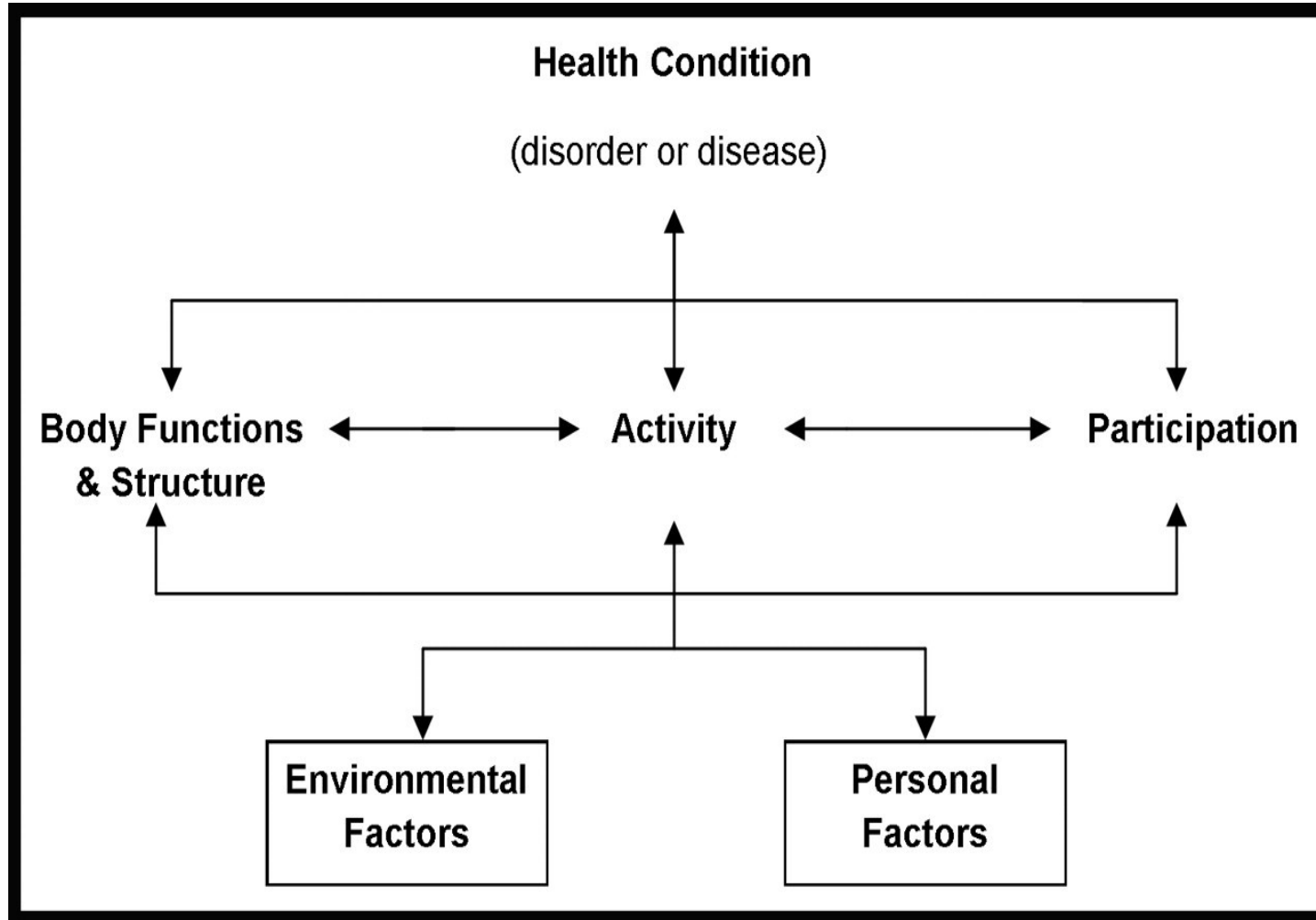
**learned and limited knowledge about Danish society and conditions - and language**

**feels not-included, a stranger (lost in translation) with no future, no energy, no activeness and ability, no autonomy**

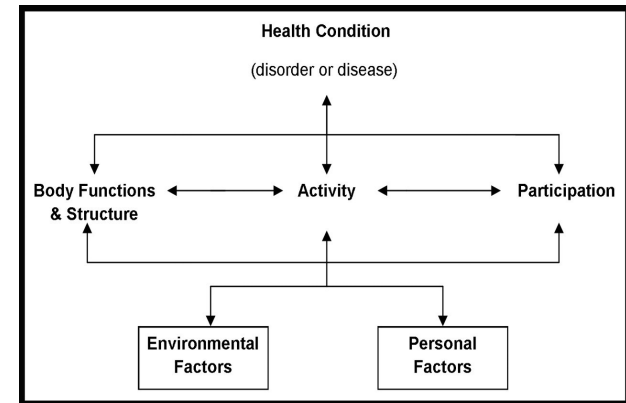
**her only ambition and hope is a better life for her children and she herself being able to keep the family together**



# ICF



# ICF



- a method for

- identification of action areas within the physio-psycho-social work with rehabilitation
- aiming at achieving a better level of physical, mental and social functions and
- become included in society.

The objective is to achieve a common standardised language, a frame of reference to describe functioning, disability and health.

# Treatment of refugees - an interdisciplinary approach

is in Denmark the prioritized treatment model for traumatized refugees and other patients with PTSD because of their complex problems

# Body Functions

Chapter 1: Mental functions

Chapter 2: Sensory functions and pain

Chapter 3: Voice and speech function

Chapter 4: Functions of the cardiovascular, haematological, immunological and respiratory systems

Chapter 5: Functions of the digestive, metabolic and endocrine systems

Chapter 6: Genitourinary and reproductive functions

Chapter 7: Neuromusculoskeletal and movement-related functions

Chapter 8: Functions of the skin and related structures

# Classification of Activities and Participation

Chapter 1: Learning & Applying Knowledge

Chapter 2: General Tasks and Demands

Chapter 3: Communication

Chapter 4: Movement

Chapter 5: Self Care

Chapter 6: Domestic Life Areas

Chapter 7: Interpersonal Interactions

Chapter 8: Major Life Areas

Chapter 9: Community, Social & Civic Life

# Choosing the specific codes

There is

- around 1.500 codes to describe the different disabilities
- necessary to decide codes of specific interest for a specific patient group
- necessary to describe to which extent the patient is hindered

That takes

- professional knowledge
- interdisciplinary approach



# ICF as Frame of Reference

<b>Name:</b>	<b>Diagnosis:</b>	<b>Filled in by:</b>
<b>Ability of functioning</b>	<b>Resources</b>	<b>Limitations</b>
<b>Body functions</b>		
<b>Body structure</b>		
<b>Activity</b>		
<b>Participation</b>		
<b>Environmental factors</b>		
<b>Personal factors</b>		

# Specific ICF codes for PTSD

3 year study-period with  
systematic use of a selected number of ICF codes  
=> evolved some specific codes, that were found  
significant meaningful for patients with PTSD:

# Activity and Participation

Activity / ability / capacity

- having the skills, knowledge and training to be able to do it

Participatio / activity

- actually do it

Some people have participation over their capacity => they use too much energy, may have anxiety, still feel that they don't succeed => be depressed

Some people look capable, but have very low function.

# Specific ICF codes for PTSD

b130 Energy and drive functions - incl. impulse control

b134 Sleep functions - quantity and quality

b140 Attention functions - focusing on an external stimulus or internal experience for the required period of time - memory, concentration, consciousness

b280 Sensation of pain

d240 Handling stress and other psychological demands

d570 Looking after one's health - eat, drink

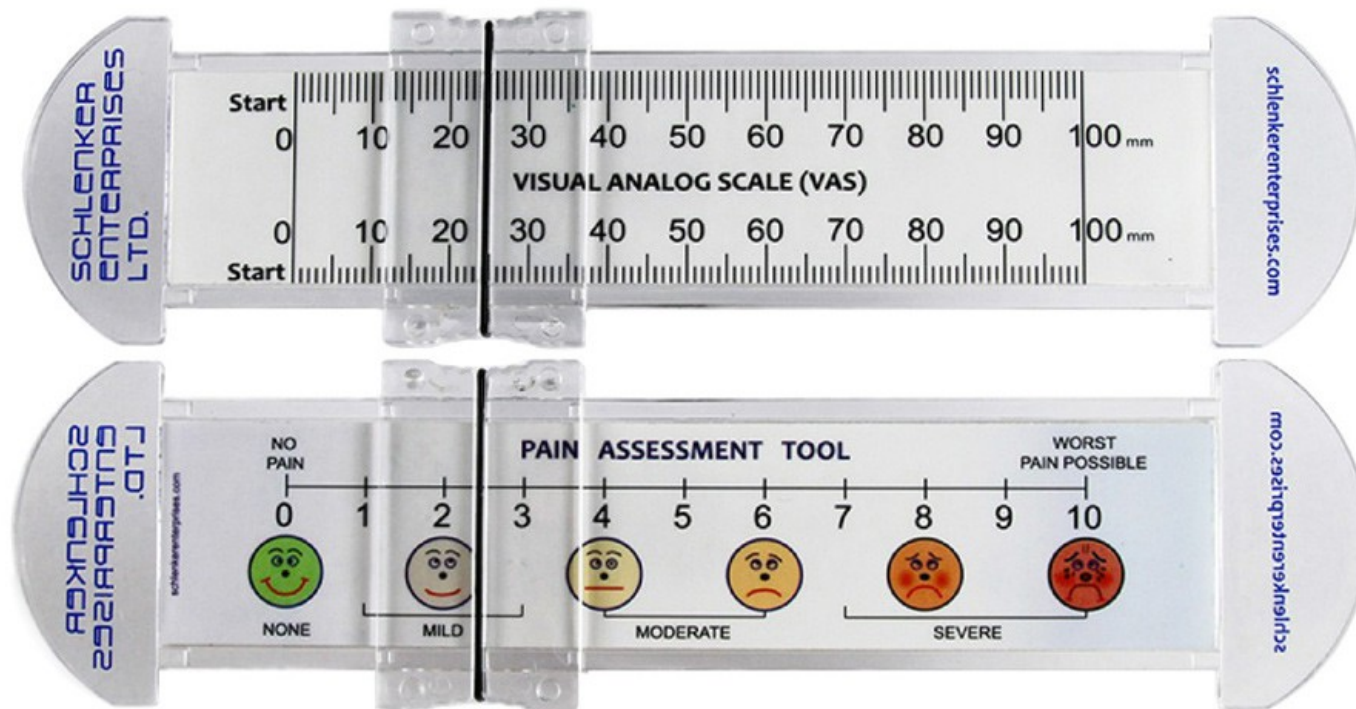
d740 Formal relationships - Creating and maintaining specific relationships in formal settings, such as with employers, professionals or service providers

d910 Community life - Engaging in all aspects of community social life, such as engaging in charitable organizations, service clubs or professional social organizations.

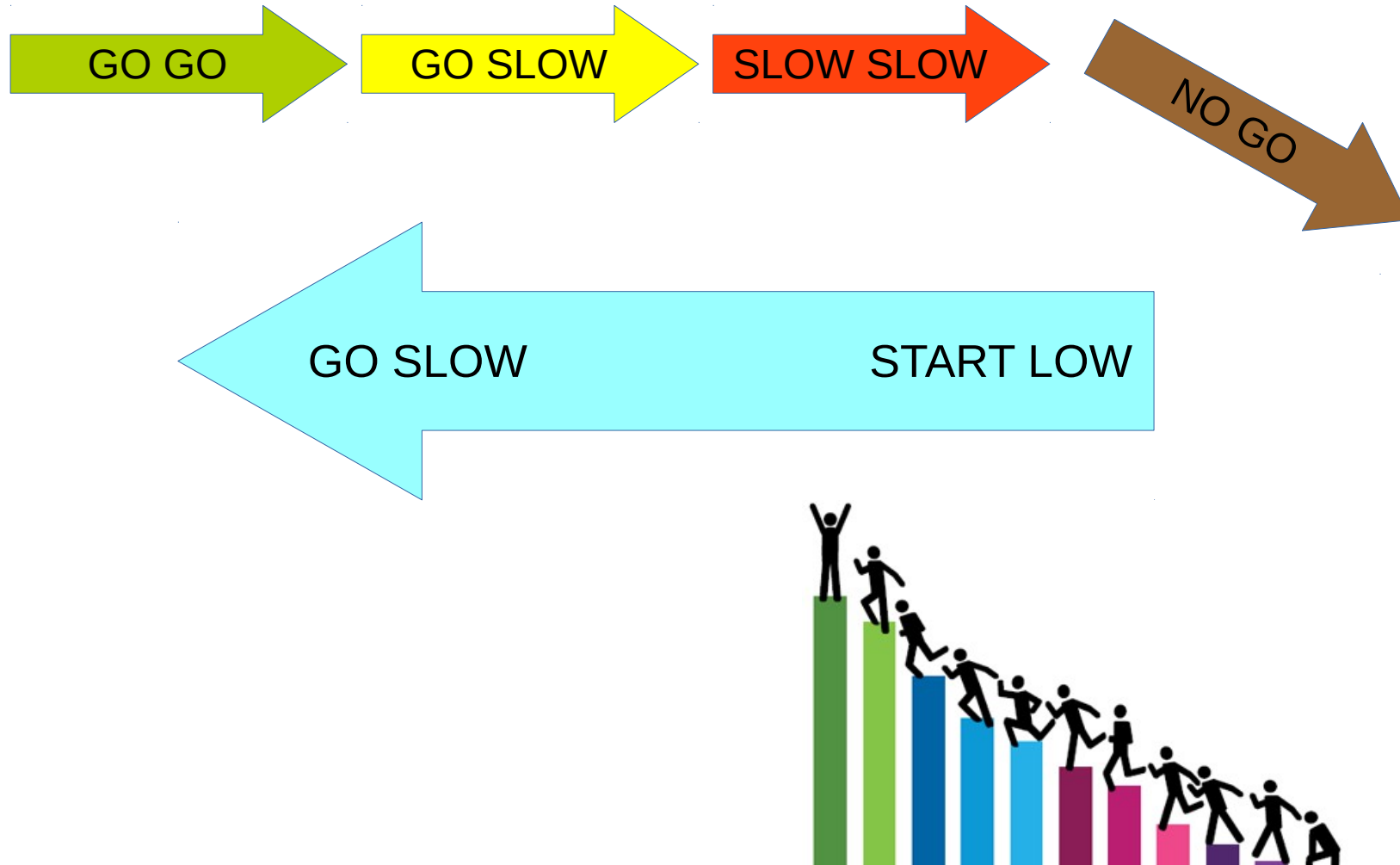
# How to measure

exact science  $\Leftrightarrow$  guesstimate

## VAS - Visual Analog Scale



# How to measure





# Specific ICF codes for PTSD

**b130 Energy and drive functions** - General mental functions of physiological and psychological mechanisms that cause the individual to move towards satisfying specific needs and general goals in a persistent manner - incl. impulse control

**b134 Sleep functions** - General mental functions of periodic, reversible and selective physical and mental disengagement from one's immediate environment accompanied by characteristic physiological changes.

**b140 Attention functions** - Mental functions of focusing on an external stimulus or internal experience for the required period of time

**b280 Sensation of pain** - Sensation of unpleasant feeling indicating potential or actual damage to some body structure

# Specific ICF codes for PTSD

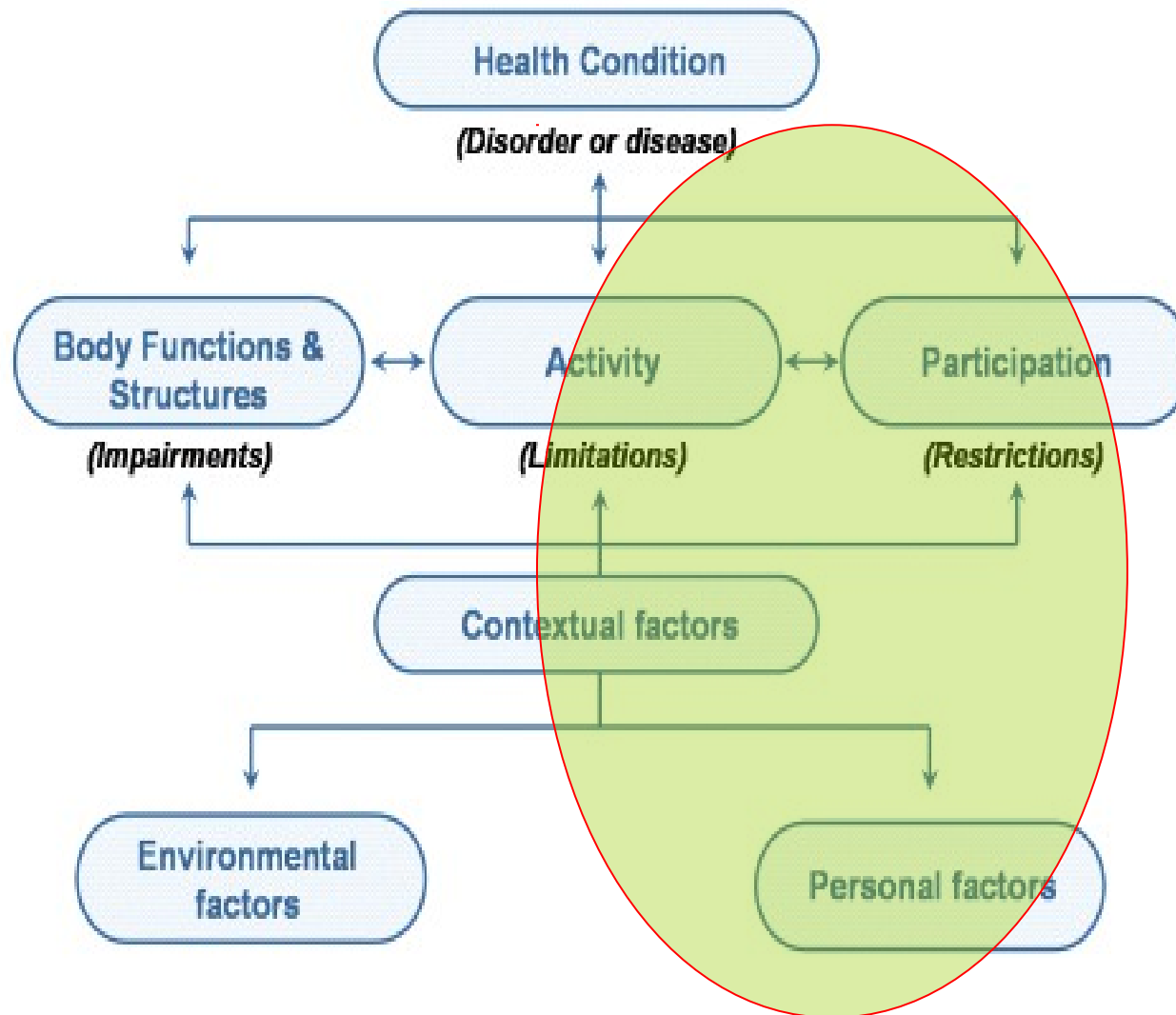
**d240 Handling stress and other psychological demands** - Carrying out simple or complex and coordinated actions to manage and control the psychological demands required to carry out tasks demanding significant responsibilities and involving stress, distraction, or crises such as driving a vehicle during heavy traffic or taking care of many children.

**d570 Looking after one's health** - Ensuring physical comfort, health and physical and mental well-being, such as by maintaining a balanced diet and an appropriate level of physical activity, keeping warm or cool, avoiding harms to health, following safe sex practices, including using condoms, getting immunizations and regular physical examinations.

**d740 Formal relationships** - Creating and maintaining specific relationships in formal settings, such as with employers, professionals or service providers

**d910 Community life** - Engaging in all aspects of community social life, such as engaging in charitable organizations, service clubs or professional social organizations.

# ICF



# Specific ICF codes for PTSD

B 1300 ☐ energiniveau (b 130 ☐ energi og handlekraft)

B 1304 ☐ impuls kontrol

B 1343 ☐ søvnkvalitet

B 1400 fastholdelse af opmærksomhed (b 140 ☐ opmærksomhed)

B 280 smerte

D 2401 klare stress (d 240 klare stress og andre psykologiske krav)

D 5702 ☐ vedligeholde egen sundhed (d 570 ☐ varetage egen sundhed)

D 740 ☐ skabe formelle relationer

D 910 ☐ deltage i fællesskaber