

WG Mental Health and Psychosocial Functioning Work Group Update



- **Elena De Palma**

Istat (Italian National Institute of Statistics)

- **Marguerite Schneider**

Alan J Flisher Centre for Public Mental Health

Dept of Psychiatry and Mental Health University of Cape Town

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Presentation Outline

- Workgroup goals
- Recap of progress so far in:
 - Analysis of Depression and Anxiety WG ES questions
 - Scoping literature review
 - Psychosocial disability profile analysis
 - Cognitive tests on questions on psychosocial functioning
- Collaborations with UNICEF and UNHCR
- Next steps

Workgroup goals

The WG was established at the 13th WG meeting in Amman (Jordan)

Purpose

- ❑ Ensure adequate coverage of *common and severe mental disorders* in the WG functioning measures to include people at risk of participation restrictions resulting from psychosocial disability
- ❑ Conduct further analysis of WG ES Affect questions to maximize the use of these for including people with varying degrees of anxiety and depression
- ❑ Add further measures to the WG Extended set if coverage is not adequate for functional consequences

Workgroup name: Psychosocial functioning and mental health workgroup

- ❑ **Psychosocial Functioning:** Emotional and psychological functioning; e.g. interpersonal interaction and controlling emotions
- ❑ **Psychosocial disability:** Activity limitations resulting from a severe mental disorder – activity level in the ICF and refers people who have experienced enduring mental and emotional distress which in interaction with various barriers hinder their full and effective participation in society on an equal basis with others.
- ❑ **Mental Health:** The analysis of the WG ES Affect questions; mental functions at body level in the ICF

Main activities of the working group

1. Review the performance of the WG Affect (anxiety and depression)
2. Scoping literature review on activity limitations, participation restrictions and environmental barriers commonly associated with common and severe mental disorders
3. Psychosocial disability profile analysis
4. Conduct cognitive test on suggested new questions

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Review the performance of the WG
Affect Measures included in the WG
Extended set

Detailed information is available in slides presented in WG2016, WG2017 and in document included in WG 2018

WG Extended Set Affect Questions:

Depression

1. How often do you feel depressed?

Daily / Weekly / Monthly / A few times a year / Never

2. Do you take medication for these feelings?

Yes / No

3. Thinking about the last time you felt depressed, how depressed did you feel?

A little / A lot / Somewhere in between a little and a lot

WG Extended Set Affect Questions:

Anxiety

1. How often do you feel worried, nervous or anxious?
Daily / Weekly / Monthly / A few times a year / Never
2. Do you take medication for these feelings?
Yes / No
3. Thinking about the last time you felt worried, nervous or anxious, how would you describe the level of these feelings?
A little / A lot / Somewhere in between a little and a lot

Review the performance of the WG Affect measures

Goals:

- ✓ To review the performance of the WG Affect measures (anxiety and depression) comparing to other common scales used in surveys (e.g. PHQ9, K6)
- ✓ To explore a scale of severity for the Affect questions

Results:

- Include both anxiety and depression
 - Include both frequency and intensity questions
 - Do not include the medication question in a composite score
 - For mental health-specific analyses, suggested 4 slightly different cut-off points (Affect domain – AD) to those from the main WG ES analysis as set out in the next slide
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Q4. What should the cut points be, and how many categories should we include?

WG ES-F:

Frequency

<u>Intensity</u>	Daily	Weekly	Monthly	A few times a year	Never
Not asked					None
A little	LOW	LOW	LOW	None	None
In Between	MED	LOW	LOW	None	None
A Lot	HIGH	MED	LOW	None	None

WG AD:

Frequency

<u>Intensity</u>	Daily	Weekly	Monthly	A few times a year	Never
Not asked					None
A little	MED	MED	MED	LOW	None
In Between	HIGH	MED	MED	LOW	None
A Lot	HIGH	HIGH	MED	LOW	None

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Scoping literature review

Detailed information is available in slides presented at the WG2016

Scoping review: Approach

Focus on activity limitations, participation restrictions and environmental barriers commonly associated with mental disorders.

GOAL: To use the findings to identify domains of functioning that could ensure inclusion of people with psychosocial disability in disability statistics

More than **90 articles** in English have been collected and reviewed and **40 papers** provided useful information

Primary types of mental disorder/illness addressed:

Anxiety/ Depression /Psychosis / Bipolar mood disorder/ Obsessive Compulsive Disorder (OCD)/ Other (e.g. personality disorder, phobia, panic disorder...

Scoping review: main results

(red = already in WGSS; black = new domains)

Basic activities

1. **Self-care**: washing self, carrying out daily routine
2. **Interpersonal interactions**: family, friends...
3. **Communication**: Verbal fluency
4. **Memory and thinking** : executive function, Attention difficulties, Verbal /visual memory
5. **Controlling behaviour**: getting upset, conflict with others, misinterpretations, violent
6. **Mobility**

Complex activities:

1. **Domestic/household activities**: washing clothes, preparing food, daily routine
 2. **Formal work**
 3. **Informal work**
 4. **Community Activities**
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Psychosocial disability profile analysis

Psychosocial disability profile analysis

Goal:

Conduct analysis on survey include the WG SS or ES AND some form of diagnosis to determine if the WG SS and ES already include people with psychosocial disability or not.

This helps to select the additional questions to better measure psychosocial disability in population surveys.

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Cognitive testing of questions
on psychosocial functioning

Criteria for questions selection

- ❑ Reflect difficulties in interpersonal interactions as a common activity limitation reported for a number of severe mental disorders
- ❑ Conceptually clear and focusing on basic activity limitations specific to people with psychosocial disability
- ❑ Use simple wording and response options
- ❑ Reflecting similar structure of questions to WG ES and SS so that the adaptation into the WG structure does not change the question substantially
- ❑ Avoid reference to role of environment
- ❑ Easy to translate
- ❑ Relevant for adults
- ❑ Culturally sensitive and appropriate

Selecting the questions

- Review of existing questions
- Determine their suitability in terms of the criteria
- Phrasing the questions in WG format
 - Do you have difficulty...
- Response options:
 - no difficulty
 - some difficulty
 - a lot of difficulty
 - unable to do

Selected questions:

(adapted from WHODAS)

- Do you have difficulty getting along with people who are close to you?
- Do you have difficulty dealing with people you do not know well?
- Do you have difficulty maintaining friendships?
- Do you have difficulty making new friends?
- Do you have difficulty controlling your emotions when you are around people?

Selected questions

French survey (Disabilities and health survey, 2008)

- In everyday life, do you have difficulty forming relationships with other people?

Additional question

- Do you have difficulty controlling your behaviour?
 - All the time
 - Most of the time
 - Sometimes
 - Rarely
 - Never

Cognitive testing: Goals

- ❑ Assess respondents' interpretation of the questions
- ❑ Identify potential response problems that could impact on data quality
- ❑ Evaluate the cross-cultural equivalence of the questions
- ❑ Conclude on the performance of the selected questions and their suitability in including people with psychosocial disability. Some of these people could have already been counted in (included) with the existing questions and others not.

Cognitive testing protocol : Structure of questionnaire

- Socio-Demographic data
 - WG Short Set (6 questions)
 - WG Extended Set
 - Cognition questions – 3 additional
 - Affect questions (excluding questions on medication use)
 - Anxiety – 2 questions
 - Depression – 2 questions
 - 7 Psychosocial disability questions with cognitive testing probes
 - 5 additional questions on quality of life (*asked without probes*)
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Cognitive testing

After selecting the questions, a **cognitive testing protocol** was developed.

Cognitive tests are in progress in South Africa and USA

Other countries have express their interest in participating in this process too.

Collaborations

□ **Stephen Perry – UNICEF**

- humanitarian contexts - including conflict settings, natural disasters, etc.
- Develop indicators to conduct a needs assessment for the affected population as a whole, rather than individual needs assessments. E.g. prevalence of disability, etc.

□ **Kirsten Lange/Pieter Ventevogel - UNHCR**

- Determining need for further assessment of individuals to determine need for social protection services for refugees at registration centres
- How to include measures of psychosocial functioning together with other disability measures for individual assessment.

Next steps

- ❑ Conduct cognitive testing
 - ***Volunteers ?***
- ❑ Analyse the CT results
- ❑ Review the results: Select / revise the questions
- ❑ Conduct a new round of cognitive testing including with translated versions; possibly reduced number of questions.
- ❑ Review the results: Select / revise the questions
- ❑ Conduct field testing
- ❑ Decide on how to include the questions with existing WG sets and cut-off
- ❑ Develop recommendations
- ❑ Psychosocial disability profile analysis

Conclusion

- All this work will lead to the selection of a minimum set of questions that will be able to include people with psychosocial difficulties who are at risk of participation restrictions.
 - Focus is primarily on people with severe mental disorders as those experiencing psychosocial difficulties rather than common mental disorders (Affect questions)
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