

**2008 – 2010: Guided Self-Help Groups as a Community Based Intervention for Female Turkish Migrants with Recurrent Depressive Disorder (ICD-10 F33) — A Randomized Controlled Study.**

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We installed **guided self-help groups** for N = 66 female Turkish migrants with recurrent depression (mean age 42.7 years) which met 15 times on a weekly basis and compared their effectiveness with 15 sessions of Cognitive Behavior Therapy (CBT) in a group setting and Wait-List Control Groups in a randomized design.

People of Turkish descent are among the most frequent groups of migrants in Austria. Most of them, also in the second and third generation, still affiliate with Turkish more than with Austrian culture and many parents transmit to their children rather the values of collectivist Turkish than individualist Austrian culture. Similarly, traditional gender roles are adhered to frequently and women are allowed only limited self-determination and personal freedom. As a consequence, frequently **recurrent depressive and somatic symptoms** are triggered or intensified by **cultural strain** from their extended families as well as from **xenophobia** encountered by Austrians. Fearing stigmatization and discrimination, many Turkish women are **reluctant to utilize** psychiatric, psychological, or psychotherapeutic care, even if offered free of charge and the Austrian medical and psychotherapeutic system often is unable to attend sufficiently to the **specific needs** of Turkish patients. Alternatively, encouraging anecdotal evidence exists towards the effectiveness of **culturally sensitive** self-help activities for indigenous people. Such **community based** activities have been frequently reported but rarely examined on a sound empirical basis with respect to their effectiveness. Group leaders were female students of Turkish descent, carefully selected, trained and supervised.

We administered questionnaires measuring depression, general clinical symptomatology and post-traumatic stress before and after the interventions as well as at two follow-up occasions. In addition, we analyzed session protocols, supervision protocols and interviews with the participants. Contrary to our expectations, **neither self-help groups** nor CBT were effective in reducing depression, post-traumatic stress or general clinical symptoms as compared to the Wait List Control Group. On an individual basis, however, N = 12 participants reported improvement of depressive symptoms. **Younger** women and those who reported higher numbers of **traumatic events** and **longer periods of stay** in Austria reported a higher amount of symptom reduction. In contrast, in the interviews almost all of the participants agreed that they experienced self-help groups as supportive, as increasing mutual trust and personal strength. Possibly as a consequence of uncontrollable living conditions, short term self-help and CBT were subjectively **supportive, but not effective** for most of the participants. Both are typically "western" interventions previously unknown to our participants, which may have put too high demands on their autonomy and self-management abilities. As an alternative, we **recommend long term psychotherapy in a single setting by female psychotherapists of Turkish descent** who are knowledgeable of the patients' cultural background and specific needs.