The impact of an individual counselling intervention on client functioning in an MSF mental health programme in Grozny, Republic of Chechnya: a stepped-wedge randomised controlled trial

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Introduction

Individual counselling is a cornerstone of mental health activities in humanitarian settings; however, its effectiveness is largely unknown. In Grozny, Republic of Chechnya, the MSF mental health programme addresses the psychological consequences following decades of conflict. The programme includes an individual counselling intervention, based on principles derived from brief trauma-focused therapy, intended to reduce symptoms and improve functioning. We evaluated the counselling intervention’s impact on the clients’ functioning.

Methods

We conducted a stepped-wedge blinded randomised, controlled trial. Eligible patients were adults aged ≥18 years presenting for individual counselling and scoring >1.75 on the Hopkins-Symptom-Checklist-25. Exclusion criteria were active suicidal ideation, major psychiatric disorder requiring medication, and enrolment in the programme within the previous 6 months. Participants were randomised at presentation to control or intervention groups, using a random number list. The control group was waitlisted for 2 months but contacted once to monitor symptoms. Functioning was measured using the Short-Form 6 (SF6) and a Chechen gender-specific instrument administered at enrolment (both groups), compared with end of counselling (intervention group) or after the waitlist period (controls). The primary outcome measure was the unadjusted difference in gain scores (DGS) between intervention and control groups, with effect size calculated using Cohen’s d expressed out of 100 or Likert-scale, for SF6 and Chechen tool, respectively. A d of 0.15-0.39 was small, 0.40-0.75 medium, and >0.75 large. Intention-to-treat (unadjusted and adjusted) was analysed; linear regression compared the differences in mean gain scores. The trial is registered in the Netherlands Trial Register (NTR4689).

Ethics

This study was approved by the MSF Ethics Review Board and the Ethical Committee of the Chechnya State University in Grozny.

Results

We enrolled 84 intervention participants (63 [75%] female) and 84 controls (60 [71%] female); 20 were lost to follow-up (13 [65%] controls, p=0.085). The intervention group received a mean (SD) of 3.80 (0.76) counselling sessions over a mean (SD) of 32 (10.6) days. The intervention group improved
compared with controls on the four SF6 measures: general health (DGS 12.14, d=0.52), body pain (DGS 10.26, d=0.35), social support (DGS 16.07, d=0.69), and emotional functioning (DGS 16.87, d=0.91). Similar improvement was seen using the Chechen tool score (female DGS -0.33, d=0.55; male DGS -0.40, d=0.99). Adjusted analysis showed significant improvement (p<0.05) in the intervention group for all SF6 measures and for the Chechen tool score in women but not men (p=0.07).

Conclusion

Individual counselling sessions significantly improved clients’ functioning within a mental health programme in a post-conflict context. Further research should confirm this intervention’s impact in acute and protracted conflict settings and the sustainability of improvement findings.

Conflicts of interest

None declared.