

Refugee Readiness Project



Vulnerability Screening Tool

Produced by the
Vancouver Association for Survivors of Torture
for the Province of British Columbia

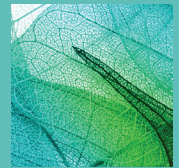
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WelcomeBC

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Vulnerability Screening Tool

INTRODUCTION

The Vulnerability Screening Tool has been developed by the Vancouver Association for Survivors of Torture (“VAST”) for use by mental and primary health professionals, as well as settlement and social service providers, private sponsors, and other community members who are supporting refugees on arrival in British Columbia. This tool has been developed for the use of a broad spectrum of service providers throughout the province, who may or may not have experience working with refugees. This document is not a diagnostic tool, but rather a screening tool for vulnerability.

Refugees in the early stages of resettlement are vulnerable to mental health challenges as a result of past trauma, as well as to current stressors related to the settlement and adaptation process. This tool has been designed in three parts in order for service providers to consider a range of mental health, settlement, and resiliency factors. We strongly recommend that mental and primary health professionals and settlement and social service providers work in collaboration to ensure that settlement needs and material well-being are integrated with psychosocial support and medical treatment.

PART 1: Settlement Checklist

The first part of this tool consists of the Settlement Checklist, which is a ten question checklist to confirm whether or not your client is connected to a broad range of community programs and services. This checklist will orient you to your client’s basic needs. Mental and primary health professionals will gain a better understanding of how their client’s settlement needs influence their health and well-being, while settlement and social service providers will have a list of settlement priorities to address, including access to mental and primary health services.

PART 2: Mental Health Screening Tool

The second part of this tool consists of the PROTECT Questionnaire, which has been developed by the International Rehabilitation Council for Torture Victims (“IRCT”) for use by its member centers in the European Union working with refugees. The IRCT has granted VAST permission to reproduce and adapt the PROTECT Questionnaire for the British Columbia context.

The Questionnaire consists of ten questions, and results in a rating of “high”, “medium”, or “low” risk for trauma and depression-related disorders. The questions are based on diagnostic criteria for Post-traumatic Stress Disorder (“PTSD”) and depression – as these are most frequently diagnosed and tend to be seen concurrently – however the questionnaire is not to be used for diagnostic purposes. While many refugees will present with some of these symptoms after surviving a traumatic event, these symptoms do not always reach clinical levels, and may resolve on their own. Nevertheless, some refugees will develop PTSD and/or depression, especially after exposure to intense or protracted traumatic events and challenging resettlement experiences. Disorders such as PTSD and depression are serious, and can be chronic. Therefore, appropriate identification, referral, and early intervention may lead to improved health and quality of life for refugees.

Before asking the set of questions, please introduce the Questionnaire, stating, for example, “I’m going to ask you a few questions about your health. Please answer yes or no if you have had the following experiences in the past two weeks.”

Respondents who score “high” or “medium” may benefit from additional psychosocial support. Please discuss the referral options that are available in your region. After completing the Questionnaire, provide a copy to your client, and recommend that they share this information with other service providers. Psychological education should be provided to explain that these types of health outcomes are common in people who have suffered significant stress, and that there are programs and services available to assist your client.

The PROTECT Questionnaire includes translations in fifteen (15) languages. However, the Questionnaire should not be self-administered by your client. If your client speaks a language that you do not share, you will need to work with a qualified interpreter. If you require a translation of the Questionnaire in a language other than English, please contact the Provincial Refugee Health Coordinator at 1-866-393-3133.

PART 3: Resiliency Inventory

The third part of this tool consists of an open-ended question designed to invite your client to reflect on their sources of strength and resiliency. While this tool has been developed to screen for vulnerability, this final part of the tool is an opportunity for your client to reflect on the sources of strength that

have helped them to survive their experience of forced migration and resettlement. These sources of strength may include family, friends, faith or spiritual practice, art, music, movement, meditation, storytelling, sport, involvement in a social or political movement, etc. This part of the screening process may alert you to your client's inherent capacity to heal, which you can work to mobilize in their new environment. These sources of strength and resiliency may also act to mitigate some of your client's vulnerability risk factors.

For Mental Health and Primary Health Professionals

If you are a mental or primary health professional, and are working with a client who is a refugee, we recommend you use this tool to screen for vulnerability as early as possible in the treatment process. If you are not working in collaboration with a settlement service provider, we recommend you consult with your client to connect with their settlement worker in order to provide comprehensive treatment. This connection may assist you to complete Part 1 of this **Vulnerability Screening tool** (the "Settlement Checklist"), in collaboration with your client. Completing the Settlement Checklist may assist you to contextualize your client's trauma-related symptoms.

The PROTECT Questionnaire is a basic screening tool which is quick to administer and simple to score, and is based on symptoms commonly found in refugee populations. While there are a number of standardized measurement tools commonly used with refugee populations, such as the Hopkins Symptoms Checklist and the Harvard Trauma Questionnaire, we have chosen the PROTECT Questionnaire for this vulnerability screening tool for its brevity, range of available translations and ease of application by a wide range of service providers working with refugees in British Columbia, including non-mental healthcare professionals.

Moreover, we have chosen to use the PROTECT Questionnaire because of its focus on identifying symptoms common to trauma in refugee populations, rather than on documenting traumatic events. In early interventions with refugee populations, we recommend that, in general, your focus is on safety and stabilization (i.e. Stage I of trauma treatment), that is, restoring a sense of security in your client's person and their environment. This includes psycho-education, emotion self-regulation, and the mitigation of symptoms set out in the Questionnaire. For newly arrived refugees, a fundamental aspect of safety and stabilization is basic material security, including food, clothing, and shelter, as well as assistance in navigating social services and public institutions. For this reason, we recommend collaborating with a settlement service provider as part of a comprehensive treatment plan. Unmet settlement needs may exacerbate your client's vulnerability risk factors, including their trauma-related symptoms.

For Settlement and Social Service Providers, Private Sponsors, and Other Community Members

If you are a settlement worker or other social service provider with a refugee client, we recommend that you use all three parts of this vulnerability screening tool, including the PROTECT Questionnaire, as early as possible in the work with your client. While your agency may have its own checklist for the settlement process, we recommend you use the enclosed Settlement Checklist in the intake and assessment process with your client as part of a complete vulnerability screening.

The PROTECT Questionnaire serves two general purposes in the settlement process. First, the vulnerability score may assist you to empathize with your client, understand how their symptoms may impede their settlement process, and may prompt you to collaborate with a mental health professional. For example, if your client is experiencing sleeping difficulties or trouble concentrating, they may struggle to achieve short-term educational goals, such as English Language Learning. Working in collaboration with a mental health professional may assist your client to reduce their symptoms, and be better prepared to meet their short and long-term settlement goals.

Second, the degree of vulnerability your client is experiencing may help you determine the most effective manner in which to work with them. A “high” vulnerability score could indicate that certain accommodations may be beneficial, such as more time and individualized care, more accompaniment, or different approaches to facilitate engagement and learning. Keep in mind that the degree of vulnerability your client experiences will change throughout the settlement and adaptation process, and, therefore, we recommend that you administer the Questionnaire multiple times.

Professional Consultation

If you have questions about the use of this vulnerability-screening tool, please call the Provincial Refugee Mental Health Coordinator toll-free throughout the province at 1-866-393-3133.

Vulnerability Screening Tool

Part 1: SETTLEMENT CHECKLIST

We recommend that you complete this checklist with your client. It is not to be self-administered by your client. This checklist is designed to provide you with an understanding of whether your client is connected to settlement, mental health, and primary health services, as well as whether they are familiar with community services in their area. These factors have been selected because a high level of connectivity to community programs and services may reduce your client's vulnerability.

As your client's circumstances will change throughout the settlement and adaptation process this checklist may need to be administered multiple times while you are working with them.

If you are a mental or primary healthcare professional, you may need to consult with your client to connect you with their settlement worker to complete this part of the **Vulnerability Screening Tool**.

This checklist is not a diagnostic tool. This is a yes or no checklist, and there is no scoring matrix as in the PROTECT Questionnaire in PART 2 of this tool. A high number of no responses suggests significant unmet settlement needs, which may exacerbate mental health vulnerability. This checklist should be considered in combination with the other parts of this tool.



#	Question	Yes	No
1.	Are you seeing a settlement worker?		
2.	Are you seeing a doctor?		
3.	Are you seeing a psychiatrist, psychologist, or clinical counsellor?		
4.	Are you enrolled in an English-language learning program?		
5.	Are you enrolled in an employment or volunteer placement program?		
6.	Are you in housing where you feel safe and secure?		
7.	Are you familiar with where to find affordable food that you enjoy eating?		
8.	Are you familiar with the public transit system in your area?		
9.	Are you familiar with the programs and services at the community centre or neighbourhood house in your area?		
10.	Are you familiar with educational programs available to you at schools, colleges, or universities in your area?		

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Part 2: **MENTAL HEALTH QUESTIONNAIRE**

The PROTECT Questionnaire has been developed by the European Council of the International Rehabilitation Council for Torture Victims (“IRCT”), and has been adapted, with permission, by the Vancouver Association for Survivors of Torture (“VAST”) for the British Columbia context.

Please note that this questionnaire is not exclusively for use with survivors of torture, but rather it is for use with refugees who have experienced traumatic events.

The PROTECT Questionnaire is not a diagnostic tool, but rather a tool to screen for vulnerability in refugee populations.

What is the purpose of the Questionnaire?

The PROTECT Questionnaire facilitates the early recognition of persons having suffered traumatic experiences, such as survivors of torture, psychological, physical or sexual violence.

Refugees who have suffered such traumatic experiences should be referred to mental and/or primary health professional in the early stages of settlement in order to avoid deterioration and chronic manifestation of health problems, and enable adaptations in the short, medium, and long-term settlement process.

When to use the Questionnaire?

On arrival in British Columbia, food, clothing, shelter, and, if necessary, medical attention, should be provided. Once these basic needs are met, it is appropriate to carry out an interview with your client using this Questionnaire, preferably after a period of rest, for example, 7 – 10 days.

The Questionnaire should be applied even under difficult circumstances, rather than being neglected.

Sometimes psychological problems caused by traumatic experiences begin to appear later. For this reason, the Questionnaire should be filled out a second time, and the rating may have to be corrected.

How to apply the Questionnaire?

Before completing the Questionnaire, we recommend you inform your client that you will be asking them ten yes or no questions about their health, and ensure you have their consent to continue. Ask them to answer as freely and naturally as possible.

Ask your client to please answer the questions by yes or no. When answering, keep in mind the experiences of the last weeks.

The Questionnaire establishes a rating system ("low risk", "medium risk" or "high risk") for having suffered traumatic experiences.

After completing the Questionnaire, a copy should be given to your client with the recommendation that they share this document when they meet with other health or social service providers.



Note: The term "Often" below means: more than usual and causing suffering

# Question	YES	NO
1. Do you often have problem falling asleep?		
2. Do you often have nightmares?		
3. Do you often suffer from headaches?		
4. Do you often suffer from other physical pains?		
5. Do you easily get angry?		
6. Do you often think about painful past events?		
7. Do you often feel scared or frightened?		
8. Do you often forget things in your daily life?		
9. Do you find yourself losing interest in things?		
10. Do you often have trouble concentrating?		
Number of questions answered "Yes" →		

Rating: Please mark the proper category with an X to indicate the level of risk of traumatization

0 - 3	4 - 7	8 - 10
Low risk	Medium risk	High risk

In case of a “medium risk” or a “high risk” rating, you may wish to refer your client to a mental or primary health professional, if you are not one yourself.

A “low risk” doesn’t exclude the possibility of your client having suffered traumatic experiences. Symptoms may appear later. Another screening should be carried out at a later time.

Further observations (for example, the person cries a lot, doesn’t react, pays no attention, has difficulties understanding the questions, special circumstances for the interview, etc.):

Please share these observations with your client.

We recommend that you review the completed Questionnaire with your client, and provide them with a signed copy for their records.

Name of client: _____

Date of Birth: ____ / ____ / ____

Country of Origin: _____

Date: ____ / ____ / ____

I agree that a copy of this document will be kept by the interviewer’s organization and may be used for statistical purposes.

Client’s Signature: _____

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Part 3: RESILIENCY INVENTORY

Now that you have assessed your client's settlement needs and mental health vulnerability, this third part of the **Vulnerability Screening Tool** is an opportunity for you to understand and document their sources of strength and resiliency. These sources of strength and resiliency may mitigate some of their vulnerability risk factors. These "coping resources" will vary widely from client to client, and, therefore, we recommend using an open-ended question as a means to start this conversation with your client. We recommend that you complete this part at the end of the screening process, as it closes the interview on a strengths-based and empowering note.

There are a number of ways in which to ask an open-ended question(s) about resiliency. If you have experience asking your client about their sources of strength and resiliency, you will likely have your own approach to this question. If you do not have this experience, we recommend you start the conversation with the sample question below. Sources of strength and resiliency are what a person draws on to get them through difficult moments in their life, and may constitute an identity, a practice, or involvement in a community. For example, a person may draw their strength and resiliency from a faith or spiritual practice, an art or music, a person or place, or involvement in a social, cultural, or political movement. Because the process of forced migration may result in a sense of loss for many refugees, we recommend that when you ask this question about sources of strength and resiliency, you ask what they "have" drawn on in difficult moments in their life, rather than what they "are" drawing on in this particular moment.

Below is a sample of a single open-ended question you could ask to start the conversation about your client's sources of strength and resiliency:

Q: What has helped you get through the most difficult moments of your life?

A: _____



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CONCLUSION

The following are points to consider in administering the **Vulnerability Screening Tool**:

- This document is **not** designed to be a diagnostic tool;
- The purpose of this tool is to provide service providers with information on clients' settlement needs, mental health symptoms, and sources of strength and resiliency, which may assist service providers to plan focused, effective, and time-limited interventions with refugee populations;
- Collaboration between settlement, mental health, primary health, interpreters, and refugee clients is crucial for effective early intervention;
- Contact the Provincial Refugee Mental Health Coordinator for consultation on administering this tool, interpreting the results, planning interventions, and making referrals. **Call 1-866-393-3133.**