

TAKE FIFTEEN

Assess Mental Health, Build Trust, Create Safety, and Decrease Stigma
in 15 minutes



This tool provides a breakdown of a fifteen minute encounter with a refugee client. The tool can be used in settings such as refugee resettlement agencies, hospitals, or mental health clinics. Case workers, physicians, and therapists often have just a brief appointment scheduled with refugee clientele. Using these points as a guide will not only allow for effective communication, but will also lay a foundation for that provider-client/patient relationship so vital to refugee populations.

TIME	GOAL	BENEFIT
3 MIN	INTRODUCE Yourself, Interpreter, Your Role, Confidentiality, Time Limitation, Goal of Assessment	Introduce yourself and the interpreter if applicable. Be clear about your role and that all new clients meet with you as part of the wellness package available to them. Explain that you have 15 minutes with them to ask them questions about how they are feeling physically and emotionally. Inform the client that this assessment will help determine what wellness services may be best for them. Remind them of confidentiality rules. Remember, offering clear information now will save you time later.
1 MIN	NAME Exchange Names; Review Title/Role	Exchange names; practice saying your client's name and where they are from; share your name and your title again. In recognizing your client's name, you are recognizing the client's individuality. Many refugees carry a name that correlates with cultural identity; hearing and saying a client's name can honor their cultural identity.
7 MIN	REVIEW & ASSESS Review Goal of Assessment; Complete Assessment	Explain (again) that you will be asking questions about how they are feeling physically and emotionally. Proceed with the mental health assessment, inquiring around symptoms such as sleeping, eating, thoughts, and aches/pains. Refer to your organization's current mental health assessment procedure, if necessary.
4 MIN	IDENTIFY Share Resources and Referrals	Based on what your client has shared, identify resources and referrals available to them. If you recommend a referral to your client be clear what a referral means and who will be in touch with the client next. For example, "Jane from the Sunrise Clinic will call you to schedule an appointment within the next two weeks." Explain that the service is based on your assessment that the client could benefit from a specific symptom shared during the assessment (i.e. sleeping better, sleeping without nightmares, stress management, etc.) and that you have seen many of your patients/clients benefit from that referred service. Decreasing stigma here may influence the client's willingness to make, keep, and attend their appointment with the referral service. If the client has stated that they feel fine (i.e. "okay," "it is all okay," "it will be okay; god-willing," "I am safe now that is all that matters", etc.) and/or denied any concerns, it is still important to share resources. Remember you are planting a seed. They may not want or feel a need for services at this time but may recall this resource later on if symptoms do arise or a willingness to share symptoms is developed.