The Santiago Immigrant Wellbeing Study (STRING): Prevalence of mood disorders among immigrants in Santiago, Chile

Submission date	Recruitment status No longer recruiting	[X] Prospectively registered		
20/10/2018		☐ Protocol		
Registration date	Overall study status Completed Condition category	Statistical analysis plan		
30/10/2018		Results		
Last Edited		Individual participant data		
28/10/2022	Mental and Behavioural Disorders	Record updated in last year		

Plain English summary of protocol

Background and study aims

Evidence suggests that a personal or family history of migration is a psychologically stressful life event and a risk factor for developing psychotic disorders and schizophrenia in some ethnic minorities and/or immigrant populations. However, research on the potential influence of immigration on the prevalence of affective disorders (i.e. depression, bipolar disorder) is more limited and the evidence is more ambiguous. The general aim of this study is to explore the prevalence of affective disorders and use of mental health services on immigrant populations in the Metropolitan Region of Santiago in Chile.

Who can participate?

Adults residing in private households in the Metropolitan Region of Santiago, Chile who were born outside of Chile and have lived in the country for at least 6 months

What does the study involve?

A 45 minute face to face interview covering socioeconomic situation, immigration history, experience of victimization, discrimination, alcohol use, social support, mental wellbeing, affective disorders, depressive and anxiety symptoms and experience of childhood adversity.

What are the possible benefits and risks of participating?

There are no known benefits or risks of participating in this study.

Where is the study run from?

Department of Psychiatry, School of Medicine, Pontifical Catholic University of Chile (Chile)

When is the study starting and how long is it expected to run for? October 2017 to October 2019

Who is funding the study?

Chilean National Commission for Scientific and Technological Research (CONICYT) (Chile)

Who is the main contact? Antonia Errázuriz anerrazuriz@uc.cl

Contact information

Type(s)

Scientific

Contact name

Dr Antonia Errazuriz

Contact details

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Additional identifiers

Protocol serial number

Fondecyt 11170828

Study information

Scientific Title

Prevalence of mood disorders and mental health service use among immigrants of the Metropolitan Region of Chile

Acronym

STRING

Study objectives

- 1. A healthy immigrant effect will be observed in the studied population by which their prevalence of Affective Disorders (AD) will be lower than the prevalence in the general Chilean population.
- 2. A significant association will be observed between the loss of socio-economic position after migration and a greater probability of AD in immigrants.
- 3. A significant association will be observed between the report of victimization experience(s) in the previous year and a greater probability of AD in immigrants.
- 4. A significant association will be observed between financial difficulties and a greater probability of AD in immigrants.

Ethics approval required

Old ethics approval format

Ethics approval(s)

- 1. Ethical Scientific Committee of the Social Sciences of the Pontifical Catholic University of Chile, 06/12/2017, ref: 170519004
- 2. Ethical Scientific Committee of the South Metropolitan Health Service of the Chilean Ministry of Health, 04/04/2018, ref: 145/2018

Study design

Observational epidemiological cross-sectional study

Primary study design

Observational

Study type(s)

Other

Health condition(s) or problem(s) studied

Affective/Mood Disorders

Interventions

The sampling framework of the Chilean National Institute of Statistics (INE) from the 2016 Census will be used in MRS and for the purpose of this research it included the following sampling units:

- 1. Primary sampling units (PSUs): conglomerates or groups of adjoining houses, organized in spatial blocks (200 households on average)
- 2. Secondary sampling units (SSUs): individual households within each of the conglomerates selected in the first stage
- 3. Final sampling units: persons meeting the study's inclusion criteria Multi-stage random probability sampling involving a 3-stage sampling design will be used first, the sampling of the primary sampling units (PSUs); second, the sampling of households within the selected PSUs and finally, the random sampling of a household member.

Participants will then take part in a 45-minute interview. This interview will be a household survey using the modular version of the Composite International Diagnostic Interview (WHO-CIDI) will be conducted to explore a broad spectrum of factors traditionally associated with increased risk of affective disorders:

- 1. Sociodemographics
- 2. Finance
- 3. Variation in socioeconomic position
- 4. Experience of victimization
- 5. Discrimination

Added 09/08/2019: 6. Experience of childhood adversity

Intervention Type

Other

Primary outcome(s)

Major depressive episodes, assessed using the World Health Organisation Composite International Diagnostic Interview (WHO-CIDI) at the study interview

Key secondary outcome(s))

The following are assessed at the study interview:

- 1. Any affective disorder, assessed using the World Health Organisation Composite International Diagnostic Interview (WHO-CIDI)
- 2. Bipolar disorder, assessed using the WHO-CIDI
- 3. Suicidal ideation, plans and attempts, assessed using the WHO-CIDI
- 4. Mental health service use, assessed using items SR27, SR37, SR47, SR57, SR133, SR139, SR143 and SR149 of the Services Module of the WHO-CIDI
- 5. Discrimination, assessed using the Spanish-validated version of the Everyday Discrimination Scale (EDS)
- 6. Mental wellbeing, assessed using the Warwick-Edinburgh Mental Well-Being Scale (WEMWBS)
- 7. Depressive symptoms, assessed using the nine-item Patient Health Questionnaire (PHQ-9)
- 8. Hazardous/harmful drinking, assessed using the Alcohol Use Disorders Identification Test (AUDIT)
- 9. Functional social support, assessed using the 11-item Duke-UNC Functional Social Support Questionnaire (FSSQ)

Added 09/08/2019:

- 10. Resilience assessed using the Connor-Davidson Resilience Scale (CD-RISC)
- 11. Childhood adversity using ítems from the Adverse Childhood Experience (ACE) Questionnaire
- 12. Anxiety symptoms assessed using the Generalized Anxiety Disorder 7-item (GAD-7) scale

Completion date

31/10/2019

Eligibility

Key inclusion criteria

- 1. Residents of the Metropolitan Area of Santiago (MAS), Chile
- 2. Born outside of Chile
- 3. Aged 18 or over
- 4. Lived in Chile for at least 3 months (updated 09/0/2019: for at least 6 months) Added 09/08/2019: 5. Be able to provide informed consent (participants unable to understand Spanish will not be recruited)

Participant type(s)

All

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 years

Sex

Αll

Total final enrolment

Key exclusion criteria

- 1. Inability to read and write
- 2. Suffering from disability or condition which makes participation in survey difficult
- 3. Both parents Chilean-born

Date of first enrolment

01/08/2019

Date of final enrolment

18/10/2019

Locations

Countries of recruitment

Chile

Study participating centre

Department of Psychiatry, School of Medicine of the Pontifical Catholic University of Chile

Av Libertador Bernardo O'Higgins 340

Santiago Chile

Cilite

8331150

Sponsor information

Organisation

Pontifical Catholic University of Chile (Pontificia Universidad Catolica de Chile)

ROR

https://ror.org/04teye511

Funder(s)

Funder type

Government

Funder Name

Comisión Nacional de Investigación Científica y Tecnológica

Alternative Name(s)

National Commission for Scientific and Technological Research, CONICYT

Funding Body Type

Government organisation

Funding Body Subtype

National government

Location

Chile

Results and Publications

Individual participant data (IPD) sharing plan

The datasets generated during and/or analysed during the current study are/will be available upon request from Dr Antonia Errazuriz (anerrazuriz@uc.cl). The anonymized database will be made available from 01/01/2022 to researchers from known research centers based upon the quality of the research proposal brought forward. Participants will give consent to this.

IPD sharing plan summary

Available on request

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Other publications		27/10/2022	28/10/2022	Yes	No
Participant information sheet	Participant information sheet	11/11/2025	11/11/2025	No	Yes