



## Torture Treatment Literature Selection, Q4 2015

The PATH literature bibliography is a resource for current literature on the topic of the mental health status of and treatments for torture survivors, war trauma survivors, refugees, and asylum seekers. This also includes research in the areas of social work that relate directly to the psychological wellbeing of these populations. The bibliography includes peer reviewed journal article citations in these areas; select original summaries of those articles; and links to the publicly available abstracts and full text versions of these articles. This bibliography is updated and distributed on a quarterly basis. The bibliography does not currently include articles on policy and advocacy.

### Contents

Selected Article Summaries .....	2
Linking Mental Health and Psychosocial Support Practices with Research Is Needed In Humanitarian Contexts .....	2
How to quantify exposure to traumatic stress? Reliability and predictive validity of measures for cumulative trauma exposure in a post-conflict population.....	3
Selected Article Citations by Topic .....	5
Health.....	5
Refugees.....	6
Trauma .....	8
Women.....	9
Youth/Children.....	9



## Selected Article Summaries

### *Linking Mental Health and Psychosocial Support Practices with Research Is Needed In Humanitarian Contexts*

Tol, W. A., Purgato, M., Bass, J. K., Galappatti, A., & Eaton, W. (2015). Mental health and psychosocial support in humanitarian settings: A public mental health perspective. *Epidemiology and Psychiatric Sciences*, 24(6), 484–494. [[abstract](#)]

Summary by: Eden Almasude, Volunteer with The Center for Victims of Torture

#### **Study Details**

Populations affected by conflict are exposed to widespread social upheaval and insecurity, sometimes leading to high rates of PTSD and depression. Because of this, mental health and psychosocial support (MHPSS) are a key component of humanitarian aid. This article analyzes current MHPSS practices and research to provide recommendations for humanitarian assistance.

#### **Study Sample**

The researchers reviewed MHPSS practices in the context of humanitarian crises in both low- and middle-income countries. The analysis included four aspects of MHPSS practices:

- Allocation of funds to MHPSS programming
- Awareness-raising of mental health needs
- Availability of psychiatric treatment
- Use of social activities in MHPSS programming

#### **Study Findings**

Based on their review of existing studies, the authors found that programming for sexually transmitted infections (primarily HIV/AIDS) and emergency and distress relief were the major areas of funding that included MHPSS assistance. Two-thirds of the studies analyzed were directed at multiple forms of psychological distress and were implemented by non-specialized, trained community workers.

The authors also conducted a meta-analysis of randomized controlled trials (RCTs) that tested diverse forms of psychosocial support or specific interventions for PTSD. The meta-analysis showed that these interventions significantly decreased PTSD symptoms among adults. Among children, PTSD symptoms did not decrease significantly in response to school-based interventions following an exposure to mass trauma. However, group- or school-based psychological interventions did improve symptoms of depression or anxiety. Studies involving children showed a high degree of heterogeneity. There are methodological limitations of conducting RCTs in the context of a humanitarian crisis and thus the quality of evidence for psychological interventions is moderate for adults or low for children and adolescents.

The authors also found that the majority of research studies focus on interventions for PTSD. This is potentially problematic because such interventions are rarely implemented in MHPSS programming; the



public health value of targeting this symptomology is also disputed by humanitarian workers. These interventions commonly include counselling, community-based social support, psychoeducation, and provision of information about mental health. However, there is little research to show that these activities are effective in improving mental health outcomes in humanitarian settings.

## **Conclusion**

The authors recommend that MHPSS researchers and practitioners collaborate in the development, design, and implementation of research projects and interventions to bridge the gap between practice and research. They specifically recommend strengthening the body of evidence by increasing allocation of funding to monitoring and evaluation of humanitarian programming. Improved research methodologies should be applied with considerations to social and cultural conceptions of mental health to generate better evidence of the effectiveness of a given intervention.

## ***How to quantify exposure to traumatic stress? Reliability and predictive validity of measures for cumulative trauma exposure in a post-conflict population***

Sarah Wilker, Anett Pfeiffer, Stephen Kolassa, Daniela Koslowski, Thomas Elbert and Iris-Tatjana Kolassa; *European Journal of Psychotraumatology*, 19 November 2015

Wilker, S., Pfeiffer, A., Kolassa, S., Koslowski, D., Elbert, T., & Kolassa, I.-T. (2015). How to quantify exposure to traumatic stress? Reliability and predictive validity of measures for cumulative trauma exposure in a post-conflict population. *European Journal of Psychotraumatology*, 6, 28306. [[Full Text](#)] [[abstract](#)]

Summary by: Frank Hennick, volunteer at the Center for Victims of Torture

## **Study Details**

Dr. Sarah Wilker and her team direct their study toward populations that have been exposed to extreme violence and trauma—among whom the likelihood of posttraumatic stress disorder (PTSD) is very high—and ask how best to empirically study this exposure. Among those who endure wartime traumas in conflict regions, the authors note, development of PTSD is all but given. But while this connection has been well established, relatively little research has aimed to identify the most efficient, accurate method for quantifying cumulative exposure—that is, among communities or groups of people. To address this, this article compares two methodologies, both of which have been used to gauge PTSD exposure and its likelihood. Drawing on data collected from a sample of 227 adult male Ugandan war survivors, the authors ask: is it best to focus on the *number* of different traumas experienced by survivors (via event checklists), or to measure the *frequency* with which survivors experienced traumatic events?

## **Study Findings**

In the end, this article recommends measuring cumulative trauma by the number of different traumas experienced by survivors. Traditionally, measuring cumulative trauma by the number of different



traumatic events experienced—also known as the classical trauma exposure variable—has been the preferred cumulative predictor of PTSD. But, this paper asks, could a different variable—the frequency with which these events occurred—offer more reliable predictions? The authors note that in studies aiming to measure PTSD likelihood or severity among those who *already show* symptoms, inclusion of frequency data can boost accuracy. However, the article cautions, this is likely matter of traumatic memories becoming inflated by repeated exposure. After an initial traumatic experience, a survivor often struggles to contextualize or remember the order of subsequent similar events. Moreover, inclusion of frequency data did nothing to help better predict PTSD among those who had not yet shown symptoms—lifetime PTSD risk—and the classical trauma exposure variable proved to be the more accurate measure in most such cases.

## Conclusion

The authors conclude that in all but a few efforts to predict PTSD among communities, the classical trauma exposure variable is a preferable method of gathering data. For one thing, it is a significantly simpler, less-costly process. Dr. Wilker and her team explain that, to fully assess how many times a survivor experienced a particular traumatic event, researchers must engage them in long, independently conducted interviews. Memories are often hazy, and a clear sense of frequency can be tough to establish. By contrast, studies using the classical trauma exposure variable need only gather “yes” or “no” answers as to whether a test participant suffered a given traumatic event. The authors argue that this is a considerably briefer and cheaper procedure and its data gave a more accurate measure of cumulative trauma exposure. Dr. Wilker emphasizes that for all its involvement and depth, the frequency variable was the *less* accurate of the two. In the interest of both efficiency and accuracy, then, the article confidently recommends the classical trauma exposure variables for research aiming to accurately predict PTSD among traumatized populations. There is a confirmed likelihood of PTSD among populations that share severe traumas, and given this, the article concludes it is generally best to build a wider knowledge of the *sorts* of such events, rather than how often they occurred.



## Selected Article Citations by Topic

### Health

Augusterfer, E. F., Mollica, R. F., & Lavelle, J. (2015). A review of telemental health in international and post-disaster settings. *International Review of Psychiatry*, 27(6), 540–546. [\[abstract\]](#)

Bozorgmehr, K., Schneider, C., & Joos, S. (2015). Equity in access to health care among asylum seekers in Germany: Evidence from an exploratory population-based cross-sectional study. *BMC Health Services Research*, 15, 502. [\[Full Text\]](#) [\[abstract\]](#)

George, U., Thomson, M. S., Chaze, F., & Guruge, S. (2015). Immigrant mental health, a public health issue: Looking back and moving forward. *International Journal of Environmental Research and Public Health*, 12(10), 13624–13648. [\[Full Text\]](#) [\[abstract\]](#)

Gobodo-Madikizela, P. (2015). Psychological Repair: The intersubjective dialogue of remorse and forgiveness in the aftermath of gross human rights violations. *Journal of the American Psychoanalytic Association*, 63(6), 1085–1123. [\[abstract\]](#)

Greene, R. R. (2015). Resilience and healing among Cambodian survivors of the Khmer Rouge regime. *Journal of Evidence-Informed Social Work*, 12(6), 579–587. [\[abstract\]](#)

Hocking, D. C., Kennedy, G. A., & Sundram, S. (2015). Social factors ameliorate psychiatric disorders in community-based asylum seekers independent of visa status. *Psychiatry Research*, 230(2), 628–636. [\[abstract\]](#)

Joscelyne, A., Knuckey, S., Satterthwaite, M. L., Bryant, R. A., Li, M., Qian, M., & Brown, A. D. (2015). Mental health functioning in the human rights field: Findings from an international internet-based survey. *PloS One*, 10(12), e0145188. [\[Full Text\]](#) [\[abstract\]](#)

King, D. W., King, L. A., Park, C. L., Lee, L. O., Kaiser, A. P., Spiro, A., ... Keane, T. M. (2015). Positive adjustment among American repatriated prisoners of the Vietnam War: Modeling the long-term effects of captivity. *Clinical Psychological Science: A Journal of the Association for Psychological Science*, 3(6), 861–876. [\[abstract\]](#)

Kira, I. A., Ramaswamy, V., Lewandowski, L., Mohanesh, J., & Abdul-Khalek, H. (2015). Psychometric assessment of the Arabic version of the internalized stigma of mental illness (ISMI) measure in a refugee population. *Transcultural Psychiatry*, 52(5), 636–658. [\[abstract\]](#)

Köbach, A., Schaal, S., Hecker, T., & Elbert, T. (2015). Psychotherapeutic intervention in the demobilization process: Addressing combat-related mental injuries with narrative exposure in a first and second dissemination stage. *Clinical Psychology & Psychotherapy*. [\[abstract\]](#)

Mujeeb, A. (2015). Mental health of internally displaced persons in Jalozi camp, Pakistan. *The International Journal of Social Psychiatry*, 61(7), 653–659. [\[abstract\]](#)

Nosè, M., Turrini, G., & Barbui, C. (2015). Access to mental health services and psychotropic drug use in refugees and asylum seekers hosted in high-income countries. *Epidemiology and Psychiatric Sciences*, 24(5), 379–381. [\[abstract\]](#)

Schneider, C., Joos, S., & Bozorgmehr, K. (2015). Disparities in health and access to healthcare between asylum seekers and residents in Germany: A population-based cross-sectional feasibility study. *BMJ Open*, 5(11), e008784. [\[Full Text\]](#) [\[abstract\]](#)

Sundvall, M., Tidemalm, D. H., Titelman, D. E., Runeson, B., & Bäärnhjelm, S. (2015). Assessment and treatment of asylum seekers after a suicide attempt: A comparative study of people registered at mental health services in a Swedish location. *BMC Psychiatry*, 15, 235. [\[Full Text\]](#) [\[abstract\]](#)

Talbot, N., Pahlevan, B., & Boyles, J. (2015). We cannot talk if we do not feel free. *Therapy Today*, 26(8), 12–17. [\[Full Text\]](#)

Tanabe, M., Nagujjah, Y., Rimal, N., Bukania, F., & Krause, S. (2015). Intersecting sexual and reproductive health and disability in humanitarian settings: Risks, needs, and capacities of refugees with disabilities in Kenya, Nepal, and Uganda. *Sexuality and Disability*, 33(4), 411–427. [\[Full Text\]](#) [\[abstract\]](#)

Tay, A. K., Rees, S., Chen, J., Kareth, M., & Silove, D. (2015b). Pathways involving traumatic losses, worry about family, adult separation anxiety and posttraumatic stress symptoms amongst refugees from West Papua. *Journal of Anxiety Disorders*, 35, 1–8. [\[abstract\]](#)

Thomson, M. S., Chaze, F., George, U., & Guruge, S. (2015). Improving immigrant populations' access to mental health services in Canada: A review of barriers and recommendations. *Journal of Immigrant and Minority Health / Center for Minority Public Health*, 17(6), 1895–1905. [\[abstract\]](#)

Tol, W. A., Purgato, M., Bass, J. K., Galappatti, A., & Eaton, W. (2015). Mental health and psychosocial support in humanitarian settings: A public mental health perspective. *Epidemiology and Psychiatric Sciences*, 24(6), 484–494. [\[abstract\]](#)

Weiss, W. M., Murray, L. K., Zangana, G. A. S., Mahmooth, Z., Kaysen, D., Dorsey, S., ... Bolton, P. (2015). Community-based mental health treatments for survivors of torture and militant attacks in southern Iraq: A randomized control trial. *BMC Psychiatry*, 15, 249. [\[Full Text\]](#) [\[abstract\]](#)

## Refugees

Akinyemi, O. O., Atilola, O., & Soyannwo, T. (2015). Suicidal ideation: Are refugees more at risk compared to host population? Findings from a preliminary assessment in a refugee community in Nigeria. *Asian Journal of Psychiatry*, 18, 81–85. [\[abstract\]](#)

Akoury-Dirani, L., Sahakian, T. S., Hassan, F. Y., Hajjar, R. V., & Asmar, K. E. (2015). Psychological first aid training for Lebanese field workers in the emergency context of the Syrian refugees in Lebanon. *Psychological Trauma: Theory, Research, Practice and Policy*, 7(6), 533–538. [\[abstract\]](#)

Bogic, M., Njoku, A., & Priebe, S. (2015). Long-term mental health of war-refugees: A systematic literature review. *BMC International Health and Human Rights*, 15, 29. [\[Full Text\]](#) [\[abstract\]](#)



- Dalgaard, N. T., & Montgomery, E. (2015b). Disclosure and silencing: A systematic review of the literature on patterns of trauma communication in refugee families. *Transcultural Psychiatry*, 52(5), 579–593. [[Full Text](#)] [[abstract](#)]
- Elsouhag, D., Arnetz, B., Jamil, H., Lumley, M. A., Broadbridge, C. L., & Arnetz, J. (2015). Factors associated with healthcare utilization among Arab immigrants and Iraqi refugees. *Journal of Immigrant and Minority Health / Center for Minority Public Health*, 17(5), 1305–1312. [[abstract](#)]
- Hecker, T., Fetz, S., Ainamani, H., & Elbert, T. (2015). The cycle of violence: Associations between exposure to violence, trauma-related symptoms and aggression-findings from Congolese refugees in Uganda. *Journal of Traumatic Stress*, 28(5), 448–455. [[abstract](#)]
- Jackson, C. (2015). The migrant crisis: Helping Syrian refugees. *Therapy Today*, 26(8), 6–10. [[Full Text](#)]
- Jen, K.-L. C., Zhou, K., Arnetz, B., & Jamil, H. (2015). Pre- and post-displacement stressors and body weight development in Iraqi refugees in Michigan. *Journal of Immigrant and Minority Health / Center for Minority Public Health*, 17(5), 1468–1475. [[abstract](#)]
- Keatley, E., d'Alfonso, A., Abeare, C., Keller, A., & Bertelsen, N. S. (2015). Health outcomes of traumatic brain injury among refugee survivors of torture. *The Journal of Head Trauma Rehabilitation*, 30(6), E1–8. [[abstract](#)]
- Lamkaddem, M., Essink-Bot, M.-L., Devillé, W., Gerritsen, A., & Stronks, K. (2015). Health changes of refugees from Afghanistan, Iran and Somalia: The role of residence status and experienced living difficulties in the resettlement process. *European Journal of Public Health*, 25(6), 917–922. [[abstract](#)]
- Mikal, J. P., & Woodfield, B. (2015). Refugees, post-migration stress, and internet use: A qualitative analysis of intercultural adjustment and internet use among Iraqi and Sudanese refugees to the United States. *Qualitative Health Research*, 25(10), 1319–1333. [[abstract](#)]
- Muennig, P., Boulmier-Darden, P., Khouzam, N., Zhu, W., & Hancock, P. (2015). Predictors of health among refugee adults from Myanmar and the development of their children. *Journal of Immigrant and Minority Health / Center for Minority Public Health*, 17(5), 1385–1390. [[abstract](#)]
- Puvimanasinghe, T., Denson, L. A., Augoustinos, M., & Somasundaram, D. (2015). Vicarious resilience and vicarious traumatization: Experiences of working with refugees and asylum seekers in South Australia. *Transcultural Psychiatry*, 52(6), 743–765. [[abstract](#)]
- Salo, C. D., & Birman, D. (2015). Acculturation and psychological adjustment of Vietnamese refugees: An ecological acculturation framework. *American Journal of Community Psychology*, 56(3-4), 395–407. [[abstract](#)]
- Shannon, P. J., Vinson, G. A., Wieling, E., Cook, T., & Letts, J. (2015). Torture, war trauma, and mental health symptoms of newly arrived Karen refugees. *Journal of Loss & Trauma*, 20(6), 577–590. [[abstract](#)]



Thikeo, M., Florin, P., & Ng, C. (2015). Help seeking attitudes among Cambodian and Laotian refugees: Implications for public mental health approaches. *Journal of Immigrant and Minority Health / Center for Minority Public Health*, 17(6), 1679–1686. [\[abstract\]](#)

Tingvold, L., Vaage, A. B., Allen, J., Wentzel-Larsen, T., van Ta, T., & Hauff, E. (2015). Predictors of acculturative hassles among Vietnamese refugees in Norway: Results from a long-term longitudinal study. *Transcultural Psychiatry*, 52(5), 700–714. [\[abstract\]](#)

Vonnahme, L. A., Lankau, E. W., Ao, T., Shetty, S., & Cardozo, B. L. (2015). Factors associated with symptoms of depression among Bhutanese refugees in the United States. *Journal of Immigrant and Minority Health / Center for Minority Public Health*, 17(6), 1705–1714. [\[abstract\]](#)

White, C. C., Solid, C. A., Hodges, J. S., & Boehm, D. H. (2015). Does integrated care affect healthcare utilization in multi-problem refugees? *Journal of Immigrant and Minority Health / Center for Minority Public Health*, 17(5), 1444–1450. [\[abstract\]](#)

## Trauma

Helpman, L., Besser, A., & Neria, Y. (2015). Acute posttraumatic stress symptoms but not generalized anxiety symptoms are associated with severity of exposure to war trauma: A study of civilians under fire. *Journal of Anxiety Disorders*, 35, 27–34. [\[abstract\]](#)

Katsounari, I. (2015). Narrative exposure therapy for treating PTSD with psychotic features. *Clinical Case Studies*, 14(5), 342–356. [\[abstract\]](#)

Magruder, K. M., Kiliç, C., & Koryürek, M. M. (2015). Relationship of posttraumatic growth to symptoms of posttraumatic stress disorder and depression: A pilot study of Iraqi students. *International Journal of Psychology: Journal International De Psychologie*, 50(5), 402–406. [\[abstract\]](#)

Mpinga, E. K., Kandala, N.-B., Hasselgård-Rowe, J., Tshimungu Kandolo, F., Verloo, H., Bukonda, N. K. Z., & Chastonay, P. (2015). Estimating the costs of torture: Challenges and opportunities. *Applied Health Economics and Health Policy*, 13(6), 567–581. [\[abstract\]](#)

Nordbrandt, M. S., Carlsson, J., Lindberg, L. G., Sandahl, H., & Mortensen, E. L. (2015). Treatment of traumatised refugees with basic body awareness therapy versus mixed physical activity as add-on treatment: Study protocol of a randomised controlled trial. *Trials*, 16, 477. [\[Full Text\]](#) [\[abstract\]](#)

Rasmussen, A., Verkuilen, J., Ho, E., & Fan, Y. (2015). Posttraumatic stress disorder among refugees: Measurement invariance of Harvard Trauma Questionnaire scores across global regions and response patterns. *Psychological Assessment*, 27(4), 1160–1170. [\[abstract\]](#)

Shamia, N. A., Thabet, A. A. M., & Vostanis, P. (2015). Exposure to war traumatic experiences, post-traumatic stress disorder and post-traumatic growth among nurses in Gaza. *Journal of Psychiatric and Mental Health Nursing*, 22(10), 749–755. [\[abstract\]](#)

Slobodin, O., & de Jong, J. T. V. M. (2015). Family interventions in traumatized immigrants and refugees: A systematic review. *Transcultural Psychiatry*, 52(6), 723–742. [\[abstract\]](#)



Wilker, S., Pfeiffer, A., Kolassa, S., Koslowski, D., Elbert, T., & Kolassa, I.-T. (2015). How to quantify exposure to traumatic stress? Reliability and predictive validity of measures for cumulative trauma exposure in a post-conflict population. *European Journal of Psychotraumatology*, 6, 28306. [[Full Text](#)] [[abstract](#)]

## Women

Blay-Tofey, M., & Lee, B. X. (2015). Preventing gender-based violence engendered by conflict: The case of Côte d'Ivoire. *Social Science & Medicine*, (1982), 146, 341–347. [[abstract](#)]

Espinoza, E. C., Rivera-Holguín, M., Pacheco, M. S., Sotelo, E. A., & Béjar, P. U. (2015). Women's participation in a postconflict community in Peru. *Journal of Prevention & Intervention in the Community*, 43(4), 279–290. [[abstract](#)]

Godoy-Ruiz, P., Toner, B., Mason, R., Vidal, C., & McKenzie, K. (2015). Intimate partner violence and depression among Latin American women in Toronto. *Journal of Immigrant and Minority Health / Center for Minority Public Health*, 17(6), 1771–1780. [[abstract](#)]

Khan, M. N., Chiumento, A., Dherani, M., Bristow, K., Sikander, S., & Rahman, A. (2015). Psychological distress and its associations with past events in pregnant women affected by armed conflict in Swat, Pakistan: A cross sectional study. *Conflict and Health*, 9, 37. [[Full Text](#)] [[abstract](#)]

Kim, S.-H., Goodman, G. M., Toruno, J. A., Sherry, A. R., & Kim, H. K. (2015). The cross-cultural validity of the MMPI-2-RF higher-order scales in a sample of North Korean female refugees. *Assessment*, 22(5), 640–649. [[abstract](#)]

Nelson-Peterman, J. L., Toof, R., Liang, S. L., & Grigg-Saito, D. C. (2015). Long-term refugee health: Health behaviors and outcomes of Cambodian refugee and immigrant women. *Health Education & Behavior: The Official Publication of the Society for Public Health Education*, 42(6), 814–823. [[abstract](#)]

Vaughan, C., Murdolo, A., Murray, L., Davis, E., Chen, J., Block, K., ... Warr, D. (2015). ASPIRE: A multi-site community-based participatory research project to increase understanding of the dynamics of violence against immigrant and refugee women in Australia. *BMC Public Health*, 15(1), 1283. [[Full Text](#)] [[abstract](#)]

Vyas, S., Jansen, H. A., Heise, L., & Mbwambo, J. (2015). Exploring the association between women's access to economic resources and intimate partner violence in Dar es Salaam and Mbeya, Tanzania. *Social Science & Medicine*, 146, 307–315. [[abstract](#)]

## Youth/Children

Amone-P'Olak, K., Ovuga, E., & Jones, P. B. (2015). The effects of sexual violence on psychosocial outcomes in formerly abducted girls in Northern Uganda: The WAYS study. *BMC Psychology*, 3(1), 46. [[Full Text](#)] [[abstract](#)]

Betancourt, T. S., McBain, R. K., Newnham, E. A., & Brennan, R. T. (2015). The intergenerational impact of war: Longitudinal relationships between caregiver and child mental health in postconflict Sierra Leone. *Journal of Child Psychology and Psychiatry, and Allied Disciplines*, 56(10), 1101–1107. [[abstract](#)]



Cherewick, M., Kohli, A., Remy, M. M., Murhula, C. M., Kurhorhwa, A. K. B., Mirindi, A. B., ... Glass, N. (2015). Coping among trauma-affected youth: A qualitative study. *Conflict and Health*, 9, 35. [[Full Text](#)] [[abstract](#)]

Colucci, E., Minas, H., Szwarc, J., Guerra, C., & Paxton, G. (2015). In or out? Barriers and facilitators to refugee-background young people accessing mental health services. *Transcultural Psychiatry*, 52(6), 766–790. [[abstract](#)]

Correa-Velez, I., Gifford, S. M., & McMichael, C. (2015). The persistence of predictors of wellbeing among refugee youth eight years after resettlement in Melbourne, Australia. *Social Science & Medicine*, 142, 163–168. [[abstract](#)]

Davidson, L. L., Grigorenko, E. L., Boivin, M. J., Rapa, E., & Stein, A. (2015). A focus on adolescence to reduce neurological, mental health and substance-use disability. *Nature*, 527(7578), S161–166. [[abstract](#)]

Foster, H., & Brooks-Gunn, J. (2015). Children's exposure to community and war violence and mental health in four African countries. *Social Science & Medicine*, 146, 292–299. [[abstract](#)]

Hemmati, M. A., Shokoohi, H., Masoumi, M., Khateri, S., Soroush, M., Modirian, E., ... Mousavi, B. (2015). Mental health disorders in child and adolescent survivors of post-war landmine explosions. *Military Medical Research*, 2, 30. [[Full Text](#)] [[abstract](#)]

Joshi, P. T., & Fayyad, J. A. (2015). Displaced Children: The psychological implications. *Child and Adolescent Psychiatric Clinics of North America*, 24(4), 715–730. [[abstract](#)]

Kaiser, M., Kuwert, P., Braehler, E., & Glaesmer, H. (2015). Depression, somatization, and posttraumatic stress disorder in children born of occupation after World War II in comparison with a general population. *The Journal of Nervous and Mental Disease*, 203(10), 742–748. [[abstract](#)]

McBain, R. K., Salhi, C., Hann, K., Kellie, J., Kamara, A., Salomon, J. A., ... Betancourt, T. S. (2015). Improving outcomes for caregivers through treatment of young people affected by war: A randomized controlled trial in Sierra Leone. *Bulletin of the World Health Organization*, 93(12), 834–841. [[Full Text](#)] [[abstract](#)]

McGuinness, T. M., & Durand, S. C. (2015). Mental health of young refugees. *Journal of Psychosocial Nursing and Mental Health Services*, 53(12), 16–18. [[abstract](#)]

Moussa, S., Kholy, M. E., Enaba, D., Salem, K., Ali, A., Nasreldin, M., ... Moselhy, H. F. (2015). Impact of political violence on the mental health of school children in Egypt. *Journal of Mental Health*, 24(5), 289–293. [[abstract](#)]

Pottie, K., Dahal, G., Georgiades, K., Premji, K., & Hassan, G. (2015). Do first generation immigrant adolescents face higher rates of bullying, violence and suicidal behaviours than do third generation and



native born? *Journal of Immigrant and Minority Health / Center for Minority Public Health*, 17(5), 1557–1566. [[Full Text](#)] [[abstract](#)]

Ramo-Fernández, L., Schneider, A., Wilker, S., & Kolassa, I.-T. (2015). Epigenetic alterations associated with war trauma and childhood maltreatment. *Behavioral Sciences & the Law*, 33(5), 701–721. [[abstract](#)]

Scales, P. C., Roehlkepartain, E. C., Wallace, T., Inselman, A., Stephenson, P., & Rodriguez, M. (2015). Brief report: Assessing youth well-being in global emergency settings: Early results from the Emergency Developmental Assets Profile. *Journal of Adolescence*, 45, 98–102. [[abstract](#)]

Skårdalsmo Bjørge, E. M., & Jensen, T. K. (2015). Unaccompanied refugee minors' early life narratives of physical abuse from caregivers and teachers in their home countries. *Child Abuse & Neglect*, 48, 148–159. [[abstract](#)]

Smetana, J. G., Ahmad, I., & Wray-Lake, L. (2015). Iraqi, Syrian, and Palestinian refugee adolescents' beliefs about parental authority legitimacy and its correlates. *Child Development*, 86(6), 2017–2033. [[abstract](#)]

Sriskandarajah, V., Neuner, F., & Catani, C. (2015). Predictors of violence against children in Tamil families in northern Sri Lanka. *Social Science & Medicine*, 146, 257–265. [[abstract](#)]

Stark, L., DeCormier Plosky, W., Horn, R., & Canavera, M. (2015). “He always thinks he is nothing”: The psychosocial impact of discrimination on adolescent refugees in urban Uganda. *Social Science & Medicine* (1982), 146, 173–181. [[abstract](#)]

Thakkar, M. J., Jaffe, A. M., & Vander Linden, R. S. (2015). Guidelines for conducting a victim-sensitive interview. *Journal of Child Sexual Abuse*, 24(7), 717–730. [[abstract](#)]

Unterhitzberger, J., Eberle-Sejari, R., Rassenhofer, M., Sukale, T., Rosner, R., & Goldbeck, L. (2015). Trauma-focused cognitive behavioral therapy with unaccompanied refugee minors: A case series. *BMC Psychiatry*, 15, 260. [[Full Text](#)] [[abstract](#)]

Vermette, D., Shetgiri, R., Al Zuheiri, H., & Flores, G. (2015). Healthcare access for Iraqi refugee children in Texas: Persistent barriers, potential solutions, and policy implications. *Journal of Immigrant and Minority Health / Center for Minority Public Health*, 17(5), 1526–1536. [[abstract](#)]

Wolmer, L., Hamiel, D., Versano-Eisman, T., Slone, M., Margalit, N., & Laor, N. (2015). Preschool Israeli children exposed to rocket attacks: Assessment, risk, and resilience. *Journal of Traumatic Stress*, 28(5), 441–447. [[abstract](#)]