



Torture Treatment Literature Selection, Q2 2016

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.

CVT Volunteer Contributions to this Bibliography

- **Carolyn Easton** conducted the literature search and compiled the citations for this bibliography.
- **Ellie Lewis** organized, formatted, and edited the content of this bibliography.
- **Eden Almasude and Frank Hennick** wrote summaries of selected articles for this bibliography.
- **Jared Del Rosso** reviewed the selected article summaries for this bibliography.

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Selected Article Summaries:

Accelerated resolution therapy emerges as a new therapeutic approach to treating PTSD

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

Study Details

This article summarizes research on accelerated resolution therapy (ART), providing an overview of a hybridized new approach to treating PTSD. ART is a psychotherapy technique for PTSD which uses aspects of EMDR (eye movement desensitization and reprocessing) in a systematic fashion. It is an emerging approach, particularly in military contexts due to the need for widespread treatment of traumatic disorders.

Guidelines from both the United Kingdom and United States recommend trauma-focused therapies as first-line treatment for PTSD, which are most commonly prolonged exposure (PE) therapy and EMDR. ART typically achieves a positive outcome in 1-5 therapy sessions over the course of two weeks. Its goal is to re-process distressing memories through sets of eye movements and visual imagery to create more positive associations with the traumatic incidents.

During an ART session, imaginal exposure is used to visualize a traumatic event, during which eye movements are conducted and the patient notes their somatic sensations and emotions that arise. This is similar to EMDR, but without free associations. In the second component of ART, imagery rescripting works to re-process the traumatic memory by changing the imagery and sensory components linked to it. This approach is deemed successful when the original memory no longer arouses distress.

ART is intended to systematically work through traumatic memories and focuses on the somatic sensations associated with them. It does not require verbalization, and thus may be less challenging for individuals who have difficulty speaking about their experiences. However, similar to EMDR, the focus on distressing memories may be destabilizing for some and it requires the patient to be relatively stable at the initiation of therapy. Similar to other therapies, some individuals may have resistance to receiving treatment due to feelings of guilt or have avoidance from fears of confronting memories directly.

Study Findings

There is an ongoing question of whether ART should be considered a first-line treatment or for PTSD that has not responded to other efficacious treatments. The short-time nature of the approach means that it is cost-effective and can be used on a large scale while an institution's capacity for doing psychotherapy is limited. It also has a lower drop-out rate, as it does not



require the same commitment or therapeutic relationship as other approaches. Research is ongoing for ART as compared to other therapies, particularly with regards to the nature of the trauma. Whether it could be indicated for survivors of torture and other forms of political violence is unclear. The long-term nature of imprisonment and torture for many could mean that ART would be insufficient to achieve significant benefits. However, it could also be practical as a means of harnessing the benefits of EMDR in refugee camps and other highly resource-limited settings where longer-term psychotherapy is difficult to conduct.



Obsessive-compulsive and posttraumatic stress symptoms among civilian survivors of war

Summary by: Frank Hennick, Volunteer with The Center for Victims of Torture

Study Details

There is an acknowledged link between obsessive-compulsive symptoms and traumatic experiences, and Dr. Morina and his colleagues aim to elucidate less-explored facets of “posttraumatic obsessive compulsive disorder.” He and his team seek to better understand OCD (obsessive compulsive disorder) amongst war survivors and the disorder’s possible interactions with PTSD (post-traumatic stress disorder) and depressive symptoms. Other studies have identified high rates of OCD among wartime survivors, noting frequent coincidence with PTSD symptoms. Little is understood, though, about how OCD symptoms may interact with the symptoms of survivors’ other mental illnesses. Moreover, no studies have analyzed obsessive-compulsive symptoms among war trauma survivors *after* they had relocated to a new country. The authors identify two main goals for this study:

1. To analyze OCD symptoms to reveal possible connections between the symptoms of posttraumatic stress and depression.
2. To determine whether PTSD or depressive symptoms alone account for OCD or whether they interact in a way that brings OCD about.

Study Sample

This project centered on Kosovars who had relocated to Switzerland after the 1998-99 Kosovo War. Many of these émigrés had experienced and/or witnessed traumatic events, and the authors suggest that data gathered from such a specific population can provide more generally applicable insights.

The research team recruited 51 adult participants for the study, 28 males and 23 females who had endured the war and subsequently emigrated to Switzerland. The team gathered its data by way of 60-90 minute interviews, modifying the following questionnaires of OCD, PTSD, and depression to suit refugee experiences:

- Obsessive-Compulsive Inventory (OCI-R)
- Posttraumatic Diagnostic Scale (PDS)
- Hopkins Symptom Checklist (HSCL-25)

Study Findings

High percentages of participants reported symptoms of OCD and PTSD, 35% and 39%, respectively. The rate of depression was high as well (45%). Among the most frequently reported potentially traumatic experiences (PTES) were lack of shelter, lack of food or water,

combat situations, lack of medical care, and forced separation from family. The study identified six “core” OCD symptomatic behaviors: washing, obsessions, hoarding, ordering, checking, and mental neutralizing; with frequent washing and obsessions as the most common.

The authors found a strong relationship between OCD and likely PTSD symptoms. Indeed, 80% of participants with PTSD symptoms met criteria for OCD, and 89% of those with OCD symptoms met the criteria for PTSD. However, the study notes, neither depression nor the *number* of different PTEs had a measurable impact on the likelihood of OCD. Rather, gender and PTE severity mediated OCD results: women were more likely to express OCD symptoms, and greater PTE severity produced higher symptom rates for both genders.

Conclusions

The authors consider the strong correlation between OCD and PTSD symptoms to be the study’s most significant finding. They speculate that this 80% rate of coincidence could be the result of several factors. For one, they point to how other studies in the field have understood the two disorders to be fundamentally similar, each essentially a function of anxiety and intrusive thoughts. Further, they suggest that the anxious habits of mind from wartime can all-too easily continue after the violence has ceased.

Women displayed markedly higher rates of OCD, despite equal rates of incidence in epidemiological studies. This, the authors suggest, could be caused by the disparity in whether/how the sexes experienced wartime traumas, as well as by the possibility that men are reluctant to acknowledge the symptoms. Contrary to epidemiological literature, Dr. Molina and his team found no gender difference in rates of likely PTSD. The traumatic experiences of men and women in this war were often comparable, however, and Dr. Molina proposes that this may account for the similar statistics.

The paper lists five limiting factors to be considered: the study’s small sample size (n=51); possible demographic and/or psychological differences between Kosovan émigrés and those still in the country; lack of knowledge of OCD and PTSD rates before the war; the non-clinical format of the interviews and the use of self-reporting in them; and the possibility that underlying, general stress could generate both OCD and PTSD symptoms. The paper concludes that more attention needs to go toward understanding OCD as a posttraumatic affliction and that given such strong evidence for interactions between OCD and PTSD symptoms, studies need to consider OCD and other mental disorders in their appraisals of PTSD.



Selected Article Citations By Topic:

Children/Youth

Fleck, R. (2016). In two Maine towns, schools address the mental health of refugee children. *Health Affairs (Project Hope)*, 35(6), 1136–1140. [[Full Text](#)] [[abstract](#)]

Graham, H. R., Minhas, R. S., & Paxton, G. (2016). Learning problems in children of refugee background: A systematic review. *Pediatrics*, 137(6). [[abstract](#)]

Horyniak, D., Higgs, P., Cogger, S., Dietze, P., & Bofu, T. (2016). Heavy alcohol consumption among marginalised African refugee young people in Melbourne, Australia: Motivations for drinking, experiences of alcohol-related problems and strategies for managing drinking. *Ethnicity & Health*, 21(3), 284–299. [[abstract](#)]

Latzman, R. D., Malikina, M. V., Hecht, L. K., Lilienfeld, S. O., & Chan, W. Y. (2016). The contribution of personality and refugee camp experience to callous and unemotional traits among immigrant adolescents in the United States: Implications for the DSM-5 “limited prosocial emotions” specifier. *Child Psychiatry and Human Development*, 47(2), 215–225. [[abstract](#)]

Lavi, T., Itzhaky, L., Menachem, M., & Solomon, Z. (2016). Adolescents on the front line: Exposure to shelling via television and the parental role. *Psychiatry*, 79(1), 85–94. [[abstract](#)]

McBain, R. K., Salhi, C., Hann, K., Salomon, J. A., Kim, J. J., & Betancourt, T. S. (2016). Costs and cost-effectiveness of a mental health intervention for war-affected young persons: Decision analysis based on a randomized controlled trial. *Health Policy and Planning*, 31(4), 415–424. [[abstract](#)]

McGregor, L. S., Melvin, G. A., & Newman, L. K. (2016). An exploration of the adaptation and development after persecution and trauma (ADAPT) model with resettled refugee adolescents in Australia: A qualitative study. *Transcultural Psychiatry*, 53(3), 347–367. [[abstract](#)]

Mhaidat, F. (2016). The adaptive problems of female teenage refugees and their behavioral adjustment methods for coping. *Psychology Research and Behavior Management*, 9, 95–103. [[Full Text](#)] [[abstract](#)]

Miller, K. E., & Jordans, M. J. D. (2016). Determinants of children’s mental health in war-torn settings: Translating research into action. *Current Psychiatry Reports*, 18(6), 58. [[abstract](#)]

Milovancevic, M. P., Ispanovic, V., & Stupar, D. (2016). Lessons learned from the past on mental health care of refugee children in Serbia. *European Child & Adolescent Psychiatry*, 25(6), 669–672. [[Full Text](#)] [no abstract]



Pfefferbaum, B., Nitiéma, P., Jacobs, A. K., Noffsinger, M. A., Wind, L. H., & Allen, S. F. (2016). Review of coping in children exposed to mass trauma: Measurement tools, coping styles, and clinical implications. *Prehospital and Disaster Medicine*, 31(2), 169–180. [[abstract](#)]

Saile, R., Ertl, V., Neuner, F., & Catani, C. (2016). Children of the postwar years: A two-generational multilevel risk assessment of child psychopathology in northern Uganda. *Development and Psychopathology*, 28(2), 607–620. [[abstract](#)]

Sleijpen, M., Boeije, H. R., Kleber, R. J., & Mooren, T. (2016). Between power and powerlessness: A meta-ethnography of sources of resilience in young refugees. *Ethnicity & Health*, 21(2), 158–180. [[abstract](#)]

Sullivan, A. L., & Simonson, G. R. (2016). A systematic review of school-based social-emotional interventions for refugee and war-traumatized youth. *Review of Educational Research*, 86(2), 503–530. [[abstract](#)]

Valeras, A. B. (2016). Refugee patients. *Families, Systems & Health: The Journal of Collaborative Family Healthcare*, 34(2), 177. [[abstract](#)]

Vaska, A. I., Benson, J., Elliott, J. A., & Williams, J. (2016). Age determination in refugee children: A narrative history tool for use in holistic age assessment. *Journal of Paediatrics and Child Health*, 52(5), 523–528. [[abstract](#)]

War, F. A., Ved, R. S., & Paul, M. A. (2016). Mental health and self-esteem of institutionalized adolescents affected by armed conflict. *Journal of Religion and Health*, 55(2), 593–601. [[abstract](#)]

Zandieh, S., Bernt, R., Knoll, P., Wenzel, T., Hittmair, K., Haller, J., ... Mirzaei, S. (2016). Analysis of the metabolic and structural brain changes in patients with torture-related post-traumatic stress disorder (TR-PTSD) using 18F-FDG PET and MRI. *Medicine*, 95(15), e3387. [[Full Text](#)] [[abstract](#)]

Mental Health

Abu-El-Noor, N. I., Aljeesh, Y. I., Radwan, A. S., Abu-El-Noor, M. K., Qddura, I. A.-I., Khadoura, K. J., & Alnawajha, S. K. (2016). Post-traumatic stress disorder among health care providers following the Israeli attacks against Gaza Strip in 2014: A call for immediate policy actions. *Archives of Psychiatric Nursing*, 30(2), 185–191. [[abstract](#)]

Bäärnhielm, S. (2016). Refugees' mental health - a call for a public health approach with focus on resilience and cultural sensitivity. *European Journal of Public Health*, 26(3), 375–376. [[Full Text](#)] [no abstract]



Beiser, M., & Hou, F. (2016). Mental health effects of premigration trauma and postmigration discrimination on refugee youth in Canada. *The Journal of Nervous and Mental Disease*, 204(6), 464–470. [[abstract](#)]

Blanco, A., Blanco, R., & Díaz, D. (2016). Social (dis)order and psychosocial trauma: Look earlier, look outside, and look beyond the persons. *The American Psychologist*, 71(3), 187–198. [[abstract](#)]

Cilliers, J., Dube, O., & Siddiqi, B. (2016). Reconciling after civil conflict increases social capital but decreases individual well-being. *Science (New York, N.Y.)*, 352(6287), 787–794. [[abstract](#)]

Ertl, V., Saile, R., Neuner, F., & Catani, C. (2016). Drinking to ease the burden: A cross-sectional study on trauma, alcohol abuse and psychopathology in a post-conflict context. *BMC Psychiatry*, 16, 202. [[Full Text](#)] [[abstract](#)]

Finnegan, A., Kip, K., Hernandez, D., McGhee, S., Rosenzweig, L., Hynes, C., & Thomas, M. (2016). Accelerated resolution therapy: An innovative mental health intervention to treat post-traumatic stress disorder. *Journal of the Royal Army Medical Corps*, 162(2), 90–97. [[abstract](#)]

Hassan, G., Ventevogel, P., Jefee-Bahloul, H., Barkil-Oteo, A., & Kirmayer, L. J. (2016). Mental health and psychosocial wellbeing of Syrians affected by armed conflict. *Epidemiology and Psychiatric Sciences*, 25(2), 129–141. [[abstract](#)]

Jabłoński, R., Rosińczuk, J., Leszek, J., Uchmanowicz, I., & Panaszek, B. (2016). The progressive nature of concentration camp syndrome in former prisoners of Nazi concentration camps - Not just history, but the important issue of contemporary medicine. *Journal of Psychiatric Research*, 75, 1–6. [[abstract](#)]

Kaminer, D., Eagle, G., & Crawford-Browne, S. (2016). Continuous traumatic stress as a mental and physical health challenge: Case studies from South Africa. *Journal of Health Psychology*. [[abstract](#)]

Karam, G., Itani, L., Fayyad, J., Karam, A., Mneimneh, Z., & Karam, E. (2016). Prevalence, correlates, and treatment of mental disorders among Lebanese older adults: A national study. *The American Journal of Geriatric Psychiatry: Official Journal of the American Association for Geriatric Psychiatry*, 24(4), 278–286. [[abstract](#)]

Kulenovic, A. D., Agani, F., Avdibegovic, E., Jakovljevic, M., Babic, D., Kucukalic, A., ... Deckert, J. (2016). Molecular mechanisms of posttraumatic stress disorder (PTSD) as a basis for individualized and personalized therapy: Rationale, design and methods of the South Eastern Europe (SEE)-PTSD study. *Psychiatria Danubina*, 28(2), 154–163. [[Full Text](#)] [[abstract](#)]



- Leach, J. (2016). Psychological factors in exceptional, extreme and torturous environments. *Extreme Physiology & Medicine*, 5, 7. [[Full Text](#)] [[abstract](#)]
- Lee, J. P., Kirkpatrick, S., Rojas-Cheatham, A., Sin, T., Moore, R. S., Tan, S., ... Ercia, A. (2016). Improving the health of Cambodian Americans: Grassroots approaches and root causes. *Progress in Community Health Partnerships: Research, Education, and Action*, 10(1), 113–121. [[abstract](#)]
- Morina, N., Sulaj, V., Schnyder, U., Klaghofer, R., Müller, J., Martin-Sölch, C., & Rufer, M. (2016). Obsessive-compulsive and posttraumatic stress symptoms among civilian survivors of war. *BMC Psychiatry*, 16(1), 115. [[Full Text](#)] [[abstract](#)]
- Müller, M., Klingberg, K., Srivastava, D., & Exadaktylos, A. K. (2016). Consultations by asylum seekers: Recent trends in the emergency department of a Swiss university hospital. *PLoS One*, 11(5), e0155423. [[Full Text](#)] [[abstract](#)]
- Nickerson, A., Garber, B., Ahmed, O., Asnaani, A., Cheung, J., Hofmann, S. G., ... Bryant, R. A. (2016). Emotional suppression in torture survivors: Relationship to posttraumatic stress symptoms and trauma-related negative affect. *Psychiatry Research*, 242, 233–239. [[abstract](#)]
- Sonne, C., Carlsson, J., Bech, P., Vindbjerg, E., Mortensen, E. L., & Elklit, A. (2016). Psychosocial predictors of treatment outcome for trauma-affected refugees. *European Journal of Psychotraumatology*, 7, 30907. [[Full Text](#)] [[abstract](#)]
- Spiller, T. R., Schick, M., Schnyder, U., Bryant, R. A., Nickerson, A., & Morina, N. (2016). Somatisation and anger are associated with symptom severity of posttraumatic stress disorder in severely traumatised refugees and asylum seekers. *Swiss Medical Weekly*, 146, w14311. [[Full Text](#)] [[abstract](#)]
- Stevanović, A., Frančišković, T., & Vermetten, E. (2016). Relationship of early-life trauma, war-related trauma, personality traits, and PTSD symptom severity: A retrospective study on female civilian victims of war. *European Journal of Psychotraumatology*, 7, 30964. [[Full Text](#)] [[abstract](#)]
- Van Ee, E., Kleber, R. J., Jongmans, M. J., Mooren, T. T. M., & Out, D. (2016). Parental PTSD, adverse parenting and child attachment in a refugee sample. *Attachment & Human Development*, 18(3), 273–291. [[abstract](#)]
- Virgincar, A., Doherty, S., & Siriwardhana, C. (2016). The impact of forced migration on the mental health of the elderly: A scoping review. *International Psychogeriatrics / IPA*, 28(6), 889–896. [[abstract](#)]



Wilker, S., Pfeiffer, A., Elbert, T., Ovuga, E., Karabatsiakos, A., Krumbholz, A., ... Kolassa, I.-T. (2016). Endocannabinoid concentrations in hair are associated with PTSD symptom severity. *Psychoneuroendocrinology*, *67*, 198–206. [[abstract](#)]

Refugees

Cohen, S., & Asgary, R. (2016). Community coping strategies in response to hardship and human rights abuses among Burmese refugees and migrants at the Thai-Burmese border: A qualitative approach. *Family & Community Health*, *39*(2), 75–81. [[abstract](#)]

Fike, D. C., & Androff, D. K. (2016). “The pain of exile”: What social workers need to know about Burmese refugees. *Social Work*, *61*(2), 127–135. [[abstract](#)]

Hollifield, M., Toolson, E. C., Verbillis-Kolp, S., Farmer, B., Yamazaki, J., Woldehaimanot, T., & Holland, A. (2016). Effective screening for emotional distress in refugees: The refugee health screener. *The Journal of Nervous and Mental Disease*, *204*(4), 247–253. [[abstract](#)]

Hudson, C. C., Adams, S., & Lauderdale, J. (2016). Cultural expressions of intergenerational trauma and mental health nursing implications for U.S. health care delivery following refugee resettlement: An integrative review of the literature. *Journal of Transcultural Nursing: Official Journal of the Transcultural Nursing Society / Transcultural Nursing Society*, *27*(3), 286–301. [[abstract](#)]

Hunter, P. (2016). The refugee crisis challenges national health care systems: Countries accepting large numbers of refugees are struggling to meet their health care needs, which range from infectious to chronic diseases to mental illnesses. *EMBO Reports*, *17*(4), 492–495. [[abstract](#)]

Im, H., & Rosenberg, R. (2016). Building social capital through a peer-led community health workshop: A pilot with the Bhutanese refugee community. *Journal of Community Health*, *41*(3), 509–517. [[abstract](#)]

Keles, S., Friborg, O., Idsøe, T., Sirin, S., & Oppedal, B. (2016). Depression among unaccompanied minor refugees: The relative contribution of general and acculturation-specific daily hassles. *Ethnicity & Health*, *21*(3), 300–317. [[abstract](#)]

Lim, S.-H., & Han, S.-S. (2016). A predictive model on North Korean Refugees’ adaptation to South Korean society: Resilience in response to psychological trauma. *Asian Nursing Research*, *10*(2), 164–172. [[Full Text](#)] [[abstract](#)]

Lindert, J., Carta, M. G., Schäfer, I., & Mollica, R. F. (2016). Refugees mental health-A public mental health challenge. *European Journal of Public Health*, *26*(3), 374–375. [[Full Text](#)] [no abstract]



Madsen, T. S., Carlsson, J., Nordbrandt, M., & Jensen, J. A. (2016). Refugee experiences of individual basic body awareness therapy and the level of transference into daily life. An interview study. *Journal of Bodywork and Movement Therapies*, 20(2), 243–251. [[abstract](#)]

Opaas, M., Hartmann, E., Wentzel-Larsen, T., & Varvin, S. (2016). Relationship of pretreatment Rorschach factors to symptoms, quality of life, and real-life functioning in a 3-year follow-up of traumatized refugee patients. *Journal of Personality Assessment*, 98(3), 247–260. [[Full Text](#)] [[abstract](#)]

Riber, K. (2016). Attachment organization in Arabic-speaking refugees with post traumatic stress disorder. *Attachment & Human Development*, 18(2), 154–175. [[abstract](#)]

Robertson, C. L., Savik, K., Mathiason-Moore, M., Mohamed, A., & Hoffman, S. (2016). Modeling psychological functioning in refugees. *Journal of the American Psychiatric Nurses Association*, 22(3), 225–232. [[abstract](#)]

Tappis, H., Freeman, J., Glass, N., & Doocy, S. (2016). Effectiveness of interventions, programs and strategies for gender-based violence prevention in refugee populations: An integrative review. *PLoS Currents*, 8. [[Full Text](#)] [[abstract](#)]

Wright, A. M., Aldhalimi, A., Lumley, M. A., Jamil, H., Pole, N., Arnetz, J. E., & Arnetz, B. B. (2016). Determinants of resource needs and utilization among refugees over time. *Social Psychiatry and Psychiatric Epidemiology*, 51(4), 539–549. [[abstract](#)]

Yaser, A., Slewa-Younan, S., Smith, C. A., Olson, R. E., Guajardo, M. G. U., & Mond, J. (2016). Beliefs and knowledge about post-traumatic stress disorder amongst resettled Afghan refugees in Australia. *International Journal of Mental Health Systems*, 10, 31. [[Full Text](#)] [[abstract](#)]

Yun, K., Paul, P., Subedi, P., Kuikel, L., Nguyen, G. T., & Barg, F. K. (2016). Help-seeking behavior and health care navigation by Bhutanese refugees. *Journal of Community Health*, 41(3), 526–534. [[abstract](#)]

Women

Al-Modallal, H. (2016). Effect of intimate partner violence on health of women of Palestinian origin. *International Nursing Review*, 63(2), 259–266. [[abstract](#)]

Haffejee, B., & East, J. F. (2016). African women refugee resettlement. *Affilia: Journal of Women & Social Work*, 31(2), 232–242. [[abstract](#)]

Parcesepe, A., Stark, L., Roberts, L., & Boothby, N. (2016). Measuring physical violence and rape against Somali women using the neighborhood method. *Violence Against Women*, 22(7), 798–816. [[abstract](#)]



Additional Relevant Resources

- Dignity (The Danish Institute Against Torture) provides a database that allows you to search for a wider range of articles, books, and other publications on the topic of torture (<http://www.reindex.org/RCT/rss/Portal.php>)
- IRCT (International Rehabilitation Council for Torture Victims) provides free access to their journal, *TORTURE Journal* (<http://www.irct.org/media-and-resources/library/torture-journal.aspx>)