Torture Treatment Literature Selection, Q2 2017

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

Higher incidence of psychosis in refugees as compared to the host population or non-refugee immigrants

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

Study Details
In the current refugee crisis, the sharp increase of forced displacements has led to record numbers of asylum and refugee applications in many European countries. Germany, for example, had the highest immigration since 1950, with high numbers of asylum seekers and Syrian refugees. Meeting the mental health needs of these populations is increasingly important. Previous reviews found up to a 300% higher risk of psychosis in immigrants as compared to the host population. This increased risk is not explained by higher incidence of psychosis in migrants’ countries of origin, suggesting that the factors leading to migration or the migration process itself impacts the risk of psychosis. The goal of this article was to review studies of the incidence of psychotic disorders in refugees as compared to the host population.

Study Methods
Researchers did a systematic search in literature databases for articles on the incidence or prevalence of psychosis and refugees, using ICD-10 classifications as diagnostic criteria. The host population or non-refugee migrants were the comparison cohort. Publications in the last 10 years, in English, German, Italian, and French were included. Three articles met these criteria, all of which were retrospective cohort studies.

Study Findings
In all studies, individuals with refugee status were found to have higher incidence of psychotic disorders. One article found a two-fold increased incidence of non-affective psychosis as compared to non-refugee immigrants, while another study identified a slightly higher risk of psychosis in refugees that was not statistically significant.

Within refugee populations, men were found to have a higher risk of psychotic disorder diagnosis as compared to women. In Sweden, refugee men had a four-fold increased risk of psychosis as compared to the host population. There was no clear evidence that region of origin influenced rates of psychosis.

Conclusion
This literature review found higher risks of psychotic disorders in refugee populations, particularly among men. This is in line with previous meta-analyses and large population-based studies. However, this study is limited by the small number of articles meeting inclusion criteria. Another issue is that there are different ideas and presentations of psychotic disorders between cultures, as well as potential bias in diagnosis.

Contributing factors to an increased risk of psychosis among refugees are wide-ranging. Pre-migration experiences – trauma, persecution, and the fragmentation of social structures – and post-migration experiences – poverty, discrimination, and uncertain legal status – likely contribute. The results of this study highlight a need for mental health screening and treatment among refugees that includes psychotic symptoms and evidence-based interventions that improve mental health outcomes.
Afghan refugee explanatory models of depression: Exploring core cultural beliefs and gender variations

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

Study details
According to the authors, medical anthropology has overlooked the experience of Afghan refugees. What’s more, an empirical understanding of depression among refugees has been deficient. Dr. Qais Alemi and his team hope that insights from this preliminary, qualitative study of Afghan refugees help address these gaps and set the foundation for further in-depth, quantitative evaluations.

Study Sample and Method
Dr. Alemi and his team performed their study in 2012, with the help of 93 Afghan refugee respondents in the San Diego area. All had left Afghanistan for the U.S. under some form of duress. Participants included 43 women and 50 men, who ranged in age from 21 to 85 years (mean=44.8). The research consisted of two distinct stages: qualitative interviews of the research participants followed by structured questionnaires. The first stage informed the second, as the initial qualitative interviews were used to produce the organized questionnaire.

These preliminary qualitative interviews identified patterns and prominent themes in the way respondents thought of depression and its causes, symptoms, and treatments. In these interviews, the team aimed to get a sense of three things:

- Whether there was a single, shared cultural notion of depression among the interviewees.
- Whether and how such a notion might vary between women and men.
- And how other demographics and experiences could influence such variations.

Responses given in the interviews were the basis for a structured survey of 73 “yes-no” questions; 21 of these were on depression’s causes, 31 on its symptoms, and 21 on treatments. The results of the questionnaires would offer the research team a way to answer the above questions.

Study Findings
The paper identifies several revealing differences between women and men. Women, for instance, cited twice as many symptoms of depression as men. The authors argue that this large discrepancy is due to the greater levels of distress endured by women in Afghan society, and this often stems from the intense responsibilities of motherhood. Male participants, on the other hand, expressed belief that men were at greater risk for depression than women.

Men and women alike acknowledged mildly traumatic events, difficulties with new languages, children leaving home, loneliness, loss of culture, anxiety about the future, and chronic health concerns to be frequent causes of depression. Notably, participants of both genders often turned to culturally unique expressions to describe depressive symptoms, such as “asabi,” roughly meaning “distress” or and “ghamgeen,” roughly meaning “sadness.” Moreover, the paper notes that men and women generally agreed as to how best to treat depression: psychiatry, antidepressants, and prayer. Given previously documented stigmas surrounding mental health care, Dr. Alemi and his team were surprised by the willingness of men and women to cite the utility of antidepressants and psychiatry.

By and large, the results demonstrated that Afghan men and women have similar understandings of depression, including shared idiomatic phrases and beliefs surrounding causes and cures. The authors suggest that this indicates a conceptualization of depression that is cohesive and broadly shared throughout the whole of Afghan culture—one that draws on “core cultural values” and common identity.
Limitations and Conclusions
At the time of the study, the research team had no access to a truly representative sample of San Diego’s Afghan community. The study thus relied on snowball sampling to find participants: prominent figures in the community (e.g., imams) referred mosque members to Dr. Alemi and his team, and community social hubs (e.g., mosques and cafes) functioned as important points of recruitment. The article is thus mindful of possible selection bias.

The article builds on and affirms the need for future studies of “idioms of distress” within their sociopolitical contexts. Culturally-specific vocabularies and manners of expression ought to be carefully considered when evaluating the ways a given population conceives of mental illness. The authors hope that their research and the culturally-specific knowledge it offers can be used for future interventions and treatments of depression within the Afghan community.

Selected Article Citations by Topic

Children/Youth


Health/Well-being


Refugees


Women


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).

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