

Torture Treatment Literature Selection, Q4 2017

The **Partners in Trauma Healing (PATH) project** 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 well-being 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.

Center for Victims of Torture (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, Frank Hennick, Brian Martucci, Melissa Sheridan, and Ann Zedginidze** 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

Young lives disrupted: Gender and well-being among adolescent Syrian refugees in Lebanon.

DeJohn, J., Sbeity, F., Schlecht, J., Harfouche, M., Yamout, R., Fouad, F., Manohar, S., & Robinson, C. (2017). *Conflict and Health*, 11(Suppl 1): 23.

Summary by: Melissa Sheridan, volunteer with the Center for Victims of Torture

Study Details

The Syrian conflict that began in 2011 has resulted in the forced displacement of more than 5 million Syrians, with more than 1 million living in strained conditions in Lebanon. Adolescents are uniquely vulnerable in any crisis, and the experience of forced migration especially affects adolescents. This study sought to understand the experiences of very young adolescents, aged 10-14, in the context of the protracted Syrian crisis.

Study Methods

The study focused on two closely located urban areas in Lebanon with a large concentration of Syrian refugees. Study participants were recruited from the local Lebanese community, each from a different family. They were selected following purposive sampling by age from Syrian households within neighborhoods with a high concentration of Syrian refugees.

Researchers conducted focus group discussions with children and adults: a total of 59 female participants and 59 male participants. The discussions included community mapping and photo elicitation with 10-12, 13-14, 15-16 and 35-45 year old Syrian refugees (separated by gender) to obtain information about experiences and perspectives from the children and perspectives on the adolescents' needs and risks from the adults.

The study team collaborated with Save the Children to identify photos from Lebanon that were culturally relevant and suitable for use in the study. The themes of the photos included locally relevant places and activities to elicit discussion. Transcripts of the focus group discussions were then coded to generate themes and subthemes that were in turn used to build a matrix for analyzing the findings from each of the focus groups.

Study Findings

Analysis of the data collected revealed recurrent ideas, similarities and differences among age groups and gender. Prominent themes include:

Education values and barriers. Despite the participants' expression of a strong education value, adolescent Syrian refugees face significant economic and social barriers to educational opportunities in Lebanon.

Safety and protection. For all participants, the safest places were perceived to be home, school, parks (during the day) and mosques. Unsafe places included streets, shops and parks (at night). Girls reported verbal harassment and boys reported being beaten by Lebanese peers.

Changing gender norms, gender relations and family life. Syrian culture dictated clear gender roles, and the more liberal gender norms in Lebanon, along with crowded and economically strained households, were perceived as changing family dynamics and compromising traditional boundaries.

Early marriage. Participants were acutely aware that the appropriate age for marriage was lower since coming to Lebanon due to the hardships of life in forced displacement. The participants recognized that early marriage was not desirable, but rather a difficult choice made in difficult conditions.

Health and body change. Participants perceived that the refugees' poor health was linked to poor living conditions. Participants pointed to poor housing, poor water supplies and lack of ventilation and natural day light as sources of their health problems. Very young participants had limited understanding of puberty and were embarrassed to ask their mothers for information. Some parents expressed concern about girls getting inappropriate knowledge from television and technology. At the same time, they recognized that their children needed information because they were growing up more quickly.

Conclusions

Adolescents aged 10-14 need special attention in the humanitarian response to the Syrian forced migration crisis, as this age group was repeatedly mentioned as receiving poor treatment by Lebanese teachers. Boys in this age group also particularly expressed feelings of social exclusion and bullying from Lebanese school children. The need for increased educational access for adolescents aged 13 and older is particularly acute as only a minority were enrolled in school at the time of the study. Additionally, security concerns for girls both discouraged enrollment and led to dropping out. This study also points to the need for adolescents to have better access to sexual and reproductive health information and the need to address the risks posed by early marriage.

Mental health risks and stressors faced by urban refugees: Perceived impacts of war and community adversities among Somali refugees in Nairobi.

Im H., Ferguson, A., Warsame, A.H., and Isse, M.M. (2017). *Int J Soc Psychiatry*, 63(8): 686-693.

Summary by: Brian Martucci, volunteer with the Center for Victims of Torture

Study Details

UNHCR identified 427,550 registered Somali refugees in Kenya, a likely undercount. Many live in urban areas such as Nairobi, beyond the reach of support networks and resources found in refugee camps. Poorly implemented protection legislation leaves urban refugees vulnerable to victimization by criminals or corrupt police, leading to a high prevalence rate of emotional health problems.

Previous studies indicate that such conditions are compounded in Somali refugees by issues such as chronic poverty, discrimination, family disruption and pre-migration traumas. However, little work has been done to study the stressors that exacerbate the risk of mental health issues in urban Somali refugees in Kenya. This study aims to address that deficit.

Study Methods

This qualitative study utilized a modified rapid appraisal process reliant on community profiles and internal reports developed by the Kenya Transitional Initiative's Eastleigh Youth Project. These resources helped identify an advisory group comprised of key stakeholders in Nairobi's Somali community. The group included eight members and consisted of medical doctors, psychosocial counselors and community leaders. The advisory group identified 12 study groups, 11 of which were comprised of 10 Somali refugees settled in Kenya after 1991.

Focus group discussions were conducted by study author Hyojin Im and two Somali community leaders with English and Somali fluency. Interviews were semi-structured, covering two domains: "common challenges and stressors that affect mental health and psychosocial problems in Somali refugees in Eastleigh" and "impacts of such challenges and stressors on mental health and health," (p. 3) All interviews were subjected to thematic analysis.

Study Findings

The study authors sorted stressors identified by interviewees into two levels, which they termed (p. 3):

- (1) "Individual and interpersonal challenges that obstruct individual social functioning."
- (2) "Collective and societal issues that create structural barriers to the refugee community as a whole."

On the individual and interpersonal level, interviewees unanimously identified the primary mental health challenge as related to basic needs that remain unfulfilled; examples include education, livelihood, healthcare, and support systems. Other challenges included clan conflict, interpersonal violence, and lack of parental guidance due to war trauma.

On the collective and society level, major challenges included community instability, gang violence, discrimination and scapegoating, religious conflict with local Christian populations, lack of legal protection, and the ongoing armed conflict in Somalia.

Mental health issues arising from these challenges included somatic symptoms, such as insomnia, muscle tension, and headache, as well as self-destructive coping mechanisms, such as substance abuse and gang activity.

Conclusions

This study asserted a confirmation of the link between mental health risks and challenges experienced in daily life after migration among urban Somali refugees in Nairobi. Unmet basic needs compromise individual coping efforts and day-to-day functioning while eroding community cohesion and morality.

According to the authors, the complex interplay of individualized and community-wide challenges should encourage us to look beyond the individual and family levels when considering mental health issues among this population. However, as the study population is viewed by local authorities as a social and economic burden, its members have limited choice and low utilization of mental health resources.

The authors suggest pursuing interventions that are "culturally and contextually responsive to urban refugees whose primary concerns are derived from prolonged exposures to multiple traumas," as well as "policy-level interventions based on multilateral partnerships" (p. 6-7) to combat the chronic conditions that exacerbate mental health issues among vulnerable urban refugee populations.

Study limitations included several things: snowball sampling attributable to a highly transient and low-visibility population, gender disparities that limited the number of female voices in the sample, and a qualitative approach that could not illuminate the extent of the mental health issues identified in the study. The authors suggest quantitative follow-ups to address these deficiencies.

Predicting domestic and community violence by soldiers living in a conflict region.

Nandi, C., Elbert, T., Bambonye, M., Weierstall, R., Reichert, M., Zeller, A., & Crombach, A. (2017). *Psychol Trauma, 9*(6): 663-671.

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

Study Details

Previous studies suggest that war trauma and PTSD are predictors of domestic violence among soldiers in crisis regions. However, little is known about the role played by two factors in postwar behavior: violence experienced in childhood and "appetitive aggression." Appetitive aggression, as Dr. Corina Nandi et al. define it, is "a proactive type of aggression, characterized by the perception of violence as fascinating, appealing and thrilling" (p. 664). To study this, Nandi et al. examine the influence of war trauma, childhood exposure to violence, PTSD, depression, and appetitive violence on former soldiers' postwar behavior and, specifically, violent behavior. The project works to analyze these variables independently, noting that previous studies have failed to "disentangle" them when examining violent behavior.

The team anticipated that violence experienced as a child would predict former soldiers' postwar violence against intimate others, children, and members of the community. They also anticipated that the severity of PTSD and appetitive aggression would mediate the relationships. In addition, Dr. Nandi expected appetitive aggression to both predict community violence and influence the relationship between acts of such violence and war trauma exposure.

Study Method

The study drew from interviews of 381 married Burundian soldiers. The interviews were conducted in Kirundi. Participants had returned from deployment in Somalia and had at least one child and were:

- Interviewed 9-14 months after returning from battle in Somalia
- Aged an average 35.64 years
- Fathers to an average of 2 children
- Deployed a mean 13 months in Somalia

Nandi et al. emphasized that existing literature has not adequately considered the distinct ways that war trauma, childhood exposure to violence, PTSD severity, depression severity, and appetitive aggression predict violent post-war violent behavior. As a result, it was essential to the study to ensure that all variables could be divided up and separately analyzed.

Post-war violent behavior, too, was broken into three contexts: violence against children, violence against intimate partners, and violence against members of the community. The authors hypothesized that exposure to violence in childhood and in wartime would each be associated with violence in these contexts. PTSD and depression, the study predicted, would mediate the relationships.

Study Findings

All 381 study participants had experienced at least one traumatizing war encounter and nearly 99% of these men reported exposure to violence in the home while children. Nevertheless, the study produced several surprising results. The severity of PTSD and depression symptoms were significantly lower than anticipated, given the gravity of much of the violence experienced. Additionally, although appetitive aggression was common, childhood exposure to violence predicted it better than wartime exposure to violence. The authors speculate that violence in the formative years could encourage violence even more than war. The study also found that:

- In keeping with previous studies, a history of family violence was correlated with violence against one's own children.
- Although violence committed against intimate partners was likewise associated with childhood exposure to violence, it was more strongly connected to the mental health variables of PTSD and depression.
- The study found a strong link between postwar community violence and wartime trauma. These connections were not found between postwar community violence and either childhood or intimate partner violence. PTSD was significantly more related to community violence than was depression.
- Appetitive aggression held the strongest connection to postwar community violence in bivariate analyses, and demonstrated a direct link in the study's path model.

Childhood familial violence had an independent effect on all contexts of violence and was the only significant predictor for violence against the soldiers' own children. Intimate partner violence was additionally predicted by depression symptom severity, while community violence was additionally predicted by PTSD symptom severity and appetitive aggression.

Conclusions

The authors admit that the study does not adequately account for the differences between the types of violence experienced by former-soldiers and how these differences may influence memory, PTSD, depression, and other variables. Moreover, Dr. Nandi questions whether the self-report interview format could encourage participants to underreport their acts of violence—particularly experiences of sexual violence. She concludes that future studies ought to involve input from participants' intimate partners and children themselves.

In the end, Nandi et al. find strong links between intimate partner violence and depression, as well as between PTSD and both community violence and appetitive aggression. Strikingly, the study concluded that childhood exposure to violence was associated with violence in each of the adult contexts. Predictably, this was most true for violence committed against one's own children.

Persecution experiences and mental health of LGBT asylum seekers.

Hopkinson, R.A., Keatley, E., Glaeser, E., Erickson-Schroth, L., Fattal, O., & Nicholson Sullivan, M. (2017). *J Homosex*, 64(12): 1650-1666.

Summary by: Eden Almasude, volunteer with the Center for Victims of Torture

Study Details

The experiences of lesbian, gay, bisexual, and transgender (LGBT) asylum seekers are unique in that these individuals are often cut off from both their ethnic/linguistic community and LGBT communities in the host country. While qualitative studies suggest that LGBT asylum seekers are more likely to have experienced sexual and familial trauma, there is a lack of quantitative data about the nature and impacts of trauma on this population. This study examines the rates of sexual trauma, identities of those who perpetrated discrimination, and severity of trauma symptoms among asylum seekers persecuted for their LGBT identity and those persecuted for other reasons.

Study Methods

This is a retrospective case-control study, comparing LGBT asylum seekers who were clients at a large torture rehabilitation center in New York City with a group of asylum seekers persecuted for another reason (n=35); groups were matched for sex and country of origin. There was no significant difference between the groups with regards to age, English language level, immigration status, education level, or head injury. The average age was 29 and most were from Eastern Europe or West Africa, with nearly half undocumented. Structured intake and six-month follow-up assessments evaluated trauma symptoms (based on the Harvard Trauma Questionnaire) and histories, suicidal ideation, and sexual violence.

Study Findings

Researchers found significantly higher rates of sexual violence, past or present suicidal ideation, and younger age of first trauma among clients persecuted for their LGBT identity (63% experienced trauma when under age 18 in the LGBT group as compared to 37%). There was a striking difference in the rate of persecution by family members, at 37% among LGBT asylum seekers as compared to 0% of the matched control group. There was no significant difference in trauma symptom rates between the groups.

Conclusions

The study is limited as a retrospective case-control design, using existing data from files for clients who presented to a torture rehabilitation center. Further, LGBT participants were selected if they specifically mentioned being persecuted for that identity. Thus, the sexual orientation and gender identity of participants in the "non-LGBT" group is unknown. This paper contributes evidence that LGBT asylum seekers experience sexual violence, childhood trauma, and suicidal ideation. This suggests that therapeutic modalities used to address complex and developmental trauma may be particularly helpful, such as eye movement desensitization and reprocessing, artistic modalities, and group therapy.

The roles of fathers' posttraumatic stress symptoms and adult offspring's differentiation of the self in the intergenerational transmission of captivity trauma.

Nicolai, S., Zerach, G., & Solomon, Z. (2017). *Journal of Clinical Psychology*, 73(7): 848-863.

Summary by: Ann Zedginidze, volunteer with the Center for Victims of Torture

Study Details

A psychological condition experienced by some war veterans is PTSD (posttraumatic stress disorder). Family members of veterans with PTSD are at risk of secondary traumatization (ST). Previous studies have examined ST among veterans' wives. This study measures the impact of ST on children of fathers diagnosed with PTSD. Specifically, this study examines the emotional distress exhibited by the offspring of PTSD-diagnosed fathers; it also examines the mental health status of those offspring over the course of the illness. The authors hypothesized that the severity of the father's initial Posttraumatic Stress Symptoms (PTSS) would predict the level of PTSS among offspring.

Study Sample

This study gathered a sample of 123 Israeli father-child dyads. These participants were divided into two groups: 79 ex-prisoners of war dyads and a group of 44 veterans and offspring who served as a control comparison. The control dyads were selected based on similarity to the ex-POW in military background and sociodemographic status. The fathers participated in two waves of measurements (1991 and 2008) while the offspring took part in 2013–2014. Only one child from each family was asked to participate. The offspring of each group were compared and did not differ in age, gender, birth order, marital status, military service, level of religiosity, place of birth, employment, and income. Education was one differentiating factor; the controls' offspring had more years of education than the ex-POWs' offspring. A self-report questionnaire was used to assess PTSS in fathers and their children. The offspring were also asked to complete a Differentiation of Self Inventory assessment to measure their relationships and their current relations with their family of origin.

Study Findings

As the authors predicted, they found that an increase in the fathers' PTSS over the years was related to high levels of offspring's PTSS. The self-differentiation assessment showed that an increase in the ex-POW's PTSS over time was correlated to lower levels of self-differentiation for the offspring. Low self-differentiation indicates lower scores on over-involvement with others in close relationships, lower maintenance of a clearly defined sense of self and high emotional reactivity. This study points to possible personality changes in ex-POW's offspring due to low differentiation of the self. Having lower level of self-differentiation correlated with higher rates of PTSS and reduced ability to cope with stressors.

Conclusion

The impact of war and trauma can have significant effect on the individuals as well as offspring. This study demonstrates the intergenerational transmission of trauma and how PTSS and self-differentiation are mechanisms for this impact. The results of this study contribute to discussions about early interventions and improving self-differentiation in fathers to help develop self-differentiation within their children. The results can generate unique discussions for treatment for ex-POW's offspring and focus on reducing vulnerability by developing self-differentiation and lower impact of PTSS.

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Health/Well-being

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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 (<https://dignity.reindex.net/RCT/main/Landing.php?Lang=eng>).
- IRCT (International Rehabilitation Council for Torture Victims) provides free access to their journal, TORTURE Journal (<http://irct.org/media-and-resources/publications>).

This bibliography is made possible by the generous support of the American people through the United States Agency for International Development (USAID). The contents are the responsibility of CVT and do not necessarily reflect the views of USAID or the United States Government.