Torture Treatment Literature Selection, Q1 2020

The Partners in Trauma Healing (PATH) 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) contributions to this bibliography:
- Volunteer Carolyn Easton conducted the literature search and compiled the citations.
- Volunteer George Abrahams and CVT Program Evaluation Advisors Sarah Peters and Urmy Shukla wrote summaries of selected articles.
- Volunteer Jared Del Rosso reviewed the selected article summaries.

Contents

Selected Article Summaries ................................................................. 1

The refugee post-migration stress scale (RPMS): Development and validation among refugees from Syria recently resettled in Sweden ........................................................................... 2

Predictors of interpersonal violence in the household in humanitarian settings: A systematic review .......................................................................................................................... 3

Stronger together: Community resilience and Somali Bantu refugees ........................................... 5

Selected Article Citations ...................................................................... 6

Focal Population: Refugees and/or Asylum Seekers ................................................................. 6

Focal Population: Children and/or Youth .................................................................................. 14

Focal Population: Women ............................................................................................. 17

Special Topics or Populations ......................................................................................... 18

Additional Relevant Resources .................................................................................. 19
Selected Article Summaries

The refugee post-migration stress scale (RPMS): Development and validation among refugees from Syria recently resettled in Sweden


Article summarized by: Urmy Shukla, Program Evaluation Advisor at the Center for Victims of Torture

Study Background and Goals
Refugees experience a range of stressors, both before and after settlement into their host communities. Thus far, the majority of research has focused on the impact of trauma and pre-migratory factors, such as conditions in their home countries. While there is a general consensus that post-resettlement factors, such as discrimination and financial constraints, are additional burdens that affect the mental well-being of migrants, there are few tools available to measure their impact.

The authors characterize these post-resettlement factors under the concept of “post-migration stress.” While most researchers agree on the importance of measuring post-migration stress, there is a need for an updated, validated instrument. The goal of this study was to both develop and validate a tool to assess post-migration stress among refugees, the Refugee Post-Migration Stress Scale (RPMS). Through the process, the authors hoped to create a tool that can be used to measure refugee post-migration stress in future assessment and research.

Study Methods and Results
The study consisted of two phases: (1) the development of a preliminary instrument and (2) the validation of the instrument through multiple analyses. The result of this process was a new validated tool, the RPMS.

During Phase 1 of the study, the research team reviewed previous studies, conducted observations at a refugee trauma clinic, and held expert panel discussions with psychosocial professionals from Syria. Through these information-gathering exercises, the research team created an initial instrument. After the initial instrument was created, the team conducted cognitive interviews with a convenience sample (n=7) to test comprehension of each item, went through a content validation process with six clinical professionals, and conducted an initial pilot of the instrument. Upon reviewing this information, the research team revised the instrument, resulting in an initial version of the RPMS, with 24 items spread across seven major hypothesized domains of post-migration stress: perceived discrimination, lack of host-country-specific competencies, material and economic strain, loss of home country, family and home country concerns, social strain, and family conflicts.

During Phase 2 of the study, the research team conducted several analyses to validate the instrument, based on a population-based survey of mental health among Syrian refugees resettled in Sweden (n=1215). These steps included:

- A Confirmatory Factor Analysis (CFA), which resulted in a slightly insufficient fit for the original proposed model.
- An Exploratory Factor Analysis (EFA) with four iterations, omitting three items and resulting in a 7-factor model corresponding to the seven hypothesized domains of post-migration stress.
- A Correlational Analysis with measures of anxiety, depression, post-traumatic stress disorder (PTSD), and mental well-being. All domains of post-migration stress showed significant correlation with anxiety, depression, and PTSD, as well as significant negative correlations with mental well-being.

**Conclusions**

The instrument creation and validation process resulted in a 21-item, 7-domain tool that can potentially be used to measure post-migration stress among refugees. The study confirms that post-migration factors are associated with mental health among refugees, and posits a tool that can be used in future studies. Nonetheless, there is still room to further validate the RPMS. The authors were unable to test the stability of the RPMS across different subgroups (such as gender, age, time spend in host country, etc.). The RPMS would also need to be tested and validated among other refugee populations in different host countries in order to ensure generalizability.

*Predictors of interpersonal violence in the household in humanitarian settings: A systematic review*


*Article summarized by:* Sarah Peters, Program Evaluation Advisor at the Center for Victims of Torture

**Background**

Household violence against women and children is increasingly considered a public health priority in humanitarian emergency settings. Research shows that intimate partner violence negatively impacts women’s mental and physical health. Additionally, experiencing or witnessing violence hinders children’s physical, emotional, and social development. Recent reviews indicate that interpersonal violence is prevalent in humanitarian emergencies, and a number studies have been conducted to understand associated risk and protective factors. To inform effective practitioner responses, there is a need to synthesize existing knowledge about predictors of household violence in humanitarian emergencies. However, to the authors’ knowledge, there are no systematic reviews of such predictors specifically in humanitarian settings. Theirs is the first such review.

**Methods**

A systematic literature review was conducted to identify predictors of household violence in humanitarian emergency settings. “Predictor” was defined as any individual, household, or community-level factor associated with increased or decreased risk of physical, sexual, or emotional interpersonal violence between two people living together. The authors searched three databases of scholarly research – PubMed, Web of Science, and Scopus – for English-language, peer-reviewed studies published between 1998 and early 2016. They considered only original studies that were conducted in areas affected or with populations displaced by humanitarian emergencies. Studies had to be quantitative, with variation on both the independent variables (exposure to factors that may predict household violence) and dependent variables (levels of household violence), and estimated statistical associations between predictors and violence levels. Finally, the authors emphasized finding explanatory factors that could feasibly be modified through intervention, and that were associated with violence against both women and children.
Once a list of eligible studies was determined, the studies were analyzed using qualitative synthesis. The authors made a list of studied factors predicting household violence, and recorded the number and percentage of analyses with statistically significant findings for that predictor. Additionally, they evaluated the methodological quality of included studies using an additive measure ranging from 0 to 7.

Findings
The search produced 2,587 unique items, of which 33 were eligible for inclusion. Of these 33 studies, 30 included analyses of physical violence, 22 of emotional violence, and 21 of sexual violence. The majority of included studies \( (n = 13) \) were conducted in sub-Saharan Africa. Nine were conducted in the Asia-Pacific region. Eight were conducted in the Middle East. Adults and victims were the most common populations studied; they were sampled in 29 studies each. Ten studies sampled perpetrators, and seven studies sampled children.

A number of factors were found to be associated with violence against both women and children. Among factors that could be feasibly modified by humanitarian interventions, alcohol and drug use, income or economic status, mental health or coping strategies, and limited social support were statistically significant in multiple studies. Additionally, in the majority of studies that included these factors, exposure to conflict and political violence and non-conflict related adverse experiences were significantly associated with violence against women and violence against children. The review authors did not disaggregate these results by victimization vs. perpetration, but noted that most of the findings in the literature concern victimization. However, associations have been found between all of the significant factors identified (except social support) and both victimization and perpetration.

The 33 included studies were also evaluated for quality, and the mean score was 3.73 out of 7. The highest score was 6, which was achieved by two studies. Seven studies scored 5, eight studies scored 4, 14 studies scored 3, one study scored 2 and one study scored 0.

Study conclusions
The systematic review identified five key factors predicting violence against both women and children in humanitarian emergency settings – conflict exposure, alcohol/drug use, income/economic status, mental health/coping strategies, and social support. That these factors have been found to be significant both outside of and across a variety of humanitarian settings suggests that they are relevant predictors that transcend context, although their effects are likely to differ by location, population, and other context-specific factors. Additionally, most studies included in the review had methodological shortcomings, as evinced by their middling quality scores. Further research, especially with longitudinal and/or randomized controlled design, is needed to understand causal mechanisms linking risk factors and household violence outcomes. For now, practitioners should use the risk factors identified by this study to inform their violence prevention and response strategies, with the caveat that such strategies require ongoing evaluation of their effectiveness.
**Stronger together: Community resilience and Somali Bantu refugees**


**Article summarized by:** George Abrahams, Volunteer with the Center for Victims of Torture

**Introduction/Background**

The Somali Bantu make up approximately 5% of the Somali population. Historically, they have been discriminated against and marginalized in Somalia (p. 23). They also faced discrimination while in Kenyan refugee camps. Given their maltreatment in Kenyan refugee camps, the U.S. government designated them as a high risk subgroup of Somali refugees. Between 2004–2006, over 10,000 Bantu refugees came to the U.S. However, they have faced a number of challenges in resettlement, including language barriers, discrimination, and intergenerational conflict. They have also confronted barriers to accessing employment, housing, and education.

Research has demonstrated that refugee populations are at greater risk for negative mental health outcomes. Mental health interventions tend to focus on individuals and the family system. The current study looks at factors that promote community resilience. Community resilience is a process that explores factors that reinforce the well-being and integrity of culture-specific groups and enable access to resources and supports and the achievement of positive outcomes when faced with adversity. There is a well-established interdependence between the strength of one’s social network and structures, access to vital resources, and the psychosocial functioning of individuals. This research attempts to identify those culture-specific qualities among the Somali Bantu refugees, their values and practices that contribute to community and individual well-being.

**Methodology**

This study was conducted utilizing a community-based participatory approach. A total of eighty-one Somali Bantu community members, both adults and youth, were recruited to participate in fourteen focus groups that were stratified by age and gender. The study sample consisted of the following: 18 10- to 14-year-olds; 29 15- to 17-year-olds; and 34 18+ years of age. Overall, there were 41 male and 40 female participants. The study was approved by the Harvard School of Public Health with adults providing informed consent and all youth receiving parental consent to participate in the study. The research was conducted in the Boston metropolitan area.

A semi-structured interview template or guide was developed and focus groups were conducted in the preferred language of the group participants. Focus group data was analyzed thematically and grouped into broad categories, including family support, Somali Bantu community support, and external support. Each general category was further sub-divided into more in-depth areas. Researchers recruited and trained Somali Bantu research assistants who were bi-lingual (English and Maay Maay) to facilitate and take notes for all focus groups. A thematic analysis was conducted to identify issues pertaining to resettlement stress and psychosocial functioning.

**Results and Discussion**

The authors identified communal independence and cultural preservation as core features that foster community resilience. Focus group participants stated that a resilient community would be able to preserve and transmit Somali Bantu culture to future generations. In one youth focus group, it was
stated that the most critical features of community were to “keep the culture” and to “know who we really are.”

Focus group participants described a strong sense of connectedness to each other as well as a broad and inclusive sense of community and family. Their commitment to being a Muslim was a critical part of their identity and faith-based activities fostered this sense of connectedness, hope, and community cohesion. However, among youth, religion was often a source of ambivalence, because of the discrimination that young Somali Bantu faced in the U.S. Girls reported being teased for wearing hijabs; boys, meanwhile, reported dealing with others’ stereotypes, which associate Islam with terrorism. Consequently, these more complicated peer relations compromised youth embrace of religion, undermined community cohesion, and produced intergenerational conflict.

Conclusions
The results of this study align with the existing literature on resilience among refugees in general and Somali Bantu specifically, highlighting the importance of social connectedness and cultural integrity. The current study also demonstrates the need to think about the role of history and family prior to leaving their country of origin when considering the construct of community. For example, Somali Bantu tend to have a very broad and inclusive concept of community and family and think about those back home in Somalia and Kenya as part of their family. Finally, critical to the resettlement adjustment of Somali Bantu, as well as other resettled refugee groups, is an appreciation of the links among cultural integrity, community cohesion and individual and family well-being. These, ultimately, are vital to the formation of responsive community structures and interventions.

Selected Article Citations

Focal Population: Refugees and/or Asylum Seekers


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1 Citations that fit within multiple categories are repeated for each category


https://doi.org/10.1080/20008198.2019.1694347 [abstract] [Full Text]

https://doi.org/10.1016/j.adolescence.2020.01.016 [abstract]


Management Plus (PM+) for adult Syrian refugees in Turkey. Trials, 21(1), 283. 
https://doi.org/10.1186/s13063-020-4166-x [abstract] [Full Text]


**Focal Population: Children and/or Youth**


**Focal Population: Women**


Special Topics or Populations


Rzeszutek, M., Lis-Turlejska, M., Krajewska, A., Zawadzka, A., Lewandowski, M., & Szumiał, S. (2020). Long-Term Psychological Consequences of World War II Trauma Among Polish Survivors: A Mixed-


Additional Relevant Resources

- The Danish Institute Against Torture (Dignity) 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).
- The International Rehabilitation Council for Torture Victims (IRCT) provides free access to their journal, TORTURE Journal (https://tidsskrift.dk/index.php/torture-journal/index).

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