

Torture Treatment Literature Selection, Q4 2019

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) Volunteer contributions to this bibliography:

- **Carolyn Easton** conducted the literature search and compiled the citations.
- **Marissa Wood-Sternburgh, Eden Almasude, Frank Hennick, and George Abrahams** wrote summaries of selected articles.
- **Jared Del Rosso** reviewed the selected article summaries.

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Selected Article Summaries

Depressive symptoms among women in Raqqa Governorate, Syria: Associations with intimate partner violence, food insecurity, and perceived needs.

Falb, K. L., Blackwell, A., Stennes, J., Hussein, M., & Annan, J. (2019). *Global Mental Health* (Cambridge, England), 6, e22. <https://doi.org/10.1017/gmh.2019.20> [abstract] [Full Text]

Article summarized by: Marissa Wood-Sternburgh, volunteer with the Center for Victims of Torture

Study Details

Northern Syria has been exposed to extreme deprivation and violence due to civil conflict and ISIS occupation. However, little is known about mental health needs and risk factors among women enduring these situations. This study examines potential risk factors, including food insecurity, perceived deprivation of basic needs, and intimate partner violence (IPV), for depressive symptoms among married women living in northern Syria. Additional categorical variables included age, disability status, ever attended school, current livelihood status, and current displacement status. Data was collected from 214 married women in northern Syria to explore these associations. The aim was to better develop and target mental health interventions and other programming that might affect mental health.

Study Findings

The average age of participants was 35.4 years old, and one-third of respondents were currently displaced. Just over 55% had ever attended school. Perceived needs was positively associated with currently being displaced and reporting some form of disability. Disability was also associated with reports of severe food insecurity and increased risk for depressive symptoms. One-third of the respondents reported at least one form of IPV (emotional, sexual, or physical). Past-3-month emotional IPV was associated with an increase in depressive symptoms, which has been a consistent finding over many studies. Severe food insecurity and perceived needs were also significantly associated with an increase in depressive symptoms.

Study Limitations

The authors pointed out several limitations of this study. Firstly, causality cannot be determined between factors; it is possible that depressive symptoms have a bidirectional relationship with key predictor variables. The responses are also subjective, and there could be a self-reporting biases. Some factors, like experiences of violence and mental health status, are subject to under-reporting. Other factors, including food insecurity and perceived needs, may have been over-reported in hopes of getting increased aid. Another limitation that was addressed was that the sample included married women; the findings, then, may not be generalizable to women with a different marital status. Lastly, other important predictors like loss of a loved one or previous history with depression were not analyzed in this study.

Conclusions

Almost 51% of women surveyed met the criteria for at least moderate depression. Similar studies in different areas of conflict reflected higher and lower scores, depending on the location surveyed. There was a robust relationship between depressive symptoms and the overall score for any type of IPV, though emotional IPV was the strongest predictor of depressive symptoms. Daily stressors, like food insecurity and perceived needs, were also positively correlated with depressive symptoms; more stress

was associated with more intense depressive symptoms. Disability was also a risk for increased depressive symptoms. These findings indicate the need to address mental health issues among women residing in conflict-affected areas of NE Syria. Case management service may also be warranted to address experiences of IPV which could be helpful in decreasing depressive symptoms. There is a need to adapt and implement targeted mental health interventions for women with high levels of depressive symptoms, traumatic experiences, and ongoing daily stressors to promote resilience and recovery in a conflict-ridden environment.

“I tend to forget bad things”: Immigrant and refugee young men’s narratives of distress.

Hilario, C. T., Oliffe, J. L., Wong, J. P., Browne, A. J., & Johnson, J. L. (2019). *Health* (London, England: 1997), 23(6), 587–601. <https://doi.org/10.1177/1363459318763865> [abstract] [Full Text]

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

Study Details

Because of norms of masculinity, many men believe they should not express negative emotions and that feelings of distress should be expressed through other means. Additionally, gendered expectations of how people should experience mental health distress impact whether people seek mental health treatment in the first place and how they experience treatment. This study sought to better understand how young, immigrant, and refugee men in Canada experience and narrate distress. In order to get understand mental suffering outside of a healthcare context, researchers focused on young men in the community at large, who were not seeking specific mental health treatment.

Study Methods

The study included 33 young men between 15-22 years of age living in western Canada. The average length of residence in Canada was 7 years, with four participants being second-generation immigrations. They identified as having immigrant or refugee experiences, with 18 different countries of origin represented. They were recruited from community sites such as libraries. The researchers used a narrative approach, with a conversational style in interviews, and then did qualitative analysis of responses using NVivo software.

Study Findings

The study identifies three primary narratives of distress among participants: norming distress, acknowledging distress as ongoing, and situating distress. These general patterns were used to make sense of and process their experiences.

Norming distress: In this pattern, young men described distressing events as taken for granted, occurring in a more distant past, and difficult to express through an emotional lens. For example, one participant wished to move on from such painful experiences and leave them in the past.

Acknowledging distress as ongoing: Within this theme, young men tended to link past and present challenges, noting particular tendencies towards feeling “depressed” or having “bad days” which were described by one individual as “low-energy, lack of motivation, and a sense of numbness” (p. 595).

Situating distress: This narrative portrayed distress as being instructive, as a means of learning about the world and particularly to empathize with others through understanding their own pain. Participants at times criticized dominant discourses of masculinity and acknowledged a need for emotional expression, challenging expectations to withhold their feelings.

Conclusions

This research demonstrated that young immigrant and refugee men hold a diversity of perspectives toward mental health and distress. The study, then, illuminates the shifting norms of masculinity that impact the experience and expression of distress. The authors noted that masculine discourses are dynamic and related to specific social and historical contexts. In an increasingly globalized world, this is especially important to note as different ideas of emotional expression come into contact. The impact of these masculine discourses on mental distress is needed in order to better provide successful mental health treatment and develop resources for immigrant youth.

Exposure to family and organized violence and associated mental health in north Korean refugee youth compared to south Korean youth.

Park, J., Catani, C., Hermenau, K., & Elbert, T. (2019). *Conflict and Health*, 13, 46.
<https://doi.org/10.1186/s13031-019-0230-0> [abstract] [Full Text]

Article summarized by Frank Hennick, volunteer with the Center for Victims of Torture

Study Details

Within the unique context of the divided Koreas, this study examines the relationships between traumatic life experience, family violence, organized violence, and mental health disorders like PTSD and depression. Connections among these phenomena are well-known, as is the high degree to which young North Korean refugees experience mental health disorders associated with them. But no study has sought to differentiate between these risk factors and evaluate how they contribute in different ways to the onset of symptoms among young North Koreans.

Study Methods

By comparing North and South Korean youth—two groups with similar cultural/family norms but dramatically distinct political environments—the authors aim to offer new insights on how risk factors connect to rates of PTSD and depression. The authors recruited 62 North Korean participants (45 F, 17 M) from a Seoul school for refugee youth, and 65 South Korean participants (33 F, 32 M) from a Seoul college prep school. All students were aged 14-25; the authors note that the gender imbalance among North Korean participants reflects the gender imbalance of North Koreans who have entered the South.

The study was conducted in the form of group surveys (5-10 participants), supervised by members of the research team who made clear the study's objectives, matters of confidentiality, and matters of consent. Surveys questioned participants on several things: experiences of family violence, such as neglect, physical assault, verbal abuse; depressive and PTSD symptoms; exposure to organized violence, such as starvation, human trafficking, witnessing of public executions or torture; and emotional/behavioral symptoms associated with traumatic events.

Study Findings

As expected, rates of traumatic experiences were notably higher among North Korean participants. The survey reported that more than twice as many North Korean as South Korean participants had experienced at least one of the potentially traumatic events considered by the study (88.7% to 41.5%). Likewise, 45.2% of North Korean youth reported exposure to 2 or more such events; only 9.2% of South Koreans said the same. The survey differentiated between the risk factors described previously and yielded the following key takeaways:

- **Family violence:** Overall rates of family violence were markedly higher among North Korean participants (56.5% to 33.8%). More than four times as many North Koreans had experienced neglect (25.8% to 6.2%) and roughly three times as many reported physical abuse (32.3% to 10.8%). However, rates of psychological abuse did not meaningfully differ between the two groups.
- **Organized violence:** No South Korean research participant reported exposure to organized violence. By contrast, almost 60% of North Korean youth reported exposure to some form of organized violence: 14.8% had been raped, 16.1% had been beaten or threatened, 19.4% witnessed the death of a loved one, and 42.6% had seen a dead body.
- **PTSD symptoms & depressive symptoms:** Whereas the rates of two groups' depressive symptoms did not vary significantly, North Korean participants showed considerably higher rates of PTSD symptoms, as well as symptoms of emotional/behavior disorders.

Conclusions

According to the authors, previous studies suggest that the buildup of risk factors outside the home increases the probability of family violence. They extrapolate that the organized violence and oppression experienced by young North Koreans can be another such risk factor. The authors are careful to offer the study's limitations, however. For one, the participant sample was small and North Korean women participants greatly outnumbered men. The categories of risk factors, too, offer their own limitations: whereas surveys of organized violence with more numerous types of persecution are likely to produce higher rates of exposure, this survey offered only five. Moreover, the study did not focus on several potentially important variables like rates of sexual abuse or torture.

Nevertheless, the authors suggest that their study is among the first to examine the connections between mental health and trauma exposure comparatively among North and South Koreans, in a way that compares predictors of mental disorder independently of one another. The process measured family violence alongside general traumatic experiences and identified it as an independent predictor of PTSD and depressive symptoms. In the end, the authors suggest that both the survey's findings and its shortcomings underscore the need for further and more thorough study, as the mental health of young North Koreans who reach the South carries broad social implications.

Trauma-afflicted refugees' experiences of participating in physical activity and exercise treatment: A qualitative study based on focus group discussions.

Nilsson, H., Saboonchi, F., Gustavsson, C., Malm, A., & Gottvall, M. (2019). *European Journal of Psychotraumatology*, 10(1), 1699327. <https://doi.org/10.1080/20008198.2019.1699327> [abstract] [Full Text]

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

Background

Refugees with repeated trauma exposure and high levels of post-migration stress are often diagnosed with Post Traumatic Stress Disorder (PTSD) and co-morbid physical and psychiatric disorders. Research demonstrates that individuals with PTSD have low levels of physical and social activity. This, in turn, suggests the potential efficacy of more multidimensional healthcare strategies in order to address a range of mental, physical, and lifestyle challenges. Physical activity (PA) and exercise such as aerobic conditioning, muscle strengthening, and flexibility carried out within a social context has demonstrated improved mental and physical well-being. A review of limited research addressing the effectiveness of PA reveals promising results in reducing PTSD and depressive symptoms. Although there is a small research base noting a correlation between PA and symptom reduction, this study offers in-depth narratives from the role of PA in managing mental health symptoms. It further illuminates the development of healthy lifestyle choices that can be integrated into their daily routines and carried out independently.

Study Methods

This qualitative study utilized focus group discussions (FGD) as a strategy to increase access to the subjective world of study participants. The study took place at the Swedish Red Cross Treatment Centre for Persons Affected by War and Torture in Malmo, Sweden. The Centre offers multimodal treatment to refugees exposed to war and torture. Specifically, it serves refugees experiencing mental health and health problems, as well as re-settlement struggles. Group PA and exercise is offered to patients including aerobic training, yoga, ball sports, body awareness training and tension/trauma releasing exercises.

The groups were comprised of Arabic-speaking men and women, 18 years of age and older who have been diagnosed with PTSD as a result of war, torture and/or forced migration. They were divided into gender-specific groups of 4-6 individuals per group. All FGD's were conducted in Arabic, led by a physiotherapist and psychologist, and were facilitated by an Arabic-speaking interpreter. The total sample included thirty-three participants, 10 women and 23 men, originating from Iraq, Syria, Lebanon, Jordan and Palestine.

Study Results and Conclusions

The content analysis of the focus groups revealed one overarching theme: "Building resilience through relief and recovery." Within this theme there were four sub-categories that characterize more specific areas of functioning: I. Physical and mental health; II. Empowerment; III. Relationships and social adjustments; and IV. Treatment characteristics. In general, participants in this study felt that PA and exercise-based interventions improved both psychological and physical functioning. Among the areas of improvement noted by participants included improvement in PTSD and stress related symptoms including anxiety, mood dysregulation, sleep problems, and reduced pain and headaches. It was also observed that physical activity fostered a sense of relief from the stresses of daily living.

The findings also revealed reported gains in areas beyond symptomatic relief. They reported increased feelings of empowerment; an expansion of daily activities; increased coping skills; and increased knowledge, self-awareness and autonomy. Additionally, the social context of treatment was, over time, seen as supportive and enabled participants to overcome social anxiety and isolation. The aforementioned benefits were achieved, in part, by the presence of an experienced physiotherapist who was able to promote a sense of safety and tailor the activities to the individual needs and sensibilities of the participants. Consequently, participants expressed increased confidence in physical conditioning, increased energy and improved work, and improved school and family functioning.

Given that the majority of study participants were male, there is a continuing need to engage women in future studies. It should also be noted that all participants were amenable to the group format. Non-participants might have been deterred by the group structure and might benefit from an alternative approach or process. Future research should pay special attention to treatment characteristics that facilitate participation. However, in light of the beneficial impacts of PA and exercise with trauma-afflicted refugees in building resilience, future research should continue to explore multiple strategies for addressing both the management of symptoms as well as post-treatment aftercare and broader community-based health promotion interventions.

Letter to the Editor: Moving through the trauma: Dance/movement therapy as a somatic-based intervention for addressing trauma and stress among Syrian refugee children.

Grasser, L. R., Al-Saghir, H., Wanna, C., Spinei, J., & Javanbakht, A. (2019). Journal of the American Academy of Child and Adolescent Psychiatry, 58(11), 1124–1126. <https://doi.org/10.1016/j.jaac.2019.07.007> [abstract]

The pilot study described in this letter to the editor of JAACAP was summarized by George Abrahams, volunteer with the Center for Victims of Torture.

Background

Over 50% of refugee youth have been exposed to war and forced migration and as many as 30% show symptoms of Post-Traumatic Stress Disorder (PTSD). Mental health treatment tends to be underutilized for youth. This is even more pronounced for refugee populations for several reasons: the restrictive cost of mental health treatment, the relative dearth of child trauma specialists, a lack of culturally-informed clinicians, and cultural stigma relative to mental health treatment and psychiatric medications.

Dance/movement therapy (DMT) is a multidimensional intervention that can address both psychological and somatic symptoms associated with trauma and stress in youth. Given the state of Michigan’s high population of Syrian refugees, DMT may be a way to overcome some of the cultural barriers, particularly stigma, language, and access barriers, to treatment. Additionally, the authors argue that dance is central to many Arabic cultures and is integrated into social gatherings for both children and adults. They argue that it then follows that dance could be viewed as a more acceptable form of intervention.

Methodology

Boys and girls, ages 7-14, who had been resettled in the United States for an average of two years were recruited from a local survivors of torture program and a local school district; specifically they were referred by case managers. Youth participated in a twelve-week DMT program, meeting once weekly for 90 minutes. They participated in a variety of movement activities. They also engaged in breathing and tension release/relaxation exercises. Activities to foster group cohesion, self-expression and relationship

building were further integrated into the treatment. Additionally, yoga sessions were offered to mothers who attended the sessions.

Twenty individuals completed the program and sixteen consented to data collection, eight girls and eight boys. The mean age of participants was 10 years. Participants were administered pre- and post-self-report inventories in order to document any changes in mental symptoms (UCLA Posttraumatic Stress Disorder Reaction Index and the Screen for Child Anxiety-Related Emotional Disorders).

Results and Conclusion

Outcome data, collected upon completion of the 12-week DMT program, revealed significant positive changes in self-reported post-traumatic stress and all subscales of anxiety, including social anxiety, separation anxiety, and panic disorder. Given the primarily nonverbal nature of DMT programming, this offers a viable intervention for youth that can overcome cultural barriers and facilitate self-expression and social interaction. In light of the small sample size and single group design of this pilot program, additional DMT program research would be warranted.

Selected Article Citations¹

General

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

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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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