

FUNDAMENTALS OF PROVIDING SERVICES TO SURVIVORS OF TORTURE: MENTAL HEALTH SERVICES

Lesson Summary

Torture survivors have likely experienced multiple traumas and stressors:



- Preflight: Early trauma, growing up during war or conflict
- During torture: physical harm, imprisonment, rape, psychological harm
- Flight: extended periods in refugee camps, dangerous escapes
- Post Flight: Loss of status, immigration, language barriers, economic stressors, racism

Potential psychological consequences of torture



Re-experiencing

- triggers
- flashbacks
- intrusive thoughts & memories
- nightmares



Avoidance

- of thoughts, conversations, activities, places or people
- social withdrawal
- inability to recall trauma details



Hyperarousal

- sleep disturbance
- irritability
- difficulty concentrating
- hypervigilance
- startle response
- generalized anxiety



Depression

- depressed mood
- appetite & sleep disturbance
- worthlessness
- diminished concentration
- thoughts of death, suicide



Altered self-concept

- personality change
- feeling damaged
- problems with impulse control
- sense of shortened future



Psychotic psychotic-like symptoms

- dissociation
- delusions
- hallucinations
- perceptual distortions
- paranoid/suspicious thinking



Somatic complaints

- headaches
- back pain
- musculo-skeletal pain
- sexual dysfunction

Conducting an assessment

- Ask about past and current traumas/stressors
- Ask open-ended questions; let clients talk at their own pace
- Pace information collecting to stay within client's window of tolerance
- Ask about symptoms, current problems, how changed
- Assess for current supports, family relationships
- Ask about cultural beliefs, beliefs about healing, client's perception of what is needed to get better?

Important aspects of treatment planning

- No therapeutic work can take place without a sense of safety; interventions may need to focus initially and for some time on safety
- Plan around the identified needs of the survivor from the domains of safety and consider what interventions may help.
- Determine who should be included in the treatment team and how will you communicate regularly
- Think about how you will frame psychotherapy for someone unfamiliar with it

Examples of therapeutic approaches

- Cognitive approaches: trauma-informed cognitive behavioral therapy
- Mind/body interventions: somatic experiencing, polyvagal theory
- Exposure approaches: testimony therapy, narrative exposure therapy