

The CENTER for VICTIMS of TORTURE

with




Harvard Program in Refugee Trauma

Therapy for Refugees and Torture Survivors: New H.E.A.R.T. (Healing Environment and Restorative Therapy)

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Cambridge, MA



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Objectives


1. Understand the magnitude of mental health problems for refugees
2. Describe Maslow's Hierarchy of Needs and how it relates to working with survivors of torture
3. Articulate the basic principles of hearing the trauma story
4. Identify the key components of the H.E.A.R.T. model for therapy

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Presenter

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WHO Definition of Health

Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.

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New Definition of Health

“Health is a personal and social state of balance and well-being in which people feel strong, active, wise and worthwhile; where their diverse capacities and rhythms are valued; where they may decide and choose, express themselves, and move about freely.”

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Figure 2: The Two Stories



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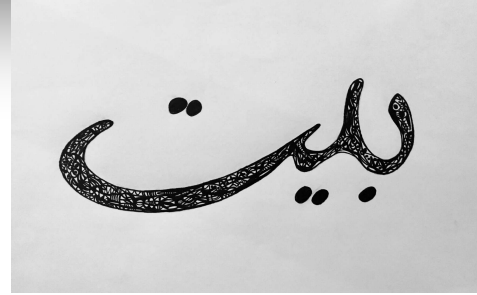
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Phoenician Letter for "Home"



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Arabic Letter for "Home"



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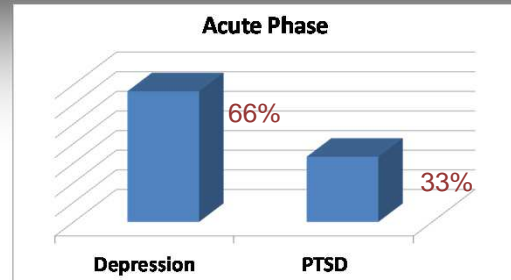
H5 Habitat

- The word "habitat" is derived from the Latin "habitare" and in the ancient world meant the total environment in which a person or an organism dwelled. And there was a belief that a reciprocal relationship existed between the physical and natural environment and those living organisms who lived and prospered within these environments.

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Magnitude of the Problem



Mollica, R.F. (2000) Invisible wounds: Waging a new kind of war. *Scientific American*, 282 (6), 54-57.

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Magnitude of the Problem

Table III. PTSD frequency and distribution (n = 352).

Diagnosis	n (%)
Diagnosis of PTSD	118 (33.5)
Acute	11 (9.3)
Chronic	105 (89.0)
Late-onset	2 (1.7)

Alpak, G., Unal, A., Bulbul, F., Sagaltici, E., Bez, Y., Altindag, A., Dalkilic, A. & Savas, H. A., 2015. Post-traumatic stress disorder among Syrian refugees in Turkey: A cross-sectional study. *International journal of psychiatry in clinical practice*, 19(1), pp.45-50.

Table II. The frequency of traumatic incidents and their distribution (n = 352).

Traumatic incidents	n (%)
Experienced/witnessed a serious accident or an injury	25 (7.1)
Experienced/witnessed the exposure of a close friend or a family member to radiation or chemical weapons	0 (0)
Experienced/witnessed a life-threatening disease of a close friend or a family member	42 (11.9)
Experienced/witnessed the death of a spouse/child	23 (6.5)
Experienced/witnessed the death of a close friend or a family member (except spouse/child)	233 (66.2)
Experienced/witnessed the abduction or being taken hostage of a close friend or a family member	169 (48)
Experienced/witnessed a close friend's or family member's torture	148 (42.0)
Had been in a region that is affected by war	324 (92.0)
Saw and touched dead bodies apart from funerals	178 (50.6)
Felt responsible for someone's death or severe injury	16 (4.5)
Experienced torture or beating	34 (9.7)
Witnessed torture or beating	112 (31.8)
Experienced sexual violence	1 (0.3)
Witnessed sexual violence	1 (0.3)

Alpak, G., Unal, A., Bulbul, F., Sagaltici, E., Bez, Y., Altindag, A., Dalkilic, A. & Savas, H.A., 2015. Post-traumatic stress disorder among Syrian refugees in Turkey: A cross-sectional study. *International journal of psychiatry in clinical practice*, 19(1), pp.45-50.

Forced Displacement

- Systematic review of psychiatric disorders after forced displacement: Morina et al. reviewed 915 studies (38 studies met criteria for inclusion), which included 39,518 adult IDPs and refugees from 21 armed conflict/war impacted countries
- The review reveals that PTSD, depression, and anxiety disorders are highly prevalent after displacement.*
- An example from Lebanon - 310 Syrian refugees living in Beirut & Mount Lebanon (2014) (Naja et al)
 - Depression: 43.9%

* Morina, N., Akhtar, A., Barth, J., Schnyder, U., Psychiatric Disorders in Refugees and Internally Displaced Persons After Forced Displacement: A Systematic Review, *Frontiers in Psychiatry*, 21 September 2018.

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Forced Displacement

- Study of Palestinian refugees living in Jordan
 - 43% of participants had moderate to severe depressive symptoms
 - 42% lived in poverty
 - 20% had fair or poor health
 - Participants who had better perceived health and right-of-return were less likely to have symptoms of major depression.*

* Alduraidi, H., Waters, C.M., Depression, Perceived Health, and Right-of-Return Hopefulness of Palestinian Refugees, *Journal of Nursing Scholarship*, 2018 Mar; 50(2): 163-171.

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Forced Displacement

- Systematic review of unpublished needs assessments of Syrian refugees living in Jordan
 - Psychological distress was exacerbated by both environmental (financial, housing, employment) and psychosocial outcomes (loss of role and social support, inactivity)
 - Participatory engagement strategies might help to address psychosocial outcomes.

* Wells, R., Steel, Z., Abo-Hilal, M., Hassan, A.H., Psychosocial concerns reported by Syrian Refugees Living Jordan: systematic review of unpublished needs assessments, *British Journal of Psychiatry*, 2016 Aug; 209(2): 99-106.

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Forced Displacement

- Cheung et al. examined the impact of trauma exposure of rates of PTSD and psychiatric co-morbid conditions among 1,197 Syrian refugees residing in Turkey or Sweden.
 - Sweden – rates of PTSD: 30%
 - Turkey – rates of PTSD: 55%
- Refugees who witnessed horror, life threat or had family or friends die, tended to have elevated psychological distress.*

* Cheung, C.M., AlQarni, N., Al Mazrouei, M., Al Muhairi, S., Shakra, M., Mitchell, B., Al Mazrouei, S., Al Hashimi, S., The impact of trauma exposure characteristics on post-traumatic stress disorder and psychiatric co-morbidity among Syrian refugees, *Psychiatry Research*, 2018 Jan; 259: 310-315.

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Forced Displacement and Mortality

Crude death rate (CDR) - measured in deaths per 1,000 per year
Crude mortality rate (CMR) - measured as deaths per 10,000 per day

- Developing countries:
 - CDR 9 deaths per 1,000 per year
 - CMR 0.25 deaths per 10,000 per year (A threshold of 1.0 per 10,000 per day is widely used as the benchmark of elevated mortality)
- Iraqi refugees living in refugee camps in Turkey*
 - CDR rate of 149.7 per 1,000 per year
 - CMR rate of 4.1 per 10,000 per year

* Reed, H.E. & Keely, C.B., Understanding Migration & Mortality, National Research Council (US) 2001

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Repatriation

- Little research on health and mental health impact
- von Lersner et al. examined the data on the mental health of refugees in Germany prior to repatriation and after repatriation to their country of origin
 - Returnees lived in Germany for an average of 13.1 years.
 - 46% reported they considered Germany home (versus their country of origin)
- Mental health of returnees prior to return and 9 months after return (N=47):
 - PTSD: pre-return: 36% - post-return: 56%
 - Depression: pre-return: 28% -- post-return: 64%
 - Suicidal tendencies: pre-return: 36% -- post-return: 44%

von Lersner, U., Elbert, T., Neuner, F., Mental health of refugees following state-sponsored repatriation from Germany, *BMC Psychiatry* 2008; 8: 88.

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Mental health of refugees prior to return and 9 months after return (N=47)

Refugees prior to return	Refugees after return
PTSD – 36%	PTSD – 56%
Depression – 28%	Depression – 64%
Suicidal tendencies – 36%	Suicidal tendencies – 44%

von Lersner, U., Elbert, T., Neuner, F., Mental health of refugees following state-sponsored repatriation from Germany, *BMC Psychiatry* 2008; 8: 88.

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Repatriation

Hongyun and VanLandingham examined the consequences of immigration and repatriation on Vietnamese never-leavers, returnees, and immigrants (n=709).

Data collected in Ho Chi Minh City and New Orleans (USA).

➤ Immigrants were more significantly disadvantaged (worse-off) than the never-leavers or returnees.

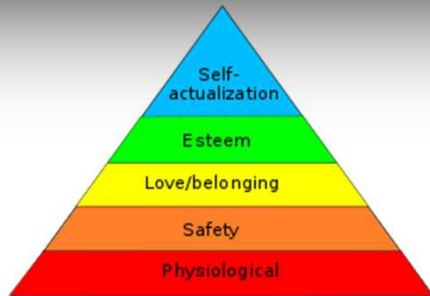
➤ Positive relationship between higher quality social networks and better mental health outcomes.

* Hongyun, F., VanLandingham, M.J., Mental and Physical Health Consequences of Repatriation for Vietnamese Returnees: A Natural Experiment Approach, *Journal of Refugee Studies*, 2010 Jun; 23(2): 160-182.

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Maslow's Hierarchy of Needs

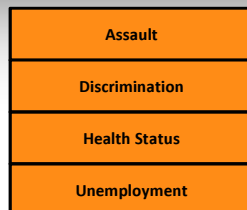


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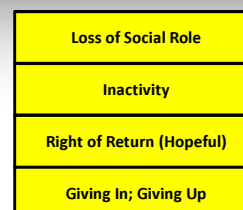
Secondary Risk Factors for Mental Health Disorders after Displacement and Repatriation



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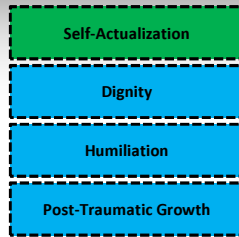


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ESTEEM AND SELF-ACTUALIZATION



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Core Elements of the H⁵ Model



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Fixing the crisis in the humanitarian aid model

Hierarchy of needs (Maslow) + H5 Model = HEART: Healing environment and restorative treatment

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Mental Health Impact of Torture

Extreme violence pre- and post-migration can have a major negative impact on health and mental health.

- Physical torture
- Emotional torture – incarceration
- Disappearance
- Unnatural death of child, family member
- Sexual violence, including pregnancy by rape

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The Centrality of the Trauma Story

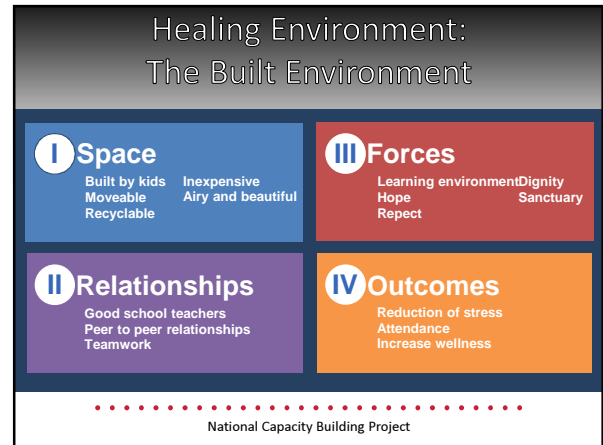
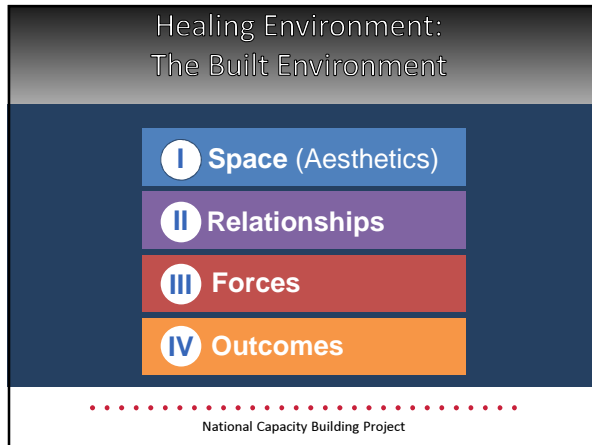
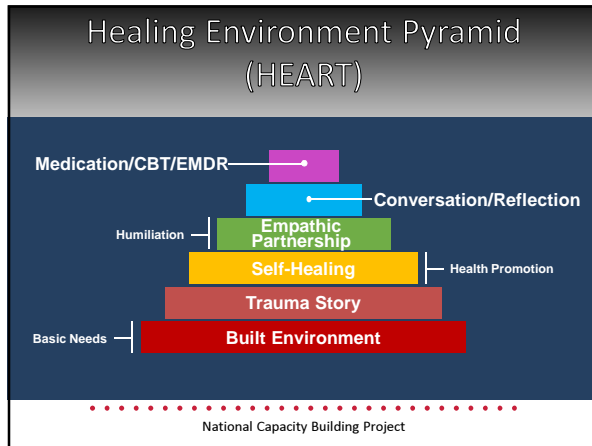
- Denial
- Humiliation
- No buried treasure
- Trust and timing
- A little bit, a lot over a long period of time
- The curved road (patient as teacher)
- Diagnosis and treatment

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The Centrality of the Trauma Story

- Immune response
- Emotional disclosure
- Healing Trinity
- Teach the patient how to tell the story
- Toxic trauma story
- Stealing the story
- Self-care

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Ghata Structure



Photos courtesy of Kayany Foundation and American University of Beirut

Interior of the Ghata school



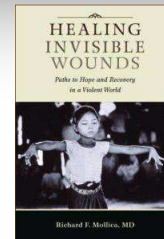
Photos courtesy of Kayany Foundation and American University of Beirut



Photos courtesy of Kayany Foundation and American University of Beirut

Aerial view of the Ghata School Community

Resources: Healing Invisible Wounds: Paths to Hope and Recovery in a Violent World

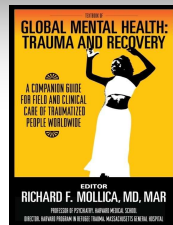


www.amazon.com

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Resources: Textbook of Global Mental Health: Trauma and Recovery



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