

## F. THE PSYCHOSOCIAL REHABILITATION APPROACH IN TREATING TORTURE SURVIVORS

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### INTRODUCTION

Organized torture practiced by oppressive regimes against political enemies constitutes a serious worldwide epidemic. According to Amnesty International, 150 out of 215 countries practiced human rights abuses in 2005.<sup>1</sup> The United Nations defines torture as “any act by which severe pain or suffering, whether physical or mental, is intentionally inflicted on a person for such purpose as obtaining from him or a third person information or a confession, punishing him for an act he or a third person has committed or is suspected of having committed, or intimidating or coercing him or a third person for any reason based on discrimination of any kind, when such pain or suffering is inflicted by, or at the instigation of, or with consent or acquiescence of, a public official or other person acting in an official capacity. It does not include pain or suffering arising only from, inherent in or incidental to lawful sanctions.”<sup>2</sup>

Torture is usually used as a tool in investigation or as a means of harsh punishment to crush political enemies. The torture experience aims at destroying the human being physically, mentally and socially. Victims of torture usually suffer from complicated physical and mental conditions, including medical, psychological, neurological, social and vocational problems.<sup>3</sup> This comorbidity requires a comprehensive treatment approach including medical, psychiatric, neurological, and dental examination and treatment.<sup>4–6</sup>

Torture victims at the ACCESS Center for Psychosocial Rehabilitation of Torture Survivors (hereafter referred to as the Center) suffer from severe

psychiatric problems, such as post-traumatic stress disorder, depression and anxiety.<sup>7</sup> Probably the most common problems among victims of torture are post-traumatic stress disorder (PTSD), depressive, somatoform or anxiety disorders. Studies at the Center<sup>8,9</sup> showed that torture victims, compared with mental health clients and with other refugees, have significantly more problems or needs in many areas of life, functioning, mental health or health. In addition, victims of torture tend to suffer from comorbidity, indicating that they usually have more than one mental health and health problem at the same time. The problems also tend to be very persistent and lead to serious disruption of their social skills. Many complain of over-generalized fear, confusion and, in many cases, shame or guilt. Assessment of torture victims includes comprehensive psychosocial assessment, post-traumatic stress disorder evaluation, and anxiety and depression assessment, in addition to medical and dental examination, if needed.

### TREATMENT OF VICTIMS OF TORTURE

Traditional treatment approaches with torture survivors utilize one form or another of psychotherapy to deal with post-traumatic disorder and other psychological consequences of torture. A treatment plan may include medical services, psychiatric services and case management services. Therapeutic approaches with victims of torture include cognitive behavior therapy,<sup>10</sup> hypnotherapy, eye movement desensitization and reprocessing (EMDR),<sup>11</sup> to deal with posttraumatic disorder. Testimo-

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From the ACCESS Center for Psychosocial Rehabilitation of Torture Survivors, Dearborn, Michigan.

**Table 1. Depression and anxiety levels pre- and post-treatment**

	Pre-treatment		Post-treatment		Significance	
	Mean	SD	Mean	SD	T-Test	P
Anxiety	32.30	5.863	27.40	6.685	3.375	<.001*
Depression	46.2	6.615	38.3	10.174	3.983	<.000*
PTSD	42.9	7.863	33.8	8.548	4.819	<.000*

\* P<.001.

nials, which may be considered as a form of exposure, were also used to help survivors deal with the pain of their torture experience.<sup>12</sup> Wraparound of case management services and supports, which is borrowed from children services, was also suggested for working with torture survivors.<sup>13</sup>

On the other hand, the psychosocial rehabilitation approach aims at helping the torture survivor restore his/her health, mental health and to develop his/her social skills in order to achieve successful integration into the community as a productive member. Psychosocial rehabilitation starts with a comprehensive assessment and develops person-centered treatment planning protocols to direct services. In this respect, the person served identifies problems and needs that will become the focus of treatment, sets goals of the treatment and selects appropriate interventions.

Psychosocial rehabilitation starts with helping stabilize the survivor's condition and healing his/her wounds. At this stage, services may include medical treatment, physiotherapy<sup>14</sup> and dental care, according to client's needs. Neuropsychological examination and rehabilitation may be utilized to help overcome the effects of closed head injuries that may result from torture.<sup>15-17</sup> Psychotherapy addresses post-traumatic stress disorder, depression, anxiety symptoms, or any other symptoms.

The main component of psychosocial rehabilitation is the intensive, short-term social skills' training that is tailored to the survivor's characteristics,

capacities and needs. This may include assertiveness training, anger management and problem-solving skills. The program includes educational skills, language skills, vocational training referrals and learning how to deal with public and governmental agencies, banks, school systems and the legal system. The therapeutic team provides training and coaching to help develop these social skills.

The Center established the Freedom Cultural Club that provides a forum for socialization, psycho-education and activities. The Freedom Cultural Club (Café) offers activities and games, in addition to yoga classes, massage therapy, relaxation training, stress management, conflict resolution and domestic violence prevention and resolution. In addition, the club promotes cultural arts, poetry and talent discovery and development activities to help clients restore their self-esteem, identity and pride. The Center also provides special English language classes (ESL) and tutoring that considers the torture victims' mental health conditions and tries to meet their special needs, deficits or characteristics.

The Center's observations reveal that torture leads to learning difficulties and memory deficits in many victims. ESL classes are adapted to such learning and memory problems. Additionally, the Center also runs a Women's Art and Crafts Group, composed of female clients and families of torture survivors who gather on a weekly basis to learn and to practice sewing, art and other crafts. These group sessions have proved to be very therapeutic to these women,

elevating their self-esteem and social skills.

### EVALUATION OF THE TREATMENT PROGRAM

This study aimed at evaluating the effectiveness of the psychosocial rehabilitation approach in helping clients with their mental health problems. The study compared the scores obtained by a sample of 38 torture survivors before and after receiving services on tests of anxiety, depression and post-traumatic stress disorder. Table 1 shows the results of the study.

As shown in Table 1, significant decreases in anxiety, depression and post-traumatic stress disorder after receiving treatment at the Center. These consistent changes show that helping torture victims is very effective in relieving their pain and suffering. Further studies are needed to help identify the effectiveness of the different components of the treatment and intervention.

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