C. THE PSYCHOSOCIAL REHABILITATION APPROACH IN TREATING TORTURE SURVIVORS

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Organized torture practiced by oppressive regimes against political enemies constitutes a serious worldwide epidemic. According to the World Medical Association Declaration of Tokyo in 1975, “Torture is defined as the deliberate, systematic, or wanton infliction of physical or mental suffering by one or more persons, acting alone or on the orders of any authority, to force another person to yield information, to make a confession, or for any other reason.” Torture is used as a tool in investigations 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. This co-morbidity requires a comprehensive approach including medical, psychiatric, neurological, and dental examinations and treatments.

Conventional treatment approaches with torture survivors utilize one form or another of psychotherapy to deal with posttraumatic disorder and other psychological consequences of torture. In this respect, therapists use cognitive behavior therapy, hypnotherapy, or Eye Movement Desensitization and Reprocessing (EMDR), to heal posttraumatic disorder in torture victims. Testimony was also used to help survivors cope with the pain of their torture experience. Wraparound case management services and supports, which have been in use for many years in children mental health services, were also suggested.

The ACCESS Rehabilitation Center adopts an innovative, comprehensive psychosocial rehabilitation treatment approach that aims to help torture survivors and their families restore health and mental health, and develop social skills in order to achieve successful integration into the community as productive and participant members.

The main components of the center’s psychosocial rehabilitation approach follow.

COMPREHENSIVE ASSESSMENT

The first step in the rehabilitation process is to complete a comprehensive assessment that covers psychological, medical, neurological, dental, educational, vocational, and linguistic aspects of the torture survivor.

STABILIZATION AND HEALING

The second component of psychosocial rehabilitation concentrates on helping to stabilize the survivor’s condition and to heal his/her wounds. At this stage, services may include medical treatment, dental care, individual, family, and/or group psychotherapy, and other psychiatric services. Physical or neuropsychological rehabilitation may be needed to recover from the effects of physical or closed head/brain injuries that may result from torture. To stabilize the victim, psychotherapy and psychiatric services address posttraumatic stress disorder, depression, anxiety symptoms, or other symptoms.

SOCIAL SKILLS TRAINING

The third component in psychosocial rehabilitation provides intensive
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short-term training in living skills, which are tailored to the survivor's characteristics, capacities, and needs. This may include educational skills, language skills, vocational training, learning how to interact with public and governmental agencies, banks, school systems, and the legal system. The therapeutic team provides training and coaching to help develop social skills that will enable the torture survivor to achieve successful integration and become a productive and satisfied member of the community.

This approach also includes outcome evaluation to assess achievement of treatment goals, using standardized tools of assessment (eg, the HSCL-25 Scale, R Mollica et al 1987; and the Bilingual PTSD Scale, APA, 1994) to guide its course.

Data on the application of the psychosocial rehabilitation approach was presented with discussion of some clinical cases and outcomes.