

# IMAGINE BEING A REFUGEE

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Many refugees experience repeated trauma that impacts their well-being. Many develop intrusions of traumatic memories into everyday life in the form of flashbacks, bad dreams or unexpected negative emotion. This post-traumatic stress disorder or injury and the related anxiety and depression can significantly impair learning, socialization and quality of life. There are effective treatments that involve changing traumatic memories into normal memories but these interventions are not available for most sufferers. Interventions delivered at a distance can overcome many of the barriers to care.

*De nombreux réfugiés subissent des traumatismes répétés qui ont des répercussions sur leur bien-être. Beaucoup développent des intrusions de souvenirs traumatiques dans la vie quotidienne sous forme de flashbacks, de mauvais rêves ou d'émotions négatives inattendues. Ce trouble de stress post-traumatique et l'anxiété et la dépression qui en découlent peuvent nuire considérablement à l'apprentissage, à la socialisation et à la qualité de vie. Il existe des traitements efficaces qui impliquent de transformer des souvenirs traumatiques en souvenirs normaux, mais ces interventions ne sont pas disponibles pour la plupart des patients. Les interventions à distance peuvent surmonter bon nombre des obstacles à la prestation de soins.*

Imagine having your town occupied by soldiers in war, witness bombing, shelling and sniper fire in your neighbourhood, and direct violence against your friends, family and neighbours. Imagine your family is terrified and then forced to flee for their lives; your extended family is separated; two of your cousins were tortured and two others have disappeared. You spend months in a very overcrowded and sometimes violent camp with serious deprivation. You finally are one of the lucky ones who is able to immigrate. You land in Canada with people cheering you at the airport. You immerse yourself in the challenge of learning a new language, a new culture. More than anything you want to get a job so you can support your family and you want your kids to do well in school. You are

also trying to get your sister and her family to be able to join you but you have had no success.

In spite of this, you are able to learn basic English and you land a part-time job stocking shelves. Because you are determined to be a success, you also start a small business selling pastries at the local farmers market. You are eager to put the past behind you. However, you cannot seem to shake memories of the horror you have experienced. You are afraid you are going crazy. You do your best to avoid thinking about the past. You have dreams of some of the things that happened to you. You feel sad for no good reason. When you hear a loud noise you jump. It is making it difficult for you to work. You

are becoming desperate as the memories are starting to come back as vivid flashbacks during the day. You are also worried about your 15 year-old-son who seems to have some of the same problems. He is having difficulty in school.

You are ashamed for having this problem. You feel that if only you were stronger you could manage. You feel guilty for not coping even though now you and your family are safe.

Post Traumatic Stress Disorder (PTSD) occurs when highly emotional memories acquired during serious trauma interfere with life. In war ravaged refugees, PTSD is reported to be common. There are two major types of scientifically proven interventions. The most commonly used are antidepressants, SSRIs. They have, in average, some effects but the effects are small, most people have a little benefit, some have a lot of benefit and some have no benefit. The second, scientifically validated type of treatment are the exposure based interventions. Sufferers are guided in reorganizing their memories. Exposure based interventions are more effective than SSRIs. For many people, most symptoms are overcome. For some there is little effect and some not benefit at all.

Although we know that exposure based interventions are very effective, refugees face significant barriers to getting care for PTSD:

- Language: Treatment needs to be given in the language that the memories were acquired with.
- Stigma and shame with having a mental illness: Stigma appears even stronger in Middle Eastern cultures than in Western cultures. Oftentimes, those afflicted will not share this even with close family.
- Lack of training. Many mental health practitioners are not trained to treat PTSD.
- Private care specialists are expensive.
- Incidental expenses. Travelling to clinics and taking time off work may increase the cost of even “free” care.

I like to think of PTSD as a memory problem with mental health impacts rather than a psychiatric problem. Highly emotional memories become fragmented and intrude into daily life in the form of nightmares, intense flashbacks during the day, or feelings of depression, anxiety or anger. It is common that situations that trigger these memories are avoided. Thus, the lives of people with PTSD become more restricted. These memories are stored differently than regular memories. Thinking of PTSD as a memory problem may reduce stigma and facilitate help-seeking.

The Child and Youth Refugee Research Coalition, as part of our Social Sciences and Humanities Partnership Grant, is

working with Service Providers to develop a PTSD intervention that can be delivered at a distance, by e-health. It will use the Strongest Families model ([www.strongestfamilies.com](http://www.strongestfamilies.com)) and the Narrative Exposure Therapy model of exposure treatment that has been developed by the Konstanz University group in Germany. Strongest Families is a system of care that was developed at the IWK Health Centre and is delivered by the not for profit Strongest Families Institute. We now see over 4,000 families a year with the most common problems being anxiety and disruptive behavior. We are also active in Finland and about to start offering service in New Zealand.

We hope to have extending our work in this area with participants from Canada's refugee communities. Investing in this kind of intervention will have a lot of bang for the buck. It is low cost and can offer discrete support that will ensure that families can work with their past experiences to open a bright future.