

ORAL PRESENTATIONS SCIENTIFIC SESSION HUMANITARIAN CONGRESS BERLIN 2018

Charlotte Salmen – vivo international e.V.

Abstract Title	The multiple burdens of raped women in DR Congo: The effects of stigmatization and shame on mental health and functioning
Keywords	Sexual violence, DR Congo, stigmatization, shame, mental health, functioning
Introduction	The conflict-ridden Eastern Democratic Republic of Congo (DRC) is known for its high prevalence of sexual violence (SV). Beside the physical consequences, survivors of SV suffer from multiple mental health problems and experience strong feelings of shame, an emotion anticipating the devaluing of the self in the eye of the other. Moreover, social devaluation is in fact reality for survivors of SV in Congolese society. In addition, traumatic stress reduces the daily functioning, which is of particular importance for people living in resource-poor regions. This study aims to explore the relationship of social disapproval, shame, mental health and functioning in a population of female survivors of SV in DRC.
Methods	In a cross-sectional study, structured clinical interviews were conducted with a sample of N = 201 female survivors of rape. Using structural equation modelling including mediation analysis, we explored the relationship of social disapproval, shame, mental health problems (posttraumatic stress disorder, depression and dissociation), and functioning.
Results	Social disapproval predicted mental health problems both directly and indirectly mediated by shame. Shame predicted mental health problems and functioning, while mental health problems were acting as a partial mediator of the effect of shame on functioning.
Conclusion	Together with previous research, our findings show the necessity to reduce social disapproval against survivors of SV in the Congolese society. To ameliorate their mental health and daily functioning, we thus suggest implementing and evaluating interventions with partners and communities of survivors of SV as a complementary strategy to effective psychotherapeutic treatment of the individual.

Baye Asfaw – Universität Heidelberg

Abstract Title	Experiences of psychotherapists working with refugees in Germany
Keywords	Mental Health, Refugee health, Explanatory Models, Migration and Mental Health, Refugees in Germany
Introduction	Despite a high burden of mental health problems among refugees, there is still limited knowledge about effective mental health care provision for this group. To date, research has focused on issues of language as a challenge to cross-cultural psychotherapy. Other likely barriers are less explored. Such potential barriers include clients' explanatory models for their mental illness and healing process. This study aimed at narrowing this gap in knowledge by exploring major challenges encountered by psychotherapists in cross-cultural psychotherapy and strategies, which have proven useful in overcoming such challenges.
Methods	We employed a qualitative study design, conducting semi-structured in-depth interviews with 10 psychotherapists who had replied positively to our recruitment effort among a large pool of therapists working with refugees in Germany. Respondents were from varying psychotherapeutic school and had varying levels of experience. Data was analysed following the framework analysis method, along five major categories: biographical characteristics, cross-cultural experiences, challenges encountered, strategies employed to overcome them, and other lessons learned.
Results	The main challenges in cross-cultural theory emerged: perceived 'strange' belief systems of clients (explanatory models), difficulties related to language, and the use of translators. In dealing with these challenges, psychoeducation, use of professional translators, open-mindedness, and countermagic (use of clients' illness healing rituals as resources) were indicated as main strategies. Therapists' own migration and cross-cultural experiences appeared to have had positive implications for their work with refugees.
Conclusion	Our study supports previous research on the critical role of language and translation, but underlines that there are other important challenges as well, most notably diverging explanatory models for mental illness between the therapist and the client. Our findings suggest, however, that such barriers can successfully be overcome by integrating clients' explanations and resulting cures explicitly into psychotherapy.

M. Hassaan Afzal – Humanitarian and Conflict Response Institute

Abstract Title	A Scoping Review of the Wider and Long-Term Impacts of Attacks on Healthcare in Conflict Zones
Keywords	Attacks on healthcare, violence against health, conflict zones
Introduction	Attacks on healthcare in conflict zones are widespread and show no signs of relenting. Since 2011 several organisations have systemically collected data of these attacks and revealed their scale. However little is known of the consequences. The purpose of this scoping review was to explore the literature on attacks on healthcare in conflict zones to understand what is known of the wider and long-term impacts.
Methods	We used the Arksey and O'Malley framework to search for and identify all material related to attacks on healthcare in conflict zones. 233 articles were suitable for inclusion. An analytic framework was then applied to these articles to extract information on the impacts of attacks on healthcare.
Results	We were able to classify 15 broad themes describing the impacts of attack on healthcare. There are however limitations in the data collection process. Firstly, data on impacts is not systemically collected after every attack or in all regions where attacks take place. Secondly, this data stops short in working down the chain of impacts to describe the full range of consequences. Lastly, the literature does not often distinguish between the impacts of attacks on healthcare and the impact of conflict on health.
Conclusion	This scoping review is the first to collate and categorise the impacts of attacks on healthcare in conflict zones. Further debate is needed as to how we define and understand attacks on healthcare and therefore the impacts of these attacks. Systematic methods for data collection on the impacts of attacks on healthcare are also needed to produce comprehensive data sets.

Ann-Kathrin Pütz – vivo international e.V.

Abstract Title	Pregnant refugees – psychosocial risk factors and the necessity for early screening and intervention
Introduction	Psychosocial stress during pregnancy is a risk factor for the healthy development of the mother and her offspring. Screening and early interventions for pregnant women are important and established more and more in German health care system as exemplified by the use of the KINDEX interview. Many women who fled to Germany in recent years were pregnant en route or got pregnant in Germany. As this population often fails to have good access to prenatal health care, little is known about the well-being of those pregnant refugees.
Methods	In the present study, 24 pregnant women were screened with the KINDEX for psychosocial risk factors during pregnancy. 12 women with refugee background were matched by age and week of pregnancy with 12 women in the German gynaecological standard care.
Results	On average pregnant refugees score on 12 risk factors, which is twice as many as German pregnant women score on $t(21,482) = -3,101, p < .005$. There was a significant association between having a refugee background and scoring on the risk factor prenatal stress measured by the KINDEX $p = 0,014$ $\phi = 0,58$.
Conclusion	As pregnant refugees are at increased risk for experiencing prenatal stress, this population needs to be included in regular screening praxis and early interventions to prevent negative outcomes for the development of their offspring. Therefore, screening instruments in different languages, as well as sensitive and trained interpreter and staff in the health care system are needed.

Esther Ariyo – University of Antwerp

Abstract Title	Impact of Water Sanitation and Hygiene programmes on health outcomes for internally displaced children in Nigeria.
Keywords	WASH, Health behaviour, children, frequency of sickness
Introduction	The North East of Nigeria has been affected by insurgence crises causing millions of households to be displaced, it has been estimated that more than 50% of the affected population are people below the age of 18 years. Humanitarian intervention is ongoing in the affected communities. The humanitarian intervention includes economic strengthening programmes, health intervention programs, psychosocial programs, WASH programs, Education support programs, etc. Most Water Sanitation and Hygiene (WASH) intervention were conducted on community level. This includes Provision of Water, Sanitation and hygiene facilities, hand-washing education within the community and provision of sanitation materials.
Methods	This research focuses on the impact of humanitarian intervention on the child level. The study compared health outcomes for children with WASH intervention, children with non-WASH sectoral form of intervention and children with no form of humanitarian intervention. This study uses a mixed method approach by conducting Interviews with community leaders and caregivers and administering questionnaires to 395 randomly selected children living in six affected communities in Bornu and Adamawa state Nigeria.
Results	The result shows that there was no statistically significant relationship with most health behaviour and frequency of sickness for children reported of WASH intervention, other sectoral intervention or no intervention at all. However, children with WASH integrated intervention were reported to be less sick than other counterparts.
Conclusion	We conclude that programmes that are designed to have sustainable impact on health outcomes for displaced communities should be more specific to household needs and conducted on household or child level. Secondly, WASH activities should also be integrated with other sectoral intervention.