

Posttraumatic Stress Disorder

Review 14

Palic, S., & Elklit, A. (2011). Psychosocial treatment of posttraumatic stress disorder in adult refugees: A systematic review of prospective treatment outcome studies and a critique. *Journal of Affective Disorders, 131*(1–3), 8–23. PubMed abstract available at <http://www.ncbi.nlm.nih.gov/pubmed/20708804>.

Objectives	Assess the suitability of psychosocial treatments for refugees.
Studies Included	Twenty-five U.S. and international studies published from 1993 to 2010
Participants in the Studies	Adult refugees, including those from the former Yugoslavia, Southeast Asians, Africans, asylum seekers in Germany, adult and child Bosnian refugees
Settings	Settings were not reported for all the studies.
Outcomes	Posttraumatic stress disorder (PTSD) symptoms, depression, anxiety, somatization, global assessment of functioning, quality of life, reactivity, avoidance, ability to function, pediatric mental and physical health, levels of affect dysregulation
Limitations of the Studies	Included studies are methodologically diverse and consist of different refugee populations, which makes a broad interpretation of the treatment results only tentative; dropout rates not reported; nonexperimental study design; short follow-up periods do not allow for assessment of treatment efficacy over time; small sample sizes

Results

Large effect sizes were obtained in some of the cognitive behavioral therapy (CBT) cases, indicating a broad suitability of CBT in the treatment of core symptoms of PTSD in adult refugees. The majority of firm evidence is centered around two variants of CBT: the refugee-adapted narrative exposure therapy, which shows only robust effects on PTSD symptoms, and the highly specialized culturally sensitive CBT for Southeast Asians, which demonstrates effects on PTSD, anxiety, and depression. Empirical evidence also points to the possibility that the maladaptive traumatic reactions in refugees can take the shape of more complex reactions than those strictly specified in the diagnostic category of PTSD. Effectiveness of CBT treatments has not yet been tested on the whole range of symptoms in these complex cases.