

7-29-1994

Fax from Stephanie Cavanaugh to M. Cherif Bassiouni

M. Cherif Bassiouni 1937-2017

Stephanie von Ammon Cavanaugh

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**THE PSYCHOLOGICAL STATUS OF VICTIMS
OF RAPE AND/OR TORTURE AS A RESULT OF THE CONFLICT
IN THE FORMER YUGOSLAVIA**

I. Introduction

The Commission of Experts of the United Nations was charged with investigating war crimes in the former Yugoslavia. The final phase of the investigation involved obtaining testimonies from victims who had been rape and torture victims during this conflict. An eight member mental health team, which I directed, was asked to assist an all female legal team obtaining testimonies. Eight-two raped and/or tortured witnesses were interviewed by the mental health team. Our role was to: 1) prevent re-traumatization of witnesses during testimony, 2) provide or arrange for medical, psychiatric, and psychosocial care for witnesses, and 3) assess the mental health of those witnesses who had been tortured and raped. These goals were accomplished. We are requesting funding from the MacArthur Foundation analyze the data collected by the mental health team to understand what kinds of war time experiences were most strongly associated with psychological morbidity.

II. Goals of Data Analysis

- A. The first goal will be to identify the demographic and personal experiences prior to and during the war which predict the severity of psychiatric symptomatology and psychiatric diagnoses (specifically, post-traumatic stress disorder, anxiety, and depression). The "predictors" to be investigated include (1) prewar psychosocial adjustment, (2) age, (3) gender, (4) ethnicity, (5) town of origin, (6) family members killed or missing in war, (7) time from rape/torture to psychiatric treatment, (8) severity and length of torture or rape, (9) witnessing others tortured, raped and/or slaughtered, and (10) the "War Experience scale" which enumerates a number of stressful war time experiences commonly mentioned in the testimonies of the victims of rape and torture.
- B. The second goal is to determine whether other specific experiences modify psychiatric symptomatology and diagnoses. These "modifiers" include (1) hope, (2) focus on the present, (3) a positive attitude and activity, (4) current occupation and social functioning, (5) perception of control over the torture or rape, (6) present family constellation, (7) support

from family and community, (8) displacement or refugee status, (7) length of time in refugee camp, (8) options for relocation outside the former Yugoslavia, and (11) the "Present Concerns scale" which lists a number of present stressors which the victims of rape and torture were presently experiencing.

- C. The final goal will be to ascertain what changes in occupation and social functioning have occurred in these victims of rape and torture as a result of their war time experiences in comparison to their prewar functioning.

III. Methods

A. Subjects

All witnesses who contacted the commission and wished to testify were accepted for interview. Eighty-two raped or tortured witnesses were interviewed by the mental health team using a detailed structured interview. All of the mental health team had been trained to reliably administer this interview. All interviews were conducted through skilled interpreters and took between 2 and 14 hours.

Forty-five of the witnesses were male and 37 were female. The ages and demographics were as follows:

Demographic Data of Witnesses Interviewed

<u>AGE</u>	<u>FEMALES</u>	<u>AGE</u>	<u>MALES</u>
Less than 20	1	Less than 20	2
20-29	9	20-29	3
30-39	7	30-39	6
40-49	10	40-49	12
50-59	7	50-59	8
60-69	3	60-69	14

<u>ETHNICITY</u>	<u>FEMALES</u>	<u>ETHNICITY</u>	<u>MALES</u>
Croatian (Roman Catholic)	17	Croatian (Roman Catholic)	30
Muslim	19	Muslim	13
Serbian (Serbian Orthodox)	1	Serbian (Serbian Orthodox)	1
		Undetermined	1

The types of trauma experienced by the witnesses were significant. Half the witnesses had sustained moderate to severe injuries as a result of rape and torture. Fifty-four percent of women and 53% of men had a post traumatic stress disorder; 18.9% of the women had anxiety or depressive disorders, and 15% of men experienced uncomplicated bereavement. Eight percent of women and 6.6% of men had other psychiatric diagnoses. Ninety-two percent had no previous history of psychiatric disorder and had good premorbid adjustment. Most came from intact families. Family and community support for witnesses was present in 75% of cases.

B. Measures

1. The Structured Mental Health Interview.
 - a. The first half of the interview was a structured interview similar to that used previously for victims of torture during war, which covered their life before the war, experiences during the war, psychological coping and symptomatology as a result of the rape and/or torture, physical injuries, medical and psychiatric treatment, social supports, and assessment of their present psychological and social status.
 - b. The second half of the mental health interview utilized the Structured Clinical Interview for the Diagnostic and Statistical Manual (SCID) which is used throughout the world to make psychiatric diagnoses. Psychiatric symptomatology and diagnoses were assessed by the SCID for 3 points in time; before the war, 6 months following rape and torture, and at the time of interview.
2. Hamilton Depression Scale is a commonly used observer rater depression scale which will be completed for each subject using the data from the SCID.
3. The Impact of Events scale which has been used for the past 20 years for war related post traumatic stress disorder will be completed using the data from the SCID.
4. The Global Assessment of Functioning (GAF) from the Diagnostic and Statistical Manual of Mental Disorders will be used to assess occupational and social functioning.
5. "The War Experience scale" lists a number of stressors which victims experienced during the war including (1) home and village occupied or destroyed, (2) forced to leave town of origin, (3) imprisonment, (4) starvation, (5) torture, rape, or injury, (6) the occurrence or observation of death, injury, torture or rape of family members, friends, or town members.
6. "The Present Concerns scale" lists a number of present stressors which victims were presently experiencing (1) decreased standards of living, (2) not being able to work as before, (3) wanting to return home, (4) grief over dead or missing family members, (5) separation from loved ones, (6) physical and mental disability, (7) realistic concerns about the future.

IV. Procedure

Since the interviews have been completed, no further data will be collected to test the hypothesis outlined in the goals section.

In order to develop the "War Experiences scale" and the "Present Concerns scale" a total score will be calculated for each scale for use in correlational analysis. Further, each potential factor structure and other scale definitions will be pursued for each scale through appropriate statistical analysis.

The strength of the association between the individual "predictor" variables and psychological symptoms and psychiatric diagnosis will be evaluated by the Mann Whitney-U-Test for dichotomous variables and T-tests for continuous variables.

Additionally, we will evaluate the relative contribution of all the "predictor" variables and then the "modifiers" as they contribute to psychiatric status using multiple regression analysis for continuous variables and a logistic regression model for discontinuous variables depending upon the appropriateness of the statistical methodology.

V. Budget

The data collected was recorded on the individual interview forms. The data must be checked and cleaned and entered into a data base. General descriptive printouts will be generated to check the accuracy of the data. The Hamilton and Impact of Events scale will be recorded from the reported SCID data. Finally, appropriate statistic analysis as described under procedures will be carried out under my supervision and with the assistance of the statistical consultant.

Twenty thousand dollars for a half-time masters degree research assistant to complete the above is being requested. The research assistant will be paid \$16.45 per hour at total of \$17,108 per year with \$2,802 for benefits (which is 17% of \$20,000, the amount required by Rush for benefits).

Five thousand dollars is requested for 50 hours of statistical consultation.

Finally, one thousand dollars is requested for miscellaneous supplies.

The computer and space to complete the project will be provided by Rush-Presbyterian-St. Luke's Medical Center.

VI. Significance

This unique data will provide valuable information on the psychological status of those who have been victims of torture and rape as part of the ethnic cleansing in the tragic conflict which is still unresolved in the former Yugoslavia.

As a result of this requested support, the data collected by the mental health team will be fully analyzed with subsequent reports in the world's scientific literature.

Once this data is analyzed and reported the possibility exists of studying a comparison group of Yugoslavian refugees who have not been raped and/or tortured. Such a comparison group would help differentiate the predictors of psychological morbidity of those that have been raped or tortured from those with similar war experiences who have not endured the specific stressors of rape and torture.