

Mental Health Video Bullets

Introduction

Getting Settled

Beginning the Interview

- Explain the principle of confidentiality to your client, as many clients may be unfamiliar with this concept.

- Set some ground rules, as refugees and survivors of torture have often experienced a lack of control in their past environments.
 - Give your client a sense of control, telling her that she can stop the interview at any time and refrain from answering any questions. You may stop the interview as well if you feel things are too emotionally charged.

- Educate your client about your treatment center and the services it offers.

Gathering Pre-Torture Social & Work Histories

Gathering Torture History

- If your client was imprisoned, why and how did this happen?
- What did her cell or detention center look like? How many people were housed in the cell? Did she have access to water, food, a toilet, warmth, medical care, legal representation, and human rights advocacy?
- While imprisoned, was your client able to sleep well and communicate with her family?
- Slowly ask her to describe what happened. Specific areas of concern will include:
 - Was she threatened?
 - Was your patient beaten, suspended, shaken, restrained, shackled, burned, crushed, shocked, or exposed? Did she experience head trauma, as this may affect how well she remembers past events?
 - Was your client forced to accuse others or to confess to things she did or did not do?
 - Was she forced to watch or participate in mock executions or the torture of others?
 - Obtain a history of sexual violence and rape very slowly and compassionately.
 - Note that events related to sexual trauma, as well as being forced to give information that could hurt another or one's family, can be particularly difficult to talk about.
- Why and how was your client released?
- From what did your patient derive the will to survive and the strength to endure?
- How did these experiences immediately affect your patient?
- Give reassurances whenever possible.

Medical, Psychological, and Trauma Histories

- Medical and psychological history
 - Medical problems, hospitalizations, Western and traditional medicines, allergies, diet
 - drug history (alcohol, stimulants, depressants, tobacco)
- Trauma history (stresses, lack of healthy family support networks, abuse, domestic violence, childhood trauma)

Current Social and Work Histories

- Why and how did your client come to live near your treatment center? What is your client's current living situation, including access to food, clothing, and shelter? What is her level of social functioning (daily activities, occupation, social networks, recreational activities)?

Assessing Mental Health Status

Ending the Interview