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STARTTS Clinical Masterclass
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Moral Injury following Refugee Torture and Trauma
Case Presentation



NSW Service for the
Treatment and
Rehabilitation of
Torture and Trauma
Survivors

REASONS FOR PRESENTING THIS CASE — ALI*

- Client whose presentation was characterised by complex moral injury following extended detention, psychological torture and human rights violations
- Demonstrates importance of assessing and formulating people's appraisal of traumatic events and moving beyond an exclusively fear-based conceptualisation post-traumatic stress.
- Highlights how the negative impacts of State-sponsored violence reverberates through the family, community and social systems of individual torture survivors.

BACKGROUND INFORMATION

Referral information: Ali* was a Uyghur man from East Turkestan* who self-referred to STARTTS for counselling.

Language: Uyghur. Initially used interpreter before switching to English sessions.

Family: Ali has family in Australia and in East Turkestan.

Religion: Sunni Islam – constituted major protective factor and coping resources

Employment / Education: Employed and able to maintain a steady income. Completed some tertiary education and presented as intelligent and reflective.

Engagement with therapy: Attended 18 total sessions. This included a mix of face-to-face and telehealth sessions due to disruptions of COVID-19 lockdowns.

SOCIAL-POLITICAL-HISTORICAL CONTEXT: “RE-EDUCATION” IN EAST TURKESTAN

CCP fears that the unique cultural & religious identity of the Uyghur people will threaten the social stability of the entire country.

The solution (“People’s War in Xinjiang”): Complex system of surveillance, bureaucratic control, detention and “re-education”.

Described as genocide and cultural assimilation.

Estimates that at least 1 million and up to 3 million people have been detained in re-education centres.

Regime of torture, brainwashing, false confessions, daily ‘repentance’ and arbitrary control.

Reports of forced sterilisation, denial of access to medical care, forced labour, organ harvesting and sexual assault.



Image ref: Kokbayraq Flag www.wikipedia.org



Image ref: 牙生 on Baidu (censored)

RELEVANT HISTORY – IN CHINA

- Ali reported experiencing discrimination and racism during his childhood and schooling – several examples of violence and exclusion
- Moved overseas for work – considered un-patriotic and suspicious
- Returned to China and was detained for 18 months in concentration camps
- Selected as a ‘teacher’ due to education level and forced to teach brainwashing materials to community – kept in separate quarters and isolated from other detainees
- Classes were given regular exams or asked questions – if they did not perform adequately they were punished (including beatings)
- Interviewed many times: recorded making forced confessions, denouncing Uyghur culture and religion, praising CCP, agreeing to inform on Uyghur community once released

RELEVANT HISTORY — IN AUSTRALIA

- Family breakdown after arrival in Australia – felt abandoned as family were afraid to speak out about his detention due to risk of harm to other family members
- Separation from children due to family breakdown
- Isolation from community due to fear of rejection
- Engagement in advocacy and sharing story – afraid to identify self due to risk to family members in tension with strong desire for justice
- Ongoing contact from CCP officers – threats and reminder of recorded confessions

PRESENTING PROBLEMS

- Distressing emotions of anger, shame and guilt – interpreted as reflecting ‘weakness’ and a failure to accept “Allah’s will”
- Distressing & persistent rumination – focus on seeking justice & saving others
- Severe sleep difficulties attributed to intense emotion and rumination
- Recent intrusion symptoms, with associated avoidance
- Family breakdown and separation from children – characterised by feeling of betrayal and grief
- Score-SR (STARTTS new assessment tool): highlighted distress related to separation and inability to care for family overseas, disconnection from traditions and inability to fulfil responsibility to others.

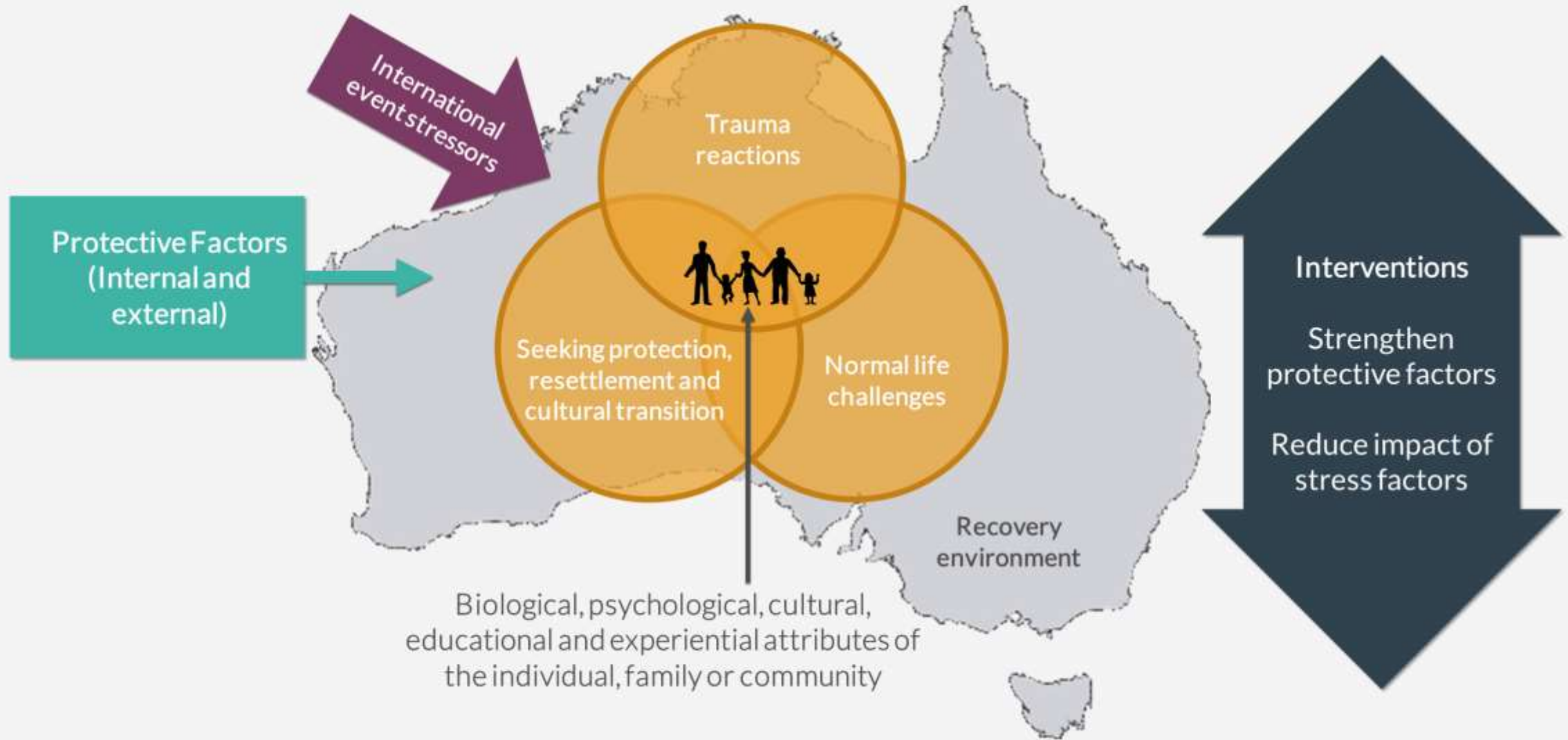
A MORAL INJURY?

“The lasting psychological, biological, spiritual, behavioural, and social impact of perpetrating, failing to prevent, or bearing witness to acts that transgress deeply held moral beliefs and expectations” – (Litz et al., 2009)

- Psychological impacts – pervasive changes in mood and beliefs about self & others
- Spiritual impacts – a difficult search for meaning and reconciliation
- Social impacts – self-imposed isolation from community, family breakdown, distress related to separation from community and culture
- Deep psychological pain – an embodied experience of shame

Not characterised by severe intrusion symptoms related to a fear-based mechanism.
Intrusions and intense emotions of anger, guilt and shame were mutually reinforcing.
Notable impact of ongoing genocide in East Turkestan and targeting of Uyghur diaspora.

The complex interaction of challenges



TREATMENT GOALS

In the therapist's mind:

- Trauma-reprocessing to shift appraisal of events and reduce self-blame
- CBT to shift negative beliefs about key emotions (anger, guilt, shame) – reduce avoidance and increase acceptance
- Support reflection about future goals and role in advocacy – reduce ongoing moral distress

In Ali's mind:

- To share his story with someone
- Validation of injustice
- Reduction of anger, guilt and anxiety
- A search for meaning?

TRAUMA RE-PROCESSING

Client had commenced self-directed re-processing through producing a written account of his experiences – creating coherent narrative and searching for meaning.

Provided some psychoeducation to support this process, including consolidating emotional regulation skills, increase insight into process and benefits, and supporting structure of processing.

Focus of sessions was debriefing experience of exposure, to amplify new insights and changes in appraisal of events and self-transgressions.

Additional re-processing during some sessions – typically experiences related to intense feelings of guilt. This was used to highlight Ali's acts of resistance and protection of others in order to shift appraisals of self-transgression.

ADDRESSING THE MORAL INJURY - ANGER

Psychoeducation to increase insight into the function of anger. High value of scientific inquiry, reasoning & logic in Islam supported openness to this process.

Supporting reflection about the meaning of anger - involved engaging with religious discourse and how Ali's faith helped him make sense of his anger.

Re-appraisal of anger from representing a spiritual failure ("My anger means I have not accepted Allah's plan") to an expression of Islamic values of justice and dignity ("My anger means I care about justice for my people and fellow-detainees").

Discovery of the role of grief as cause of anger – multiple losses & cultural bereavement.

Identification with the collective trauma and finding purpose – how to redirect anger into something productive and helpful for others.



ADDRESSING THE MORAL INJURY – GUILT & SHAME

Client expressed distinct feeling of shame that he was not doing more to advocate for his fellow detainees, and guilt related to specific experiences in the concentration camp – creating an ongoing sense of moral re-injury.

Ali was engaged in various advocacy opportunities, but was hesitant and unsure about giving his name (which would create risks for his family in East Turkestan). The use of problem-solving focused reflection was helpful to support decisions about this, what is his purpose in addressing the ongoing collective traumatising.

The attribution of transgression was shifted from self to perpetrator through centring the role of the perpetrator, decrease self-blame and highlight areas of resistance.

Ramadan provided a time of consistent reflection, meditation, connection (with self, Allah and others) – supported and accelerated recovery.

TREATMENT OUTCOMES

- Ali reported reduced intensity of anger, guilt and anxiety - “Boiling water to still water”
- Significant changes in his appraisal of key emotion – less avoidance and more acceptance of these experiences
- Increased optimism about future and a new life in Australia - “I am moving on”
- Increase connection and engagement with his community in Australia

? Ongoing persecution of the Uyghur people – is complete recovery possible?

? Strong desire to support fellow detainees – a constant questioning of what is enough

[Surviving the Crackdown in Xinjiang](#) – detailed story from one survivor in The New Yorker

[The Xinjiang Data Project](#) by ASPI – data analysis to document genocide & assimilation





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REFERENCES

Aroche, J., & Coello, M. (1994). Towards a systematic approach for the treatment and rehabilitation of torture and trauma survivors: The experience of STARTTS in Australia. *Torture Journal*, 32(1-2), 133-143.

Litz, B. T., Stein, N., Delaney, E., Lebowitz, L., Nash, W. P., Silva, C., & Maguen, S. (2009). Moral injury and moral repair in war veterans: A preliminary model and intervention strategy. *Clinical psychology review*, 29(8), 695-706.