

Symposium | Trauma : [Symposium 68] Rethinking Trauma: Cultural Models of Care Across Clinical Practice and Treatment Systems

📅 2025年9月27日(土) 14:10 ~ 15:40 🏢 Session Room 4 (Large Hall B)

[Symposium 68] Rethinking Trauma: Cultural Models of Care Across Clinical Practice and Treatment Systems

Moderator: Selim G. Atici (Princeton University and University of Tokyo), Junko Kitanaka (The Department of Human Sciences at Keio University in Tokyo) Discussant: Laurence J. Kirmayer (McGill University)
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[SY-68-01] Comparative Analysis of Post-Traumatic Stress Disorder and Complex Post-Traumatic Stress Disorder utilizing the International Trauma Interview Across Three Distinct Trauma-Affected populations: Veterans, Civilians, and Refugees

*Jessica Mariana Carlsson Lohmann^{1,3,4}, Hinuga Sandahl^{1,3,4}, Sofie Folke², Erik Vindbjerg¹, Maja Bruhn^{1,4} (1. Competence Centre for Transcultural Psychiatry, Mental Health Centre Ballerup (Denmark), 2. Department of Military Psychology, Danish Veterans Centre, Copenhagen, Denmark (Denmark), 3. Centre for Culture and the Mind, University of Copenhagen (Denmark), 4. Faculty of Health and Medical Science, University of Copenhagen (Denmark))

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The prevalence and severity of Post-Traumatic Stress Disorder (PTSD) and Complex Post-Traumatic Stress Disorder (CPTSD) vary across distinct trauma-affected populations. This study compared veterans (N=123), civilians (N=49), and refugees (N=33) regarding the prevalence and severity of ICD-11 PTSD and CPTSD, assessed using the International Trauma Interview (ITI), alongside trauma history and well-being (WHO-5). Preliminary findings indicate that 65% of veterans meet CPTSD criteria, compared to 69% of civilians and 52% of refugees, while 14%, 25%, and 27% meet PTSD criteria, respectively. Civilians with CPTSD scored significantly lower on 'Disturbances in self-organization' symptoms compared to veterans with CPTSD ($p=0.0198$) and refugees with CPTSD ($p=0.0472$), but higher on PTSD symptoms compared to veterans ($p=0.0228$). When comparing overall well-being, refugees had the lowest score, although this difference was not statistically significant ($p=0.0873$). Furthermore, notable demographic differences were observed, with the veteran population predominantly male, the civilian population primarily female, and the refugee population exhibiting a mixed sex composition. Primary trauma types for veterans and refugees were combat-related, whereas civilians most frequently reported sexual assault. This comparative analysis seeks to elucidate and discuss the complex impacts of trauma across these populations. The presentation will discuss how to offer culturally competent clinical interventions across trauma-affected populations.