Author’s response to reviews

Title: Exposures to war-related traumatic events and post-traumatic stress disorder symptoms among displaced Darfuri female university students: An exploratory study

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Author's response to reviews: see over
Dear Prof Sondorp,

We are very thankful that you find the manuscript positively and extensively adjusted and that the concerns were genuinely and thoughtfully addressed. We do hope that our response below in regards to the ‘stigmatization’ concern will clarify and validate this issue.

As you mentioned in your comments, this study is beneficial as input in wider research and particularly to the Darfuri female participants as a group of war-traumatized Sudanese citizens. In our view this benefit is multifold.

Firstly, this study is part of a larger research project among Darfuri students of Ahfad University for Women which aims to investigate not only their war-related exposures, and associated PTSD symptom rates, but also their on-going post-displacement stressors and other psychosocial responses including generalized anxiety disorder and major depression symptoms. The research further explores these Darfuri women’s resilience levels, resilience characteristics and assorted coping strategies.

Secondly, the objective behind this exercise is to investigate the totality of the experiences and responses, both negative and positive, of a Sudanese group of war traumatized citizens, with particular reference to women, a historically marginalized group whose needs are now identified and targeted.

Thirdly, by highlighting this potentially at-risk group for psychiatric and psychosocial disorders, effective and proficient war-trauma counselor training among the existing mental health care professionals can begin; enabling them to serve the war traumatized Darfuri students. Fourthly, only by having the right counselor can targeted counseling intervention be successfully developed and implemented within AUW counseling center to serve its war-traumatized population including students from South Sudan, Abyei, the Eastern region and IDPs in the Umbada catchment area in Omdurman city, where AUW is located. Fifthly, in a resource poor country as Sudan, seeking war-targeted mental health services is very limited. It is envisaged that the expertise, knowledge and skills gained from the training of AUW war-trauma counselors can be disseminated among the wider mental health care community who are dealing with disasters, wars or violence through high-quality coaching systems. Sixthly, the demand for excellence in mental health care of these war-affected Sudanese is great, and far outweigh any ‘possible stigmatization’ that may occur as a result of the publication of this study. In fact, it is only by identifying the core aspects and needs assessment of war-traumatized individuals can an effective war counselor training program and war trauma counseling center be properly addressed and development. Seventhly, our Darfuri participants were aware of what the publication would entail, as you put it ‘possible stigmatization of this group of Darfuri female students at AUW’. Yet despite this awareness and knowledge, none of the student participants dropped out of the study. Surely this must say something about their personal attitude over this ‘possible stigmatization’ concern. We are cognizant of any possible stigma and in no way are we blasé about associations being made; indeed we have taken great care to work collaboratively.
and proactively with these students by giving them this ‘screening instrument’. It can be said that this study actually worked as a first response in psycho-education to reduce stigma and mistrust and engage Darfuris. And finally, the issue of stigmatization needs to be placed within the context of the totality of the Darfuri, if not the Sudanese, experience of war-related exposures and the atrocities therein suffered. The implications, we believe, far outweigh stigmatization placed on them as a result of PTSD. In other words, the Sudanese society may take lightly to any psychological disability and the need to seek mental health professionals in order to alleviate the suffering of associated mental health problems arising from war-related exposures, but not the ethical, moral, religious, sexual taboos and stigma related to war related violations of women victims of war. These relationships underlie strong cultural and gender components which ultimately render these young Darfuri women vulnerable, intimidated, and isolated. We believe that we have a moral responsibility to provide the necessary mental health care needs for these Darfuri women, bearing in mind possible stigmatization but also acknowledging the prospective outlook of the Sudan as a nation without psychologically harmed mothers. This view I personally hold as a Sudanese female author, and wish to accept on behalf of the authors of this study as a true reflection of the values stated above.

We hope that these explanations alleviate your apprehensions, valid as they are, to the stigma concern.

On behalf of the authors,

Alia Badri