

TRAUMA-INFORMED LEGAL ADVOCACY (TILA) in ASYLUM & IMMIGRATION PROCEEDINGS

A Curated Selection of Resources for Attorneys and Legal Advocates

*This annotated bibliography was created by Mayra Gomez as part of NCDVTMH's Trauma-Informed Legal Advocacy (TILA) Project. The TILA Project offers guidance on applying trauma-informed principles to working with survivors of domestic violence in the context of legal proceedings. For find more TILA Project resources, visit our website:
www.nationalcenterdvtraumamh.org.*

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The articles included in this collection cover a variety of topics relevant to lawyers and legal advocates who are practicing a trauma-informed approach to working with trauma survivors in asylum and immigration proceedings. Topics include the following:

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Section 1: The Asylum & Immigration Process as a Source of Trauma

Many individuals who have experienced trauma and/or who work as legal advocates or lawyers have commented on the retraumatizing impact of the legal system as a whole. This section includes studies on the impact of the asylum and immigration process, specifically, on the mental health and well-being of those involved. Many of these individuals are survivors of trauma, who may experience asylum proceedings as compounding their prior trauma.

Impact of Asylum Interviews on the Mental Health of Traumatized Asylum Seekers

Citation: Katrin Schock, Rita Rosner & Christine Knaevelsrud, *Impact of Asylum Interviews on the Mental Health of Traumatized Asylum Seekers*, 6 EUROPEAN J. PSYCHOTRAUMATOLOGY 1 (2015).

This full text of this article is available at:

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4558273/pdf/EJPT-6-26286.pdf>

Abstract: *Background:* Asylum interviews within the asylum procedure are associated with psychological stress for traumatized asylum seekers. This study investigates the impact of asylum interviews on the mental health in a sample of 40 traumatized asylum seekers. The comparison group consisted of refugees (N_10) that had not been invited to an asylum interview. Additionally, the moderating effects of trial-related variables such as perceived justice of the trial, stress of giving testimony, and stress of waiting for the asylum interview were examined. [...] *Conclusions:* The present findings underline the stressful impact of asylum interviews on traumatized refugees. They indicate that the asylum interview might decrease posttraumatic avoidance and trigger posttraumatic intrusions, thus highlight the importance of ensuring that the already vulnerable group of traumatized refugees needs to be treated with empathy during their asylum interview.

Mental Health of Cambodian Refugees 2 Decades after Resettlement in the United States

Citation: Grant N. Marshall, et al., *Mental Health of Cambodian Refugees 2 Decades after Resettlement in the United States*, 294 J. AM. MED. ASSOC., 571 (2005).

The full text of this article is available at:

<http://naapimha.org/wordpress/media/MH-of-Cambodian-refugees2-decades-after-resesttlement-US.pdf>

Description: Little is known about the long-term mental health of trauma-exposed refugees years after permanent resettlement in host countries due to the limitations of previous studies on the topic. This study assesses the prevalence, comorbidity and correlates of psychiatric disorders in the US Cambodian refugee community.

Immigration Trauma, Substance Abuse, and Suicide

Citation: Claudia Epelbaum, et al., *Immigration Trauma, Substance Abuse, and Suicide*, 18 HARVARD REV. PSYCHIATRY 304 (2010).

The full text of this article is available at:

<http://www.dbhds.virginia.gov/library/cultural%20and%20linguistic%20competence/provider%20material/sa%20provider%20resources/immigration%20trauma%20substance%20abuse%20and%20suicide.pdf>

Excerpt: “This article is a case study about Bianca, a 35-year-old divorced Brazilian woman with a history of depression, anxiety, trauma, and substance abuse who has made several serious suicide attempts. The case study is used to discuss immigration status as a psychosocial stressor. More specifically, the article discusses how female immigrants’ separation from their families is a main factor associated with depressive symptoms and the fact that the rate of psychotic disorders immigrants suffer worsens as they spend more time in the United States. This case study, while designed for clinicians, is particularly helpful for attorneys as they can learn how immigration trauma can impact an individual’s life.”

Migration Traumatic Experiences and Refugee Distress: Implications for Social Work Practice

Citation: Miriam George, *Migration Traumatic Experiences and Refugee Distress: Implications for Social Work Practice*, 40 CLINICAL SOCIAL WORK J. 429 (2012).

Limited access to this article is available via:

<http://ifp.nyu.edu/2012/journal-article-abstracts/migration-traumatic-experiences-and-refugee-distress-implications-for-social-work-practice/>

Abstract: Each step of the refugee migratory journey has its own unique characteristics and mental health consequences, which require much attention from social work service providers. In an effort to provide quality service delivery for refugees, their premigration, migration and post-migration traumatic experiences need to be examined and understood beyond current narrow formulations. Integrating the concepts derived from refugee trauma and psychological distress literature, the author presents in this paper group-based interventions grounded in cultural competency, spirituality and strengths which will enable social workers to provide efficient service delivery and adopt a leadership role among service providers as advocates for refugees.

Seeking Asylum-Trauma, Mental Health, and Human Rights-An Australian Perspective

Citation: Louise Newman, *Seeking Asylum—Trauma, Mental Health, and Human Rights: An Australian Perspective*, 14 J. TRAUMA & DISSOCIATION 213 (2013).

Limited access to this article is available via:

<https://www.ncbi.nlm.nih.gov/pubmed/23406225>

Summary: Australia has a unique policy requiring asylum seekers to be detained. This article discusses the impact that detention can have on these refugees mental health.

Excerpt: “Mental health is a core public health issue for refugees. A recent meta-analysis found that more than 30% of refugees experience posttraumatic stress disorder and depression (Steel et al., 2009). Poor mental health manifests in self-harm and suicidal behavior, interpersonal violence, social isolation, and poor social functioning and adaptation (Mollica et al., 1993; Oquendo et al., 2003; Silove, 1999). Mental disorder in

refugees arises from a mix of factors, including (a) repeated exposure to traumatic experiences in the country of origin; (b) stresses encountered in the period of transition and asylum seeking; and (c) post-migration experiences, such as insecure residency, fear of repatriation, and socioeconomic discrimination.”

Two year psychosocial and mental health outcomes and mental health outcomes for refugees subjected to restrictive or supportive immigration policies

Citation: Zachary Steel, et al., *Two Year Psychosocial and Mental Health Outcomes for Refugees Subjected to Restrictive or Supportive Immigration Policies*, 72 Soc. Sci. & Med. 1149 (2011).

Limited access to this article is available via:
<https://www.ncbi.nlm.nih.gov/pubmed/21427011>

Abstract: Australia has been at the forefront of implementing immigration policies that aim to limit the flow of asylum seekers over recent decades. Two controversial policies have been the use of immigration detention for unauthorized arrivals and the issuing of temporary protection visas (TPVs) for refugees who arrived without valid visas. We conducted a longitudinal survey over 2 years commencing in 2003 of 104 consecutive refugees from Iran and Afghanistan attending a state-wide early intervention program in New South Wales. The sample included those released from immigration detention on TPVs ($n = 47$) and others granted permanent protection visas prior to entering Australia (PPVs, $n = 57$). Psychological symptoms were assessed at baseline and follow-up by the Harvard Trauma Questionnaire (HTQ), the Hopkins symptom checklist-25 (HSCL), the GHQ-30 and the Penn State Worry Questionnaires (PSWQ). English language competency, daily living difficulties and coping-related activities were also assessed. The results indicated that TPVs had higher baseline scores than PPVs on the HTQ PTSD scale, the HSCL scales, and the GHQ. ANCOVA models adjusting for baseline symptom scores indicated an increase in anxiety, depression and overall distress for TPVs whereas PPVs showed improvement over time. PTSD remained high at follow-up for TPVs and low amongst PPVs with no significant change over time. The TPVs showed a significant increase in worry at follow-up. TPVs showed no improvement in their English language

skills and became increasingly socially withdrawn whereas PPVs exhibited substantial language improvements and became more socially engaged. TPV holders also reported persistently higher levels of distress in relation to a wide range of post-migration living difficulties whereas PPVs reported few problems in meeting these resettlement challenges. The data suggest a pattern of growing mental distress, ongoing resettlement difficulties, social isolation, and difficulty in the acculturation process amongst refugees subject to restrictive immigration policies.

A Systematic Review of Treatments for Post Traumatic Stress Disorder Among Refugees and Asylum Seekers

Citation: Niall Crumlish & Killian O'Rourke. *A Systematic Review of Treatments for Post-Traumatic Stress Disorder among Refugees and Asylum-Seekers*, 198 J. NERVOUS & MENTAL DISEASE 237 (2010).

Limited access to this article is available via:

<https://www.ncbi.nlm.nih.gov/pubmed/20386252>

Excerpt: "Recent years have seen a consensus emerge on the treatment of post-traumatic stress disorder (PTSD) in the general population. No such consensus exists for refugees, although the rate of PTSD among refugees is 10 times that of the general population. We conducted a systematic review of randomized controlled trial of treatment of PTSD among refugees and asylum seekers. We rated trials with a risk of bias table and drew conclusions about the evidence for individual therapies. Ten randomized, controlled trials ($n = 528$) met our search criteria. Trials were small, and allocation concealment and blinding were inadequate. No treatment was firmly supported, but there was evidence for narrative exposure therapy and cognitive-behavioral therapy. Future trials should evaluate interventions that are developed within refugees' cultures, based on a local understanding of trauma and psychological distress."

Section 2: Culture & Trauma

Materials on trauma and/or a trauma-informed approach written specifically for lawyers are scarce. Materials on how lawyers and legal advocates can take a culturally relevant and trauma-informed approach to their work with trauma survivors are even more rare. However, a small but significant

literature exists on the intersection of culture and trauma. Although most of these resources are not specific to legal proceedings, they may nonetheless be helpful to lawyers and legal advocates seeking to develop and practice a culturally relevant and trauma-informed approach to their work. Thus, the compilation of tools and articles in this section is intended to serve as a starting point for analysis of the intersection of these issues and implications for legal advocates and lawyers.

Ethnocultural Aspects of PTSD: an Overview of Concepts, Treatments and Issues

Citation: Anthony J. Marsella, *Ethnocultural Aspects of PTSD: An Overview of Concepts, Issues, and Treatments*, 16 TRAUMATOLOGY 17 (2010).

This full text of this article is available at:

<http://tmt.sagepub.com/content/16/4/17.abstract>

Abstract: The present article offers an overview discussion of ethnocultural aspects of PTSD, with special attention to major conceptual issues, clinical considerations, and therapy practices. The historical circumstances leading to the widespread acceptance of PTSD among conventional mental health professionals, and the subsequent criticisms that emerged from scholars, humanitarian workers, and ethnocultural minorities are presented as an important background to the current controversial status of the concept, especially with regard to arguments regarding the ethnocultural determinants of PTSD. The concept of culture, its definition, and its developmental socialization process, are presented as foundations for understanding the many influences cultural variables have on the perception, experience, clinical expressions, and treatment responses to trauma. A “trauma event-person ecology” model identifies the different factors that serve to shape the outcome of trauma within and across cultures. A therapy outcome equation is presented that summarizes the complex calculus of variables and considerations impacting different outcomes. The many healing principles used by different Western and traditional approaches are also identified, calling attention to the importance of fitting patient to therapist to therapy to present and past circumstances. The article concludes that in spite of what appears to be common neurological processes, correlates, and consequences in the initial response to trauma exposure, ethnocultural variables exercise major influence on perceived causes, symptom manifestations, clinical parameters (i.e., onset, course, and outcome), interventions, and societal responses.

Historical Trauma Among Indigenous Peoples of the Americas: Concepts, Research, and Clinical Considerations

Citation: Maria Yellow Horse Brave Heart, et al., *Historical Trauma Among Indigenous Peoples of the Americas: Concepts, Research, and Clinical Considerations*, 43 J. PSYCHOACTIVE DRUGS 282 (2011).

The full text of this article is available at:

<https://www.thefreelibrary.com/Historical+trauma+among+indigenous+peoples+of+the+Americas%3a+concepts%2c...-a0278880914>

Abstract: Indigenous Peoples of the Americas have experienced devastating collective, intergenerational massive group trauma and compounding discrimination, racism, and oppression. There is increasing evidence of emotional responses to collective trauma and losses among Indigenous Peoples, which may help to inform ways of alleviating psychological suffering and unresolved grief. Tribal cultural and regional differences exist which may impact how the wounding across generations and within an individual's lifespan are experienced and addressed. This article will review the conceptual framework of historical trauma, current efforts to measure the impact of historical trauma upon emotional distress, and research as well as clinical innovations aimed at addressing historical trauma among American Indians/Alaska Natives and other Indigenous Peoples of the Americas. We will discuss assessment of historical trauma and implications for research and clinical as well as community interventions, and conclude with recommendations.

Facts & Stats: Domestic Violence in Asian, Hawaiian, and Pacific Islander Homes

Citation: Mieko Yoshihama & Chic Dabby, *Facts & Stats: Domestic Violence in Asian, Hawaiian, and Pacific Islander Homes* (2009).

This resource is available at: <http://www.api-gbv.org/files/Facts.Stats-APIIDV-2012.pdf>

Summary: This is a compilation of facts and statistics gathered by the Asian and Pacific Islander Institute on Domestic Violence after carefully reviewing both published and unpublished literature related to the Asian, Hawaiian, and Pacific Islander communities in relation to domestic violence.

Excerpt: “*Facts & Stats* raises awareness about the experiences of Asian, Hawaiian, and Pacific Islander battered women, counters denial about the problem, emphasizes the need for socio-culturally effective prevention and intervention, and serves to guide future research and inform public policy.”

Intimate Partner Violence Among Asian Americans and their Use of Mental Health Services: Comparisons with White, Black, and Latino Victims

Citation: Hyunkag Cho & Woo Jung Kim, *Intimate Partner Violence Among Asian Americans and their Use of Mental Health Services: Comparisons with White, Black, and Latino Victims*, J. IMMIGR. MINORITY HEALTH (2012).

The full text of this article is available at:

<http://news.msu.edu/media/documents/2012/07/b4652c5c-5d22-4283-88b8-c72528c87b17.pdf>

Summary: This study uses a national sample to shed light on the number of Asian Americans using mental health services. Results showed that Asian Americans used mental health services less than other racial groups. Moreover, older people and men used mental health services at a lower rate.

Section 3: Trauma & Memory in Asylum Proceedings

Many asylum or immigration processes require the applicant to extensively recount and record memories of a traumatic event. In these cases, lawyers and legal advocates have dual goals: to elicit from the client the memories necessary to compose the best possible application for relief, while also minimizing the traumatic impact of this process on the survivor.

An extensive body of literature addresses memory among survivors of trauma who are applying for asylum or immigration relief. The following is a selection of some of these resources. The next section will include practical resources related to trauma-informed interviewing.

While many of these research studies examine the impact of trauma on the memory of asylum applicants and/or the accuracy of their memories, the findings are, of course, relevant to a wide range of trauma survivors, including those who may be involved in custody or order of protection cases.

Asylum Claims and Memory of Trauma: Sharing our Knowledge

Citation: Jane Herlihy & Stuart W. Turner, *Asylum Claims and Memory of Trauma: Sharing Our Knowledge*, 191 BRITISH J. PSYCHIATRY 3 (2007).

This full text of this article is available at:

<http://bjp.rcpsych.org/content/191/1/3.full-text.pdf+html>

Abstract: Asylum cases are made difficult by the absence of a body of objective evidence. Psychiatrists and psychologists have a breadth of knowledge relating to the memory of trauma, which could help to inform the asylum process, but we need to investigate how to apply this knowledge and how to make it accessible to decision makers.

Central American Victims of Gang Violence as Asylum Seekers: The Role of the Forensic Expert

Citation: Gilberto De Jesús-Rentas, James Boehnlein & Landy Sparr, *Central American Victims of Gang Violence as Asylum Seekers: The Role of the Forensic Expert*, 38 J. AM. ACADEMY PSYCHIATRY & L. 490 (2010).

The full text of this article is available at:

https://s3.amazonaws.com/PHR_other/central-american-victims-of-gang-violence-as-asylum-seekers-the-role-of-the-forensic-expert.pdf

Abstract: Individuals fleeing persecution have the right to asylum. This most fundamental right was guaranteed by the 1951 United Nations (UN) Convention Relating to the Status of Refugees and was implemented in the 1967 UN protocol regarding refugee status. The United States codified refugee protection and the procedures for asylum in the Refugee Act of 1980, which was made part of the Immigration and Nationality Act (INA). In claiming refugee status, the burden of proof rests with the asylum seeker and is often a daunting task, given language and cultural barriers, lack of knowledge about U.S. legal procedures, and the reality that oppressive states do not document their intentions to persecute dissidents. Forensic psychiatrists may be asked to provide mental health assessment in immigration cases. In this article, an example of a Central American man with a nontraditional but increasingly common request for asylum is

presented, the asylum process is described, and the role of the forensic psychiatric expert before the immigration court is explored.

Memory and Its Implications for Asylum Decisions

Citation: Jessica Chaudhary, *Memory and Its Implications for Asylum Decisions*, 6 J. Health & Biomedical L. 37 (2010).

The full text of this article is available at:

<http://suffolk.edu/documents/Law%20Journal%20of%20H%20and%20B/Chaudhary-37-63.pdf>

Excerpt: “The determination of whether an individual's circumstances merit the granting of asylum status is a challenging decision. An adjudicator often relies on intangible evidence, the applicant's story, and limited documentation. This story can be filled with numerous inconsistencies and omissions, leaving an adjudicator inevitably questioning the veracity of the applicant's story. Because there is often minimal physical evidence to support an applicant's claim, what is left is the individual's recollection of the events, upon which the approval of asylum hinges. These events can be traumatic, and the consequences of witnessing the traumatic events, or experiencing unspeakable abuses, can lead to psychiatric disorders as well as difficulties in recall.

Inconsistencies in memory do not necessarily equate to willful misrepresentation, and must be considered carefully in the context of the applicant's entire story. The study of memory is extremely complicated, and while this paper will not address every condition that could lead to impairments in memory, it will discuss common misperceptions about memory as well as the role of common psychiatric diseases in memory impairments. Further, this paper hopes to be of assistance to attorneys representing clients seeking asylum and triers of fact adjudicating asylum cases.”

Credibility of Asylum Claims: Consistency and Accuracy of Autobiographical Memory Reports Following Trauma

Citation: Amina Memon, *Credibility Of Asylum Claims: Consistency And Accuracy Of Autobiographical Memory Reports Following Trauma* *Credibility Of Asylum Claims: Consistency And Accuracy Of Autobiographical Memory Reports Following Trauma*, 25 APPLIED COGNITIVE PSYCHOL. 677 (2012).

This full text of this article is available at:

<http://www.pc.rhul.ac.uk/sites/rheg/wp-content/uploads/2011/05/Memon-2012.pdf>

Abstract: [This article appears in a collection in which the editors] review the literature on the characteristics of autobiographical memory in asylum seekers who are presenting evidence of their traumatic experiences in the immigration courts with a view to finding a safe haven. In this commentary, [Memon] briefly discuss[es] how the quality of the memory report may influence reliability and credibility judgements in individuals whose memories may be subject to post-traumatic stress disorder.

Cultural Differences in Specificity of Autobiographical Memories: Implications for Asylum Decisions

Citation: Laura Jobson, *Cultural Differences in Specificity of Autobiographical Memories: Implications for Asylum Decisions*, 16 *Psychiatry, Psychol. & L.* 453 (2009).

Abstract: Current knowledge about cultural differences in the trauma autobiographical memory is limited. Such a limitation reduces the body of empirical evidence that can be drawn upon to inform decisions about asylum. The objective of this study was to explore the impact of cultural differences in self-construal on the specificity of autobiographical memories. Research participants from independent and interdependent cultures were asked to provide autobiographical memories of everyday events, trauma events and self-defining memories. Those from independent cultures consistently provided more specific autobiographical memories than those from interdependent cultures. The findings indicate that specificity has an essential role in enhancing the dominant self-focus and needs to be considered when deeming a memory as credible.

Just Tell Us What Happened to You: Autobiographical Memory and Seeking Asylum

Citation: Jane Herlihy, et al., *Just Tell Us What Happened to You: Autobiographical Memory and Seeking Asylum*. 26 APPLIED COGNITIVE PSYCHOL. 661 (2012).

This full text of this article is available at:

<http://cseel.org.uk/assets/images/resources/herlihy-jobson-turner-2012-acp/Just-Tell-Us-pre-print.pdf>

Abstract: When someone flees their country and seeks the protection of another state, they usually have to describe what happened to make them afraid to return. This task requires many psychological processes, a key one being autobiographical memory. Memory for events of a specific time and place in one's personal past is the subject of a huge literature, much of it showing that recall is vulnerable to distortions and biases. We review selected areas of this literature, shedding light on some of the processes at work when someone seeks to be recognised as a refugee—in particular, the effects of emotion, including emotional disorder. We then turn to the differing types of memory styles seen in different cultures. Crucial to this area, we briefly examine the current literature on deception. Finally, we draw on the reviewed literature to present conclusions about the reliance on autobiographical memories in the asylum process.

Overgeneral memory in asylum seekers and refugees

Citation: Belinda Graham, et al., *Overgeneral Memory in Asylum Seekers and Refugees*, 45 J. BEHAVIOR THERAPY & EXPERIMENTAL PSYCHIATRY 375 (2014).

This article is available at:

<http://cseel.org.uk/assets/images/resources/graham-herlihy-brewin-2014-jbtep/graham-herlihy-brewin-overgeneral-memory.pdf>

Abstract: Studies in western samples have shown that post-traumatic stress disorder (PTSD) and depression are associated with overgeneral autobiographical memory retrieval. This study assesses whether this association extends to asylum seekers and refugees from diverse cultural

backgrounds. We discuss implications for those providing testimony of their experiences when seeking asylum. Method: 38 asylum seekers and refugees were recruited through clinics and community groups. Clinical interviews assessed PTSD and depression and participants completed a test of autobiographical memory specificity. Results: When accounting for omissions, participants with PTSD and depression recalled a lower proportion of specific memories. Those with PTSD also failed more frequently to report any memory. Limitations: The sample did not permit separate evaluation of the effects of PTSD and depression on specificity. Conclusions: Lower memory specificity observed in people experiencing PTSD and depression in western populations extends to asylum seekers and refugees from diverse cultural backgrounds. This study adds to the literature suggesting that being recognised as a refugee fleeing persecution is more difficult for those with post-traumatic symptoms and depression.

Section 4: Trauma-Informed Legal Advocacy Techniques & Interviewing Strategies

Attorneys and legal advocates are in constant communication with clients. Knowing effective strategies to use and how to approach an interaction with a client helps the attorney or advocate effectively represent the client's needs. The tools provided in this section are meant to provide strategies that attorneys and legal advocates can use to establish a relationship of trust during the initial interview and subsequent interactions with trauma victims facing divorce, custody, and/or immigration proceedings.

The Trauma-Informed Legal Advocacy (TILA) Project

Rachel White-Domain

National Center on Domestic Violence, Trauma & Mental Health

<http://www.nationalcenterdvtraumamh.org/trainingta/trauma-informed-legal-advocacy-tila-project/>

The Trauma-Informed Legal Advocacy (TILA) Project offers guidance on applying trauma-informed principles to working with survivors of domestic violence in the context of legal proceedings. Building on the accessibility, culturally relevant, domestic violence- and trauma-informed (ACDVTI) framework developed by NCDVTMH, the TILA Project offers strategies that make these principles relevant to the work of legal advocates as well as lawyers who represent survivors.

Trauma-Informed Approach to Attorney/Client Relationships and Collaborations: Strategies for Divorce, Custody, Protection Orders, and Immigration Cases

Mercedes Lorduy, Mary Ann Dutton & Aparna Bhattacharyya

National Immigration Women's Advocacy Project

<http://library.niwap.org/wp-content/uploads/Powerpoint-Trauma-Informed-Approach-to-AttorneyClient-Relationships-and-Collaborations-1.pdf>

This PowerPoint presentation is written specifically for lawyers. It contains tips on how lawyers can work with advocates of trauma victims and tips on how to conduct client interviews when preparing an affidavit. This training presentation has some useful case scenarios for attorneys to consider and refers to strategies such as the Structured Interview Questionnaire (SIQI) when handling immigration cases.

Strengthening Immigrant Survivors and Working with Immigrant Clients in Crisis – Trauma Informed Approach

Mary Ann Dutton, Mercedes Lorduy & Edna Yang

National Immigrant Women's Advocacy Project (NIWAP)

<http://library.niwap.org/wp-content/uploads/Powerpoint-Strengthening-Immigrant-Survivors-and-Working-with-Immigrant-Clients-in-Crisis-Trauma-Informed-Approach.pdf>

This PowerPoint presentation presents effective strategies for lawyers to be able to identify the effects of trauma on survivors, develop effective strategies to support trauma survivors, and apply a trauma-informed approach to their advocacy work.

Advocate's and Attorney's Tool for Developing a Survivor's Story: Trauma-Informed Approach

Krisztina Szabo, et al.

National Immigrant Women's Advocacy Project (NIWAP), American University College of Law & Legal Momentum

<http://iwp.legalmomentum.org/cultural-competency/trauma-informed-care/Advocates-and-Attorneys-Tool.pdf>

This tool provides general questions that you can use to guide survivors in the story developing session. While this tool was specifically developed to guide lawyers working with applicants for VAWA, U-Visa, and T-Visa

benefits, the tool can also be applied to other situations in which a lawyer needs to work with a survivor to develop his or her story.

Trauma-Informed Structured Interview Questionnaires for Immigration Cases (SIQI)

Mary Ann Dutton, et al.

National Immigrant Women's Advocacy Project (NIWAP), American University College of Law & Legal Momentum

<http://library.niwap.org/wp-content/uploads/2015/SIQI.edited.di-tb-6.15.15.pdf>

This tool begins with Structured Interview Questions for VAWA self-petitions, VAWA cancellation of removal, U-Visa, and Waivers of Inadmissibility. The tool also presents trauma-informed evidence based structured interview questions for each of the previously mentioned. The trauma informed interview questions are designed to help lawyers and clients identify additional information that will strengthen a client's VAWA or U visa case. This section of the structured interview uses research based trauma informed questions that will help build a stronger case on issues including extreme cruelty, substantial harm, good moral character and your client's qualification for inadmissibility waivers. They will also help you identify additional incidents of abuse and criminal activity that may not have surfaced previously.

Grounding Tool

Tula Biederman & Rocio Molina

National Immigrant Women's Advocacy Project (NIWAP), American University College of Law

<http://library.niwap.org/wp-content/uploads/GroundingTool.pdf>

Grounding techniques are used when working with a trauma survivor who may become overwhelmed or enter a dissociated state when recounting memories or strong emotions associated with a traumatic event. This tool, developed by the National Immigrant Women's Advocacy Project presents grounding techniques that lawyers can use when working with anxious clients or clients who completely shut down or are unwilling to discuss necessary details of their case.

Section 5: Vicarious Trauma in Legal Advocates & Lawyers Working in Immigrant & Refugee Victims

Working with trauma victims can be a very rewarding and fulfilling career for lawyers, advocates, and service providers. At the same time, however this work is inherently difficult and there is the risk that service providers will develop some of the symptoms of trauma as a result of hearing and witnessing the trauma their clients face each day. This collection of articles introduces the topic of vicarious trauma.

Working with Refugee Survivors of Torture and Trauma: An Opportunity for Vicarious Post-Traumatic Growth

Citation: Allysa J. Barrington & Jane Shakespeare-Finch, *Working With Refugee Survivors Of Torture And Trauma: An Opportunity For Vicarious Post-Traumatic Growth*, 26 *Counselling Psychol. Q.* 89 (2013).

The submitted version of this article is available at:

http://eprints.qut.edu.au/58188/1/BarringtonShakespeare-Finch_CPQ.Final.10.08.12.pdf

Abstract: Working with those recovering from refugee-related trauma seems to be distressing and shocking, but equally rewarding and transforming for the clinician. Bearing witness to client trauma and experiencing a sense of secondary or VT causes clinicians to question their basic beliefs and engage in conscious meaning-making processes. As a result, clinicians might experience PTG similar to many survivors of direct trauma. However, care must be taken to ensure that the risks of trauma work are minimised. Organisations are responsible for providing adequate supervision and training for their clinicians, as well as a cohesive and supportive team environment. In addition, trauma workers are encouraged to develop effective self-care strategies that will help promote positive outcomes for themselves and their clients. Although inherently difficult, trauma work can provide an opportunity to flourish and grow in ways that few other professions allow.

The Role of Mental Health Professionals in Political Asylum Processing

Citation: Karen Musalo, Susan M. Meffert & Akra Osman Abdo, *The Role of Mental Health Professionals in Political Asylum Processing*, 38 *J. Am. Academy Psychiatry & L.* 479 (2010).

The full text of this article is available at:

http://repository.uchastings.edu/faculty_scholarship/1156

This article discusses the role of mental health professionals in political asylum cases. Rather than just focusing on how mental health professionals can assist in political asylee evaluations, the article also discusses how they can assist immigration attorneys by training them how to work well with their clients and to avoid burnout and vicarious trauma.

Excerpt: "Mental health professionals with expertise in asylum law and refugee trauma can make important contributions to such cases. Not only can mental health professionals provide diagnostic information that may support applicants' claims, but they can evaluate how culture and mental health symptoms relate to perceived deficits in credibility or delays in asylum application. They can define mental health treatment needs and estimate the possible effects of repatriation on mental health. Mental health professionals can also provide supportive functions for clients as they prepare for testimony. Finally, in a consultative role, mental health experts can help immigration attorneys to improve their ability to elicit trauma narratives from asylum applicants safely and efficiently and to enhance their resilience in response to vicarious trauma and burnout symptoms arising from work with asylum seekers."

Second Hand Emotion? Exploring the Contagion and Impact of Trauma and Distress in the Immigration Law Context

Citation: Helen Baillot, Sharon Cowan & Vanessa E. Munro. *Second-hand Emotion? Exploring the Contagion and Impact of Trauma and Distress in the Asylum Law Context*, 40 *J. LAW & Soc.* 509 (2013).

The full text of this article is available at:

<http://onlinelibrary.wiley.com/doi/10.1111/j.1467-6478.2013.00639.x/pdf>

Excerpt: Applicants' accounts of experiences of fear, trauma, violence, and persecution are central to the process of claiming asylum. These narratives

are, at a human level, primed to provoke emotional responses, not only in the narrator but also in those to whom the account is relayed. In this article, we explore the vectors of emotionality that permeate asylum decision-making in the United Kingdom, focusing particularly on the risk faced by the professionals involved of suffering vicarious trauma. More specifically, based on a series of 104 semistructured interviews with asylum stakeholders and observation of 48 appeals to the Immigration and Asylum Chamber of the First-tier Tribunal, this article identifies the adoption by legal and quasi-legal professionals of emotional coping strategies ± of detachment and denial of responsibility ± that risk being deployed in maladaptive ways that jeopardize the prospects for justice.

Section 6: Partnering with Mental Health Professionals

The Role of Mental Health Professionals in Political Asylum Processing

Citation: Karen Musalo, Susan M. Meffert & Akra Osman Abdo, *The Role of Mental Health Professionals in Political Asylum Processing*, 38 *J. Am. Academy Psychiatry & L.* 479 (2010).

This article is cited above, but also relevant here. See Section 5, above, for the abstract and link.

Central American Victims of Gang Violence as Asylum Seekers: The Role of the Forensic Expert

Citation: Gilberto De Jesús-Rentas, James Boehnlein & Landy Sparr, *Central American Victims of Gang Violence as Asylum Seekers: The Role of the Forensic Expert*, 38 *J. AM. ACADEMY PSYCHIATRY & L.* 490 (2010).

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