

Victims or survivors?

Editor,

I read with interest Almoshmosh's paper on the role of war trauma survivors in managing their own mental conditions.^[1] I welcome especially the normalizing nonpathologizing language that Almoshmosh has used in describing the impact of war trauma on its sufferers, especially civilians, and the emphasis he has put on resilience and individual resources in coping with trauma consequences.

I also found the personal account of Almoshmosh's own experience in working with Syrian refugees very insightful and helpful as a first-hand perspective of the suffering of refugees and war trauma victims affected by the Syrian war.

I believe, perhaps like Dr. Almoshmosh, that what is needed is an approach toward war trauma sufferers that sees them as survivors who, by definition and by virtue of the fact that they have survived horrific circumstances, have personal resources and resilience factors that help them cope with life's extreme adversities and allow them to "bounce back" with little harm, and that these resilience factors would be beneficial for others to learn from including, for example, for refugees, the host community.

Unfortunately, psychiatric literature on trauma has often contributed to the medicalization of normal responses to the extreme situations that war trauma sufferers show by considering their suffering a medical syndrome of posttraumatic stress disorder (PTSD) and by looking for evidence from trials of therapy (such as eye movement desensitization and reprocessing (EMDR)) that while they might show some benefit on the short term in alleviating some the symptoms, they might on the long-term re-enforce the state of "learnt helplessness" that Dr. Almoshmosh refers to by getting the message across to the individual that he or she is a victim to circumstances and that the key to their recovery from this medical condition (e.g. PTSD) which is well recognized in the book of the *American Psychiatric Association (DSM5)*, is in the hands of the therapist/doctor. This is instead of emphasizing that there is a lot that individuals can do within their difficult circumstances to alleviate their own suffering. I am arguing therefore that professionals may be contributing to retraumatizing and disabling trauma survivors if they use an approach that revolves around the state of victimhood or the "sick role", a state that some sufferers might cling on to, albeit unconsciously sometimes.

I therefore value the practical examples that Almoshmosh gives at the end of his paper of what survivors can do with the help of even unqualified health-care professionals to improve their situations.

In summary, psychiatrists and other mental health professionals working in the field of trauma need to start viewing trauma sufferers as survivors with agency, control, and resilience as opposed to victims of circumstances that they have no role in changing. The way trauma sufferers are seen by professionals will inevitably influence the way they see themselves and the way they construct their narrative.

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REFERENCE

1. Almoshmosh N. The role of war trauma survivors in managing their own mental conditions, Syria civil war as an example. *Avicenna J Med* 2016;6:54-9.

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