

From Testimony to Healing: Exploring Psychological Support for Families of Mass Grave Victims in Sorya, Duhok Governorate, Iraqi Kurdistan

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Abstract

Background and objectives:

Mass killings in Iraqi Kurdistan have left families of victims found in mass grave in Sorya, Duhok, living with ambiguous loss while engaging in testimony and forensic exhumations. Testimony affirms dignity yet can reopen wounds; formal, culturally congruent mental health care remains limited and stigmatized. This study explored how families experience the interplay of testimony, forensic procedures, cultural practices, and support systems, and identified pathways to healing and justice to inform rights-based, long-term responses.

Methods: Using hermeneutic phenomenology (Van Manen, 1990), we conducted semi-structured interviews with 10 relatives of mass-grave victims (7 men, 3 women; ages 37–71) found in Sorya, Duhok Governorate, Kurdistan Region. Interviews (80–95 minutes) were conducted from July to August 2025. Data analysis was carried out following Van Manen's six activities.

Results: Five themes emerged: (1) Testimony as a double-edged sword; (2) Navigating grief and

trauma; (3) Experiences with forensic exhumation; (4) Access to psychological support; and (5) Pathways toward healing and justice.

Conclusion: Healing requires coupling truth-telling and forensic rigor with culturally anchored, stigma-sensitive, long-term mental health and psychosocial support, co-designed with families. Practical implications include psychosocially accompanied testimony, transparent family-liaison practices, participatory memorialization and reburial, and reparations that translate recognition into education, livelihoods, and ongoing care.

Keywords: mass graves; ambiguous loss; testimony; humanitarian forensics; Sorya village, Iraqi Kurdistan; intergenerational trauma

Introduction

Mass killings that occurred in the past decades in the north of Iraq have caused thousands of people to be missing and families to be grieving without certainties. In Sorya, Duhok Governorate, Kurdistan Region-Iraq, mass graves and forensic investigation have attracted family members into the sequences of testifying, waiting, and grieving

(Amin & Othman, 2020). Testimony acts as a two-sided sword: it is an ethical practice of remembering and fighting which can both perforate wounds, revive the past, and increase phobias of being overlooked (Silove et al., 2017). Such processes occur in an environment of ambiguous loss where lack of clear information on the whereabouts of loved ones makes grieving difficult and puts adaptation on hold (Boss, 2010). Conflict-affected environments increase the psychological burden, and the rates of common mental disorders are significantly higher; furthermore, these services are frequently few or disjointed (Charlson et al., 2019).

Forensic exhumation involves the concentration of hope and the fear of confirmation and the reliance on the institution lies in the hands of the transparent practice, communication, and the ability to conduct exhumations in a dignified manner (Cordner & Tidball-Binz, 2017). The promise and constraints of such processes to families seeking the truth and closure are emphasized by local forensic work in Sorya (Amin & Othman, 2020). The trauma of loss runs through psychosocial and biological avenues across generations that define the health of children and youth (Yehuda et al., 2016). However, formal mental health care is still limited by a lack of avenues, cultural obstruction, and stigma, which colonize most of the families into informal coping-kin support, community solidarity, and faith practices (Dardas & Simmons, 2015). Rituals based on culture, reburial, and social recognition have the potential to facilitate meaning-making and recovery, particularly when combined with justice and a long-lasting supportive approach (Cetorelli et al., 2017; Cordner & Tidball-Binz, 2017).

This paper reveals a major research gap since it discusses the interconnection between testimony, forensic procedures, and cultural practices with grief, trauma, and healing among relatives of victims found in mass graves in Sorya. Through prioritizing families, the study will direct practitioners and policymakers to rights-based, trusted and long-term responses, which integrate recognition and justice with available, stigma sensitive care.

Methods

Study Design

The present qualitative study utilized Van Manen's hermeneutic phenomenological approach (1990). Such a methodological decision enabled gaining profound insights into the lives of the families of the victims of mass graves in Sorya, Duhok Governorate, Iraqi Kurdistan, and listen to their personal recollections of memory, grief, mental well-being, and healing process.

Participants

In the current study, purposive sampling was used to recruit 10 relatives of mass grave victims in Sorya, Duhok Governorate, Iraqi Kurdistan (7 men and 3 women). The inclusion criteria were relatives of victims of mass graves in Sorya, willingness to take part in the study, and personal experience. Those family members who did not volunteer to participate in the project were excluded. The participants' ages ranged from 37 to 71 years.

Data Collection

Data was collected via semi-structured interviews conducted in July-August 2025. The interviews were conducted at the home of the interviewees or at other locations that they considered to be safe and comfortable. Data collection stopped when there was thematic saturation and no further themes were found. The following were some of the questions which were asked during the interviews:

- How would you describe your loved one to someone who never met them?
- How did you first learn about what happened to your loved one?
- Can you describe your experience when their remains were identified through forensic exhumation?
- What has helped you cope with your loss?
- Are there particular traditions, stories, or memories that give you strength?
- Have you or your family received any kind of psychological support or counseling? If so, how was your experience?

- What kind of support would have been most helpful to you after learning the truth about your loved one?
- When you think about healing, what does that mean to you personally?
- How do you imagine justice or recognition for your loved one?
- Is there anything we didn't ask that you feel is important to share?

All the interviews were taped, with the permission of the participants, and the time allotment was eighty to ninety-five minutes. The tapes were then transcribed literally and translated into English for analysis purpose.

Data Analysis

The data were analyzed using the six methodological activities suggested by Van Manen (1990). The first practice entailed a transformation of the nature of lived experience wherein the primary researcher was a forensic, genocide, and Anfal researcher and constituted a part of the community in which the investigation was done. The second one was to explore the experience as it had been experienced by the family members and relatives. The important themes were identified in the third activity under the phenomenological thematic analysis. The fourth one involved describing the phenomenon on paper and re-writing to preserve the voices of participants. The issue of internal concordance offered a high-level score in relation to the fifth action that was inclined towards the adequate description of the phenomenon as each theme was justified within the context of the experience of the participants. Lastly, the derived parts and wholes were stabilized on the basis of alternating between the coded transcripts and the holistic themes (Van Manen, 1990).

Trustworthiness

The long involvement of the respondents, the member-checking technique, the debriefing by the professional peers were used to make the findings credible. Close data collection was facilitated and achieved due to the friendly nature of the interaction

between the researchers and the participants. The long history and experience of the researcher in the sphere of forensics, genocide, and Anfal studies facilitated the study to be more credible and backgrounded. The transcripts were weighed on numerous occasions and the accounts that the participants provided were translated literally into interpretations.

Ethical Considerations

The Ethics Committee of Hawler Medical University College of Nursing permitted the execution of the research study (Project No. XX; Approval Date: DD MM YYYY). The participants were told the purpose of the research and explained to them how confidentiality will be maintained, rights of the subjects and the right of the subjects in the research in particular the right to refuse to cooperate in the research at any given time. To prevent anonymity, all the respondents also signed an informed consent form, and a voluntary statement form. To maintain anonymity, during which each respondent was assigned a code (e.g., P1, P2, etc.) with the aim of guaranteeing the safety of all physical or digital information.

Results

Families of mass-grave victims in Sorya, Duhok Governorate, navigate grief, memory, and the pursuit of justice in the long shadow of mass graves. The quotes below are developed to capture the lived-in realities and emotional textures as presented in the themes and subthemes of the study. They seek to raise the voices of families to provide testimony and navigate forensic proceedings, to seek psychological support and cultural closure. Collectively, they show how healing cannot be discussed outside the context of truth-telling, community, and recognition. They also emphasize the fact that they require long-term culturally sensitive care that also respects a loss but allows life to go on.

Main Theme 1. Testimony as a Double-Edged Sword

A lot of participants talked about testimony as a lifeline and a wound. Speaking kept memories

alive and did not give in to erasure, but it also opened up pain and beckoned toward exhaustion.

“Having an interview allows us to remember our beloved ones in the world that attempted to forget them. Yet each word is a bit of my nightmares, and that I must re-live the day we lost them all again.” – P8

“It is like opening the window to get the truth out to breathe, but the wind that comes through is so cold that my bones ache. I would have my words weigh more than a form, to be carried with care not only gathered.” – P10

Subtheme 1.1. Bearing witness to truth

The act of testifying was to most of them an intentional rebellion against forgetting. Naming the dead and narrating the past affirmed dignity and presence.

“When I speak, I refuse to let them vanish a second time. They can steal a body, but they cannot steal a name repeated in community.” – P6

“I light a candle and say his story, so my children know who they come from. Our stories travel where our feet cannot, knocking on doors that were closed to us.” – P2

Subtheme 1.2. Emotional burden of retelling

Retelling exacted a cost, stirring memories that were hard to settle afterward. Families worried their suffering would be achieved, not acted upon.

“Every interview is another shovel into memories I try to cover to sleep. I worry my tears will dry in a report that no one reads.” – P3

“After I speak, the night is long and noisy inside my head. The people who asked me to be brave go home, and I am left to calm the storm alone.” – P1

Main Theme 2. Navigating Grief and Trauma

Absence and uncertainty, as well as accumulating trauma, often delimited grief. Families were taught to bear pain as they attempted to live day in day out.

“My grief is a house with missing walls; the wind of not knowing never stops. I can cook, work, and

smile, but nothing is safe inside.” – P7

“We count days on two calendars – one that the world sees and one that measures waiting. Healing is not functioning, and the shore continues to move away.” – P2

Subtheme 2.1. Ambiguous loss and prolonged mourning

Families were suspended between mourning and hope because of ambiguity. Rituals and identities would not be complete without certainty.

“I set a plate for him on holidays because I cannot accept an empty chair as proof. I am asked to choose between hope and grief, and I cannot live without both.” – P4

“Sometimes I dream he knocks on the door, and I wake up bargaining with the morning. Hope comforts me at dawn and punishes me by night.” – P9

Subtheme 2.2. Intergenerational echoes of trauma

Children absorbed the atmosphere of loss even when adults spared them details. The trauma echoed in behavior, responsibilities, and dreams.

“My daughter draws houses with black flags and wants to know why some chairs are not filled. Not what was spoken, but what was not spoken, she learnt from us.” – P5

“My son grew up too young to count and comfort me after the nightmares. He carries a backpack full of books and worries that don’t belong to his age.” – P10

Main Theme 3. Experiences with Forensic Exhumation

The work of forensics was associated with a terrible combination of expectancy and fear. The trust increased and decreased along the lines of communication, schedules and respect to cultural processes.

“As they began to dig my heart jumped and dropped at once. Answers are a blessing, but they also end the last thread of maybe.” – P3

“Officials spoke in procedures and numbers while

we spoke in birthdays and lullabies. The gap between those languages is where mistrust grows.” – P8

Subtheme 3.1. Hope and anxiety during exhumation

Exhumations concentrated hope and anxiety into long days and sleepless nights. Waiting for identification felt like standing on a threshold you cannot step off.

“At the site, I held his scarf in my hands like a passport to a final goodbye. I prayed for certainty and feared it in the same breath.” – P4

“When the phone rings from the lab, my chest tightens before I answer. I want the truth, but I am afraid of the life I must live after I hear it.” – P1

Subtheme 3.2. Trust, mistrust, and unmet expectations

Confidence was weakened when timeframes were missed, clarities were scanty or when families felt marginalized. Clear updates and inclusion repaired some of that damage.

“They said ‘soon’ so many times that the word lost its meaning. Respect is not only gloves and badges; it is honest dates and returned calls.” – P6

“When they invited us to observe and explained every step, I felt calmer even in pain. Silence from institutions breeds rumors, and rumors breed fear.” – P9

Main Theme 4. Access to Psychological Support

There was little, remote, or demeaning formal mental health care that forced families to find assistance elsewhere. Most of them sought the assistance of relatives, friends, and religion to be more reliable.

“The clinic is far, the forms are confusing, and the advice sounds like it was written for someone else. They tell me to move on as if grief were furniture.” – P10

“Healing needs time and a safe place to speak, but both are scarce here. So, we sew ourselves up with tea, and prayer and long-suffering friends.” – P7

Subtheme 4.1. Gaps in mental health services

The lack of providers, cultural incongruity, and shame of judgment were making care seem inaccessible. Real obstacles made the distance more difficult.

“Appointments take months, and transport takes money I do not have. People whisper ‘crazy’ when you ask for help, so many of us stay quiet.” – P2

“I tried one session, but the counselor didn’t understand our rituals or our losses. Care that cannot speak my language cannot touch my pain.” – P5

Subtheme 4.2. Informal coping strategies

Daily support and perpetuation were given by informal networks. There was space of grief through community gatherings, prayers, and shared meals.

“On anniversaries, we cook his favorite dish and recite prayers together; this is how we breathe. Our kitchen table is our counseling room.” – P4

“Neighbors sit with us until the kettle goes dry, and the elders tell stories that steady the room. My place of worship gives me words when I have none.” – P3

Main Theme 5. Pathways Toward Healing and Justice

Participants thought of healing as individual and community: rituals that commemorate the deceased, acknowledgment that solidifies fact, and support that endures beyond newspaper headlines. Justice was described as a long road paved with dignity.

“To lay them to rest with their names is to return a piece of ourselves. I want the country to say it remembers us, not just that it found us.” – P10

“We need more than condolences – we need schools for the children, counseling for the mothers, and work that gives back our balance. Justice should meet us in daily life, not only in courtrooms.” – P7

Subtheme 5.1. Rituals, reburial, and cultural closure

Rituals and reburials provided a structure to carry

sorrow and mark a turning point. Grief was coined into cultural gestures.

“When buried him in a religious funeral, my hands had to know what my heart could not say. The breath was lighter since the previous prayer.” – P1

“We put trees in place of every name and now our children water them. Their roots help us to remember that memory can be nourished, not hurt only.” – P9

Subtheme 5.2. Recognition, justice, and long-term support

The families requested legal recognition, the safeguarding of truth and permanent psychosocial and material maintenance. They framed reparations as building a future, not buying the past.

“A memorial with the truth written clearly would teach our children what happened and who stood with us. Keep the records safe so no one can pretend we imagined this.” – P8

“Money cannot replace a life, but it can keep the living from drowning. Give us counseling, education, and jobs so our grief can stand with dignity.” – P6

Discussion

Across contexts of mass atrocity and enforced disappearance, families’ experiences sit at the intersection of grief, testimony, forensic practice, and claims to justice. The findings of the current study resonate strongly with the recent literature while adding a textured portrait of the emotional and cultural work families perform to keep memory, community, and dignity alive.

Testimony as both lifeline and wound echoes wider evidence that truth-telling can be simultaneously empowering and costly. The Sierra Leone community reconciliation trial found that public testimony improved social cohesion and forgiveness but also elevated symptoms of depression and PTSD among participants (Cilliers, Dube, & Siddiqi, 2016). Similarly, family members of the missing in Nepal sought opportunities to speak precisely because they feared a second disappearance through forgetting, yet they reported

profound exhaustion and disappointment when their words did not translate into concrete action (Robins, 2011). The Sorya participants’ insistence that their words “weigh more than a form” adds a sharp critique of overly proceduralized interviewing and suggests the need for psychosocial accompaniment before, during, and after testimonies to mitigate harm (ICRC, 2016).

The second theme of the study (i.e., ambiguous loss, prolonged mourning, and intergenerational echoes) is consistent with the ambiguous loss theme, which anticipates lingering, dialectical mourning of uncertainty (Boss, 2010). Recent clinical and epidemiological work confirms high rates of prolonged grief and PTSD among relatives of missing persons, with ambiguity itself operating as a maintaining factor even when functional roles are resumed (Lenferink et al., 2017). The imagery of “two calendars” in Sorya captures this liminality with unusual clarity. These intergenerational effects outlined can be compared to studies of conflict-affected youth, studies of cross-generational transference of grief, and studies of the effects of trauma on children (Betancourt et al., 2010; Yehuda & Lehrner, 2018). It is the combined warnings of these strands that one needs to be careful regarding the limited, symptom-oriented thinking and the importance of family systems and developmental thinking.

When forensic investigative experiences are involved, it is important to note how trust is drained and refilled by communication, timeliness, and respecting the ritual, a factor corroborated by humanitarian forensic principles and human rights standards (Cordner & Tidball-Binz, 2017; OHCHR, 2017). As comparative studies have indicated, the processes of identification will be not only more credible but also more protective psychosocially when families are informed about it, invited to observe, and presented with realistic deadlines; conversely, shrouded in secrecy and missed deadlines contribute to rumors and mistrust (Robins, 2013; ICRC, 2016). The Sorya accounts sharpen this point by contrasting the “language of procedures and numbers” with families’ language of birthdays and lullabies – a reminder that technical

rigor must be coupled with narrative sensitivity. This is also reminiscent of policy direction that highlights family liaison as a component, frequent feedback lines and participatory memorialization as an ingredient component of an effective accounting of the missing (ICMP, 2014).

Distance, cost, stigma, and cultural incongruity – Barriers to formal mental health care are Sorya wide – documented records of humanitarian environments. The global mental health literature identifies large treatment gaps and warns against “airlifting” decontextualized interventions (Tol et al., 2011; Patel et al., 2018). Cultural competence is not an accessory; it is the mechanism through which care becomes thinkable, acceptable, and useful (Kirmayer & Pedersen, 2014; Kohrt et al., 2014). The critique of advice presented in the study that it sounds like the advice was written to someone else is complemented by calls to integrate services into trusted community infrastructures, to train lay providers and an approach of relying on local idioms and rituals of care (Ventevogel, 2015). Simultaneously, the relative usefulness of informal coping prayer, common meals, community stories is consistent with the indication that both daily social support and continuity bonds rooted in cultures have the ability to cushion the distress (Miller & Rasmussen, 2010; Klass & Steffen, 2017). Instead of considering informal practices as temporary solutions, the comparative literature recommends the incorporation of the former into the stepped-care frameworks.

The last theme (i.e. pathways toward healing and justice) emphasizes action and awareness, ceremony, and lasting help that extends further than courtrooms. The demand of families that justice should be something they must experience in everyday life is echoed by the ADAPT model of re-establishing safety, bonds, justice, roles, and meaning as the interwoven psychosocial pillars (Silove, 2013). The comparative literature on the disappeared suggests that the most cost-effective approach to reparations includes such elements as truth-telling, memorials, reburials, as well as material support (education, livelihoods, health care) and institutional reforms which prevent

recurrence (Robins, 2013; Duthie, 2017). Sorya results provide a clarifying touch by presupposing reburial and tree planting as embodied processes of acknowledgement that allow mourning to proceed, although not to a conclusion, and frame reparations with dignity and future-making as opposed to compensation.

Together, these convergences point to three programmatic implications. To start with, the process of testimony and forensic testifying ought to be formulated specifically and explicitly as a psychosocial intervention. It implies the inclusion of documentation with pre-interview briefings, choice, and pacing of the interviewees, family liaison officers, and ensuring follow-up as ICRC recommendations and Minnesota Protocol (ICRC, 2016; OHCHR, 2017). Second, mental health and psychosocial support (MHPSS) should be long-term and culturally based. The services must take advantage of informal networks and rituals and provide scalable evidence-based care with trained community workers and available referral channels (Tol et al., 2011; Patel et al., 2018). Third, justice structures must combine recognition and material back-ups. Families’ calls for schools, counseling, and work mirror findings across Nepal, Cyprus, and Lebanon that grassroots activism by families of the missing reframes justice as everyday infrastructure, not only legal remedy (Kovras, 2017; Robins, 2011).

The Sorya study also contributes distinctively to literature. It captures, with unusual poetic precision, the phenomenology of oscillation – between hope and fear at a ringing phone, between the relief and punishment of dreams. It speaks back to technocratic tendencies by demanding that institutions learn the “language” of families. And it offers concrete, culturally resonant practices – kitchen-table counseling, trees for names – that can be incorporated into program design. If there is a divergence, it lies in the degree to which formal services are perceived as distant or demeaning; while this is a common critique, its intensity in Sorya underscores the importance of co-design with Kurdish civil society and faith leaders to reduce stigma and tailor care.

Conclusion

Families' healing depends on coupling truth-telling and forensic rigor with culturally anchored psychosocial care and everyday reparative support. Testimony, ritual, and recognition must be scaffolded by inclusion, communication, and long-term services so grief is honored, uncertainty reduced, and dignity restored in both private life and public memory.

Implications

This study implies that testimony and forensic processes should be paired with culturally grounded, long-term psychosocial support. Services have to incorporate informal coping, families in decision-making, and long-range recognition and material support whereby truth-telling and justice plays a role not in closure alone but in reinstating dignity and well-being in everyday life.

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