

KUWAIT CONNECTION: AN INTERNATIONAL TRAINING EXPERIENCE

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ABSTRACT. This paper describes the cooperative process of developing a counselling program in the nation of Kuwait, following the Iraqi invasion and resulting psychological stress experienced by many of the people there. The report describes the role of the counselling staff of Suffolk University (Boston) in providing the expertise in setting up an intramural master's degree program in mental health counselling. The evident need for the program stemmed from the observation that a significant number of the population was suffering posttraumatic stress disorder following the Iraqi occupation. This alerted the nation to the need for developing a counsellor training program in their universities.

RÉSUMÉ. Cet article décrit le processus coopératif d'élaboration d'un programme de consultation au Kuweït, après l'invasion de l'Iraq et le stress psychologique ressenti par de nombreux habitants de ce petit pays. Ce rapport décrit le rôle des orienteurs de l'Université Suffolk (Boston) qui ont contribué à l'établissement d'un programme de maîtrise intra-muros en conseils de santé mentale. Le besoin d'un tel programme est issu de l'observation qu'une partie importante de la population souffrait d'un stress post-traumatique après l'occupation iraquienne. C'est ce qui a fait comprendre au pays le besoin d'élaborer un programme de formation des conseillers dans ses universités.

Kuwait is a small desert nation in the Middle East that was invaded on August 2, 1990, and annexed by its much larger northern neighbor, Iraq. It has the third largest petroleum reserves in the Middle East, following Saudi Arabia and Iraq. The state of Kuwait covers only 6,880 square miles and has a population of 1.75 million, of whom approximately 670,250 are Kuwaiti (PACI, 1994) and is situated at the north-eastern tip of the Arabian Peninsula, on the shore of the Persian Gulf. Like Iraq, which borders on the north and northwest, and Saudi Arabia on the south and southwest, Kuwait has a Muslim Arab cultural heritage (Brosnahan et al., 1994; Robison, 1993).

Aftermath of the Gulf War

Many people associate this small Middle East country with an oil sheikdom and the multinational effort in ending the military invasion by the Iraqi President, Saddam Hussein. It is the psychological results of this invasion that will be addressed in this paper, as well as a cooperative effort in developing a master's program in counselling in Kuwait.

Following the February 26, 1991, liberation of Kuwait after a seven month occupation by Iraqi troops, Kuwait was in a state of crisis resulting from psychological trauma and material and economic devastation. Iraqi forces set fire to more than 600 Kuwaiti oil wells, terrorized the population (thousands of citizens were taken hostage or killed), stole Kuwaiti bank reserves, looted the National Museum, and shipped stolen consumer goods back to Iraq. This occupation and associated psychological trauma, typically experienced as posttraumatic stress disorder (PTSD) (American Psychiatric Association, 1994), was not limited to those who were subjected to imprisonment and torture. Many individuals suffered from the loss of family members, financial distress, and threats to their basic security needs.

The psychological sequel of war and other forms of trauma have been systematically studied since the beginning of this century. A characteristic pattern of psychopathology develops as a result of severe trauma, namely PTSD. The development of PTSD is not limited to premorbid vulnerability. The triggering event in a situational context is sufficient to precipitate PTSD symptoms equally in otherwise normal individuals (van der Kolk, McFarlane, & Weisaeth, 1996).

Immediately following the war several studies of selected groups of Kuwaitis demonstrated that a large percentage of people in these groups experienced PTSD symptomatology. Of those subjects studied, the rate of PTSD was 64% among victims of torture (Al-Hammadi, 1992), 68% in returned prisoners of war (Al-Zamil & Al Mithen, 1992), 86% among the hospitalized populations (Staehr & Staehr, 1991; Staehr, Bourisli, Boejholm, & Staehr, 1993), and 66% in small, apparently randomized samples (Al-Hammadi, 1992). Staehr et al. (1991, 1993) also found that an additional 21% suffered from clinical depression and 15% from a range of unspecified disorders in the absence of PTSD.

Eighteen months after the war, in 1993, a geographically stratified random sample of the Kuwaiti population was studied to determine the

nature of specific traumas and the psychological consequences of the seven-month occupation (Al-Hammadi, Staehr, Behbehani, Staehr, Aref, Al-Turkait, & Al-Asfour, 1993). The sample was comprised of 566 families (N=2856), including 139 families of martyrs, prisoners of war, and persons physically injured (N=946). Almost half of those who remained in Kuwait during the war went into hiding for reasons of personal safety at various periods during the occupation. Other reported traumas included having witnessed violence (48.5%), having been taken hostage or detained (6.2%), being tortured (5.5%), and sustaining injuries (1.0%). A significant number of Kuwaitis had experienced more than one trauma during the Iraqi occupation.

Posttraumatic stress disorder psychopathology was assessed in 23.4% of adults (Al-Hammadi et al., 1993). This study would suggest that approximately 60,000 adults in Kuwait had a posttraumatic stress disorder, with varying degrees of severity. The prevalence of PTSD in this study was in excess of that found in the general population without war-related traumatic experiences. The Hopkins Symptom Checklist (SCL-25), a non-specific measure of psychiatric morbidity, indicated that 48.5% of this population was experiencing significant levels of distress.

Al-Hammadi et al. (1993) also examined the level of psychopathology in children. The data demonstrated similarly high levels of distress although the pattern is somewhat less specific. On the Rutter scale, 40.6% of the children had scores suggestive of probable behavioral and emotional disorders. This percentage demonstrates rates of symptoms 2-3 times those normally seen in epidemiological studies. On the Impact of Event Scale, the mean was lower than that of the adults but indicated significant levels of intrusive memories and avoidant behaviors. These reported levels of distress are important as they impact the long-term effect on the children's personality development (Yule & Williams, 1990).

Other studies conducted on children have used more comparable epidemiological methods although they used randomized samples within school populations. A study of a stratified sample of 2781 children conducted during the first year after the liberation found that 52% of the children had moderate or severe PTSD (Eisa & Nofel, 1993). This population of children exhibited high levels of trauma exposure in the form of torture and/or the death of a relative. The studies by Al-Hammadi et. al. (1993) and Macksoud and Nazar (1993) on Kuwaiti children do not allow comparisons. In fact, Macksoud and Nazar did not demonstrate that any specific type of trauma accounted for the

posttraumatic distress in the symptoms, but that rather, the general experience of threat and associated fear may have been an important variable in understanding the psychological response of children (Pynoos & Nader, 1989).

The pervasive sense of helplessness and threat experienced by most of the population due to the violence and arbitrary nature of the repression used by the Iraqi troops was the contributing factor to the high levels of distress. Unlike many populations that have experienced time-limited events, such as natural disasters, this population was subjected to seven months of traumatic stress. Although the occupation has ended, the traumatic memories and nightmares of many people continue to affect their lives (Kuterovac, Dyregrov, & Stuvland, 1994; McFarlane & Girolamo, 1996). It is generally reputed that more than six hundred Kuwaiti prisoners of war are currently being held in Iraqi jails (Sallam, 1996).

In summary, international politics notwithstanding, these studies provide an insight into the widespread exposure of the Kuwaiti population to a variety of very distressing experiences and human rights abuses sufficient to create an atmosphere of general fear and threat. The consequences of these traumas are having a lasting effect on the health and adjustment of the Kuwaiti population. The available evidence suggests that people with significant patterns of post-traumatic distress will be more susceptible to subsequent non-war-related traumas (Marsella, Friedman, & Spain, 1994; Meichenbaum, 1994). With the exception of the research of Parson (1990) in his work with African American veterans following the Vietnam War, there has been a dearth of systematic comparisons of therapy outcomes or processes among PTSD victims from distinct ethnocultural groups using accepted experimental design procedures (e.g., alternative therapies, control groups, outcome measures).

Kuwaiti response to post-war psychological devastation

In response to this psychological devastation The Social Development Office, under the auspices of the Amiri Diwan Office, was established in June 1992. The mandate of this office was to mobilize financial and technical resources to minimize the social and psychological impact of the Iraqi aggression on Kuwait. Key aspects of this mandate were the creation of five community centers (mental health clinics) oriented toward identifying the citizenry in need of psychological services, the

provision of individual and family treatment, research and follow-up studies, public information, and consultation services.

Training experience

The Social Development Office of Kuwait, in an effort to train mental health counsellors to meet the heavy demand for psychological services, contracted with Suffolk University to provide a graduate program in Kuwait leading to a Master of Science degree in Mental Health Counseling. At the present time there is no other opportunity for graduate study in Kuwait in the area of counselling or psychology. This two-year comprehensive extramural program, replete with a 450-hour internship and thesis requirement, began in November, 1994. The course curriculum was developed as a compromise between what is typically offered by the University in Boston and what the Kuwaiti administrators felt would best serve the needs of the country. Courses specific to the psychological testing of children and trauma were included in the curriculum to supplement the standard complement of courses. Additionally, a thesis requirement was added should a select number of graduates consider, at a later time, doctoral programs abroad. The final course selection was as follows: life-span development, methods of research, counselling theory and practice, psychological diagnosis, psychological testing, advanced psychological testing, interpersonal skills laboratory, group counselling, seminar in posttraumatic stress disorder, internship, and thesis seminar. Course content was predicated upon the themes of trauma and PTSD symptomology with case examples, assessment, and treatment strategies and thesis research reflecting this orientation to remediation.

Twenty Kuwaiti students, six men and 14 women, ranging in age from 24 to 46, primarily with undergraduate degrees in psychology, were selected for this innovative program. Many of these students had experienced personal trauma resulting from the devastation of the war in the form of death of a spouse, family members in prisoner of war camps, the witnessing of torture, and financial loss. Competition for this program was keen. It required previous satisfactory academic performance, work experience, and individual interviews.

Prior to beginning the on-site program in Kuwait, ten graduate faculty members were selected for this project and received a comprehensive orientation to the essential cultural rules and roles shaping the thinking and behavior of the students. This training involved meetings, discus-

sion, printed material, and suggested reading. Despite this thorough orientation, replete with the proper etiquette for drinking Kuwaiti coffee, cultural taboos of not touching with the left hand and not exposing the soles of one's shoes while seated – to name a few – most were not prepared for what the faculty jokingly called "Kuwait time". This phenomenon, perhaps not unique to the Middle East, was a common source of frustration among a faculty steeped in the structured ways of Western time-limited productivity. Professional survival dictated a mellowing of absolute deadlines and negotiation often became the order of the day. The Kuwaiti's relaxed mind set may represent the merchant mentality of the culture where terms and conditions are negotiated and deadlines are founded on good intentions at the time of the encounter. Ultimately outcomes were achieved in keeping with the Kuwaiti style of behavioral dynamics.

Although Arabic is the official language of Kuwait, English is widely understood. Simultaneous translation from English to Arabic has expedited the learning process for those students less familiar with the English language. Each graduate course was comprised of thirty hours of instruction during a two-week period. After the faculty member returned to the States, selected local psychologists held evening review classes during the next month to assist in comprehensive integration of the course material. Exams and papers were completed after the review classes and mailed to the States for evaluation. This process was repeated for each of the ten didactic courses. Internships in the community mental health clinics were under the supervision of four Kuwaiti psychologists and were typically conducted in the Arabic language. These psychologists, who were in private practice and worked at Kuwait University in either the psychology department or the medical school, meet individually and as a group with a representative of the University to review the requirements for the internship, standardize the supervision experiences, and to develop procedures for student evaluation. In addition to the generic mental health focus of this internship experience, there was an emphasis on PTSD assessment and treatment. Dynamic emotional themes of the trauma experience, resultant taxing of personal resources, and an awareness of the transference and countertransference dynamics of force and destruction, identification, confrontation with death, helplessness, anger, loss, survivor guilt, and voyeurism were central to the internship supervisory experience (Wilson & Lindy, 1994). The majority of the clients who presented for treatment at the community clinics reported PTSD related symptomology.

Of special interest to the reader are the cultural ramifications of such an international undertaking. Kuwait is a constitutional monarchy ruled by the Al-Sabah family. Life in the Gulf revolves around the Islamic religion. Kuwait is a Muslim nation, with a court system based on a combination of civil and Islamic law. The call to prayer five times each day, along with the observance of the major religious holidays (Mohammed's birthday, Ramadan, Eid Al-Fitr, Eid Al- Adha, etc.), impact the mores and folkways of this Middle East country (Brosnahan et al., 1994; Robison, 1993).

Clearly Kuwait and its neighboring states favor the male gender with respect to status, power, and lifestyle. This appearance of gender bias is beginning to change (Al-Mughni, 1995) and counsellors would generally expect to work with clients of either gender. There is a move among the general population toward higher education for all persons, and traditional gender role prescribed behaviors are in transition. The human services professions (medical and psychological) are highly valued in Kuwait and are attracting more women than men to their ranks. This gradual evolution will continue to move in the direction of gender parity and role neutrality in the professions. This role transition is beginning to spread to other aspects of Kuwaiti life which, as with the Western cultures of thirty years ago, will evolve to a more gender neutral society. This evolving role of women as providers of mental health services is appropriate within this culture and the teachings of the Koran and contrasts with the prevailing Western culture's perception of the passive role of Middle East women.

An unusual challenge to the faculty, trained in Western European models of psychotherapy, was the transposing of these Western concepts into appropriate Kuwaiti treatment modalities, techniques, and strategies. Surprisingly, with slight cultural modification, traditional counsellor training approaches were transferable within the context of this country where close family interaction is at the core of cultural life. An example of this modification is that group counselling is renamed group training as a way to minimize the appearance of personal disclosure outside of the family system. Additionally, the Koran is often used as a therapy reference to encourage change and adaptation to events and experiences beyond one's control.

There was attrition from the original student class of twenty. Four were dismissed for academic reasons and three elected to discontinue for personal reasons (marriage, pregnancy, death in family). It is the expectation that the majority of the students will have completed the pro-

gram by May, 1997, and will attend the regular University commencement exercises in Boston. The graduates of this program will continue to be employed by the Social Development Office in Kuwait and will provide essential psychological services in one of the five community mental health clinics. These services will include psychological testing, diagnostic assessment, individual counselling, family and group counselling, consultation, community education programs, research, and follow-up studies. The focus on PTSD, along with appropriate assessment and treatment strategies, will contribute to the post-invasion healing of this recovering nation. There is an expectation that a select few of the graduates will, with government sponsorship, be encouraged to seek doctoral study abroad.

Summary

Following the liberation of Kuwait on February 26, 1991, the government has dedicated itself to the complete physical restitution of Kuwait City to its pre-invasion appearance. This major reconstruction effort has continued without interruption and is near completion. The ambience of the city has the appearance of mercantile activity, but the psychological effects of the war, less amenable to government intervention, continue to plague the population. Families continue to cope with personal and financial loss. Approximately 600 people are being held in prison camps in Iraq and many experience trauma-related psychological symptoms. The government is responding to these less obvious by-products of war and Suffolk University feels honored to be a small part of this psychological reconstruction activity.

With respect to program evaluation and development, currently there is a proposal under consideration to repeat the two-year mental health counselling master's degree program with slight modification that would enhance program continuity. The Social Development Office and the student participants have appreciated the opportunity to develop the necessary clinical skills to serve the burgeoning needs of the citizenry. Should the program be replicated the internship experience will require more structure and scrutiny to maximize consistency among supervisors with respect to counselling competencies. There is also consideration given to assigning a full-time University faculty person to coordinate the program in Kuwait, and there is discussion regarding the offering of selected transferable doctoral level courses in Kuwait for program graduates who are considering advanced training abroad.

The faculty has found that the Kuwaiti people are gracious, proud of their national heritage and appreciative of the personal and professional resources provided by this atypical training venture. This training experience has provided a lesson in the universality of humankind and a renewed respect for the culture and traditions of this unique Middle East country.

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