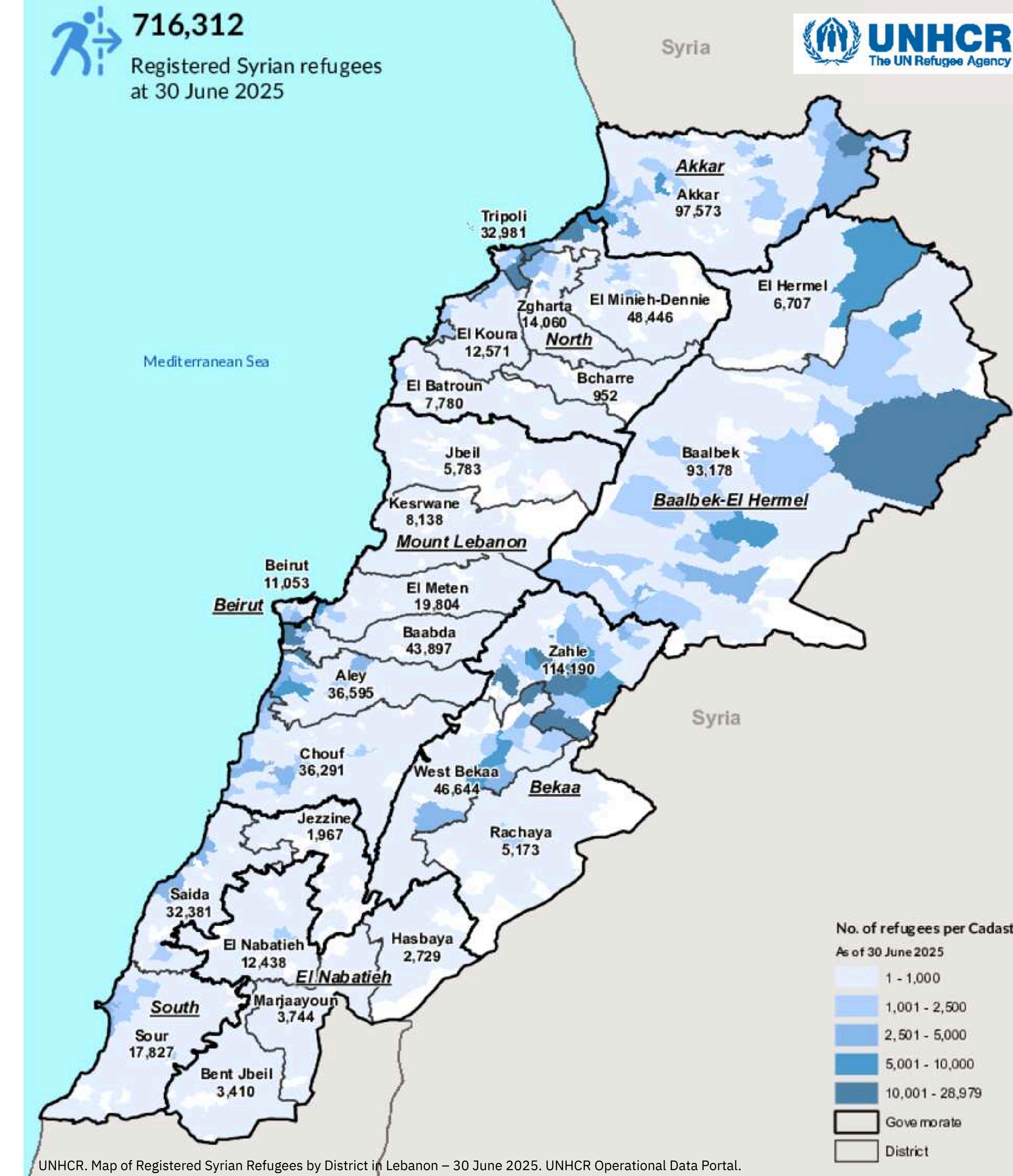


Post-Traumatic Stress Disorder and Somatization Among Syrian Refugee Women Living in Lebanon

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Introduction

- Lebanon hosts the highest per capita refugee population globally (~1 in 8 residents forcibly displaced).
- Syrian refugee women face intersecting war-related, gender-based, and displacement traumas, compounded by poverty, unsafe housing, and caregiving burden—contributing to high PTSD rates.
- Distress often manifests somatically (e.g., chronic pain, GI complaints), with potential intergenerational biological and psychiatric consequences.

Aims

This study estimates PTSD severity, somatic symptom burden, and their association alongside sociodemographic and reproductive factors among Syrian refugee women in Lebanon.

Methods

- Cross-sectional survey (May-June 2025) of 100 Syrian refugee women (average age = 34.3 years) across three Amel centers in Lebanon.
- PTSD was assessed using the 17-item Arabic PCL-C; somatic symptoms were measured using the 10-item Arabic DSSS Somatic Subscale.

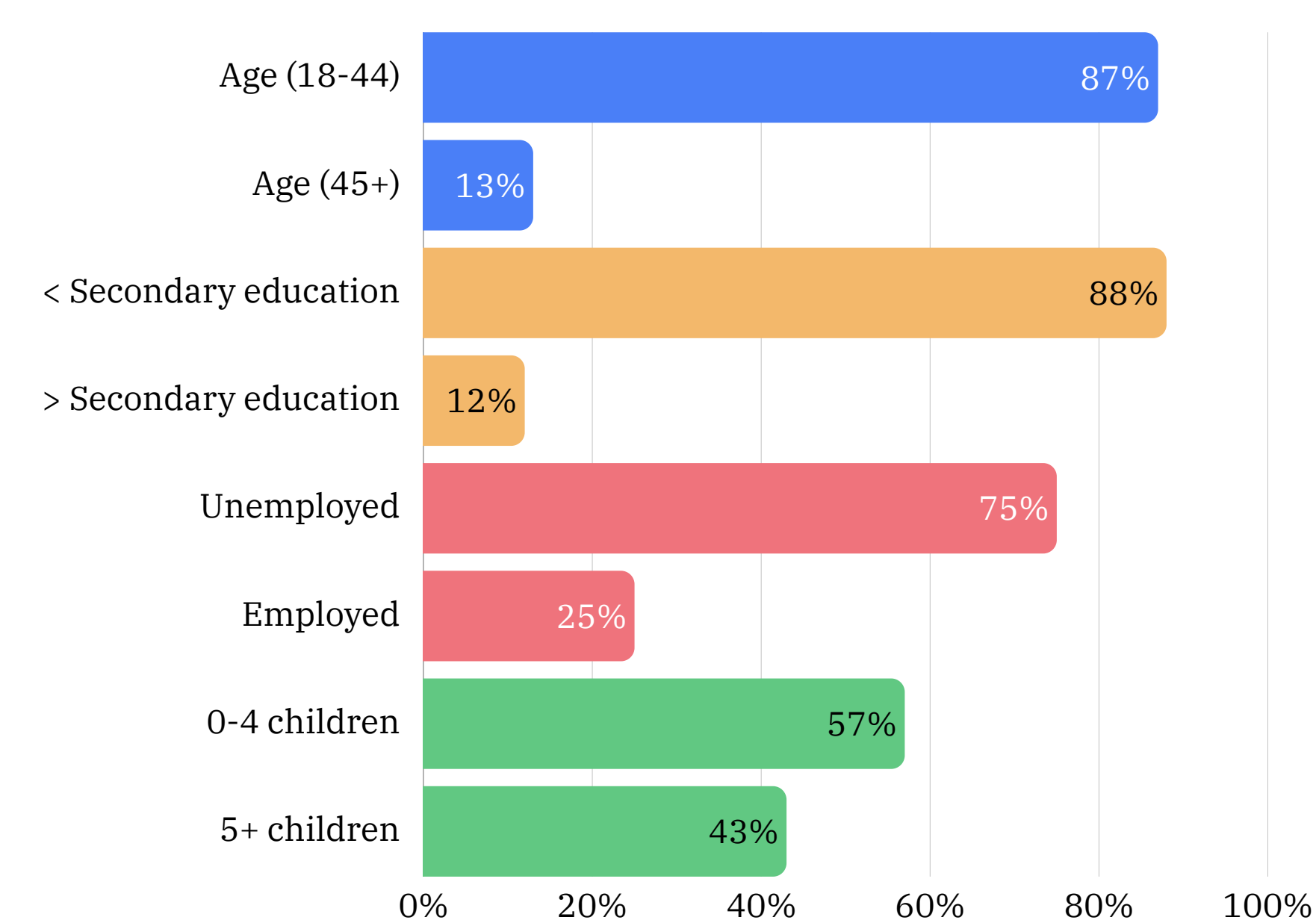


Figure 1. Demographics of the 100 Syrian refugee women surveyed

Results

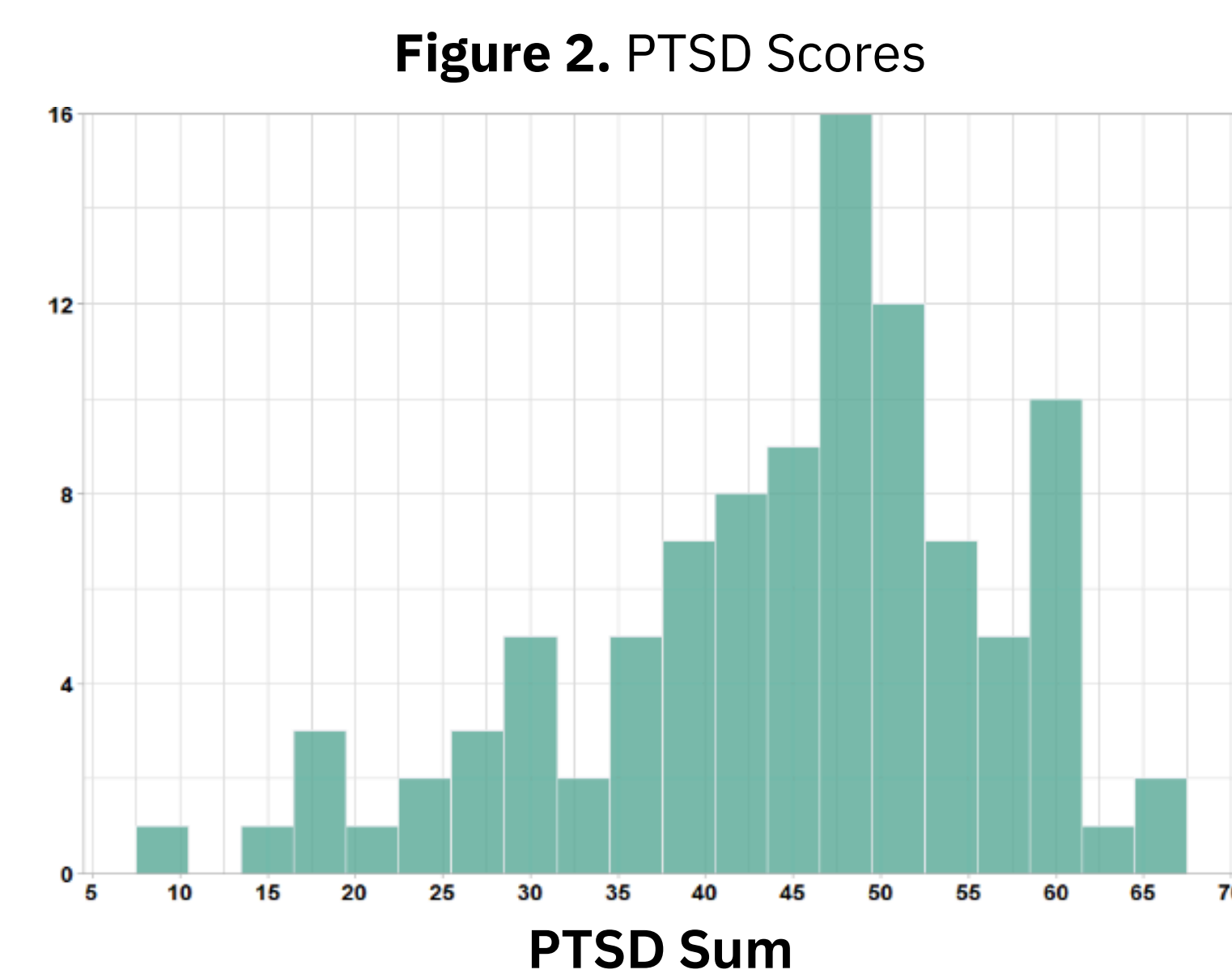


Table 1. PTSD Diagnosis Prevalence

Prevalence of PTSD Diagnosis	
Category 1 ≥ 1	95%
Category 2 ≥ 3	93%
Category 3 ≥ 2	99%
Overall PTSD Diagnosis	
Yes	89%
No	11%

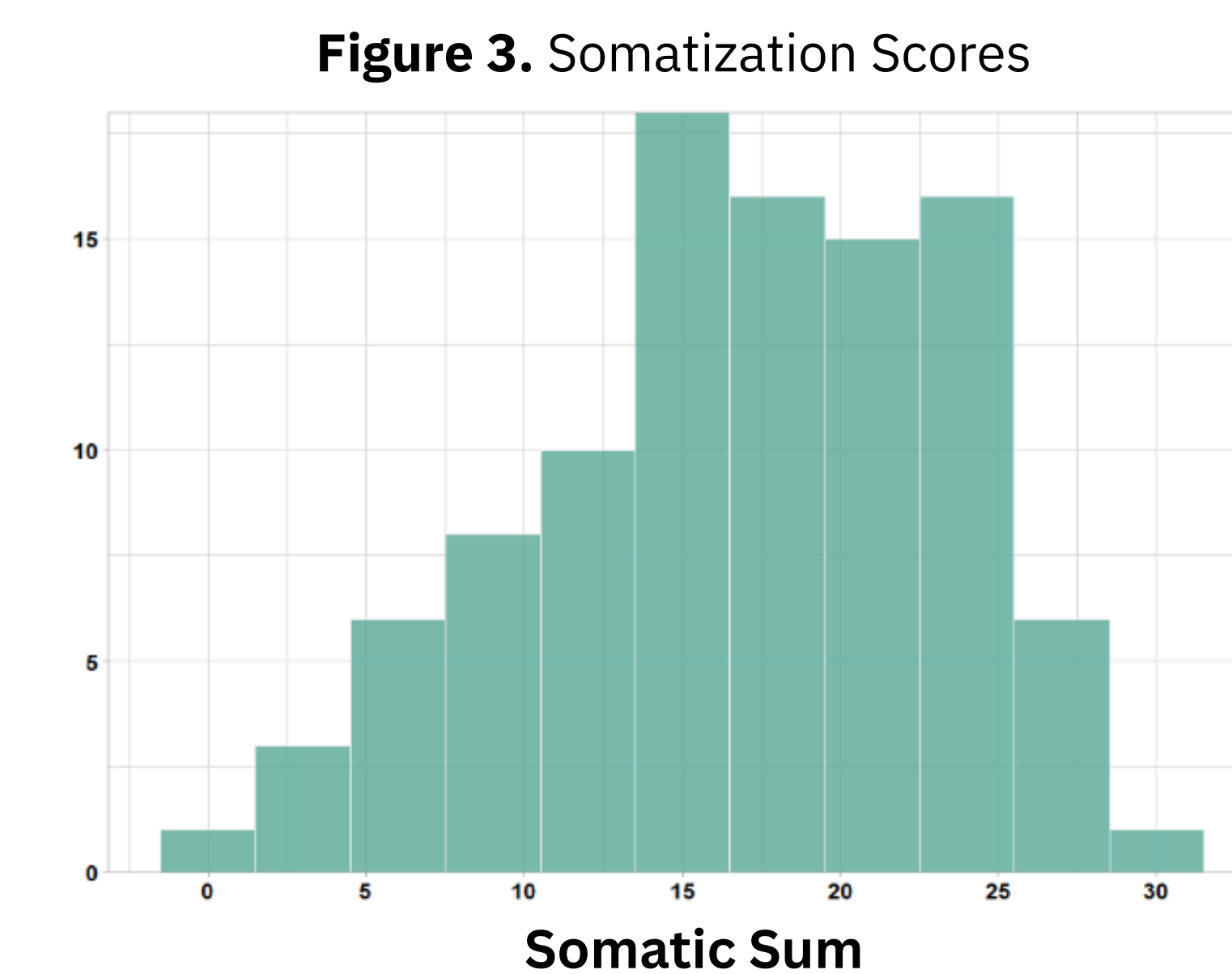


Table 2. Somatization Severity

Severity	
Minimal (0-4)	4
Low (5-9)	11
Medium (10-14)	22
High (15-30)	63

Table 3. PTSD Scores & Diagnosis by Demographic Groups

	n	Min	Median	Mean	Max	SD	PTSD Diagnosis	p-value
Number of Living Children								
0-4	57	9	45	41.9	66	12.7	48 (84.2%)	
5+	43	20	50	48.9	65	9.82	41 (95.3%)	0.003**
Education level								
Less than Secondary	88	9	47	44.6	66	12.3	77 (87.5%)	0.38
Secondary and Above	12	31	48	47.3	62	9.46	12 (100%)	
Employment Status								
Employed	25	9	49	46.8	66	11.9	24 (96%)	0.38
Unemployed	75	14	47	44.3	65	12.2	65 (86.7%)	
Age								
18-44	87	9	48	44.9	66	12.2	79 (80.8%)	0.83
45+	13	20	48	45.6	62	11.3	10 (76.9%)	

** Statistically significant (p < 0.01)

Table 4. Somatization Scores by Demographic Groups

	n	Min	Median	Mean	Max	SD	p-value
Number of Living Children							
0-4	57	0	15	15.2	30	7.14	
5+	43	5	19	18.7	28	5.16	0.0055***
Age							
18-44	87	0	16	16.2	30	6.7	
45+	13	12	20	19.9	27	4.15	0.01*
Employment Status							
Employed	25	6	17	17.8	26	4.9	0.22
Unemployed	75	0	17	16.3	30	7.02	
Education level							
Less than Secondary	88	0	17	16.6	30	6.7	0.91
Secondary and Above	12	9	15	16.8	25	5.75	

* Statistically significant (p < 0.05)
*** Statistically significant (p < 0.001)

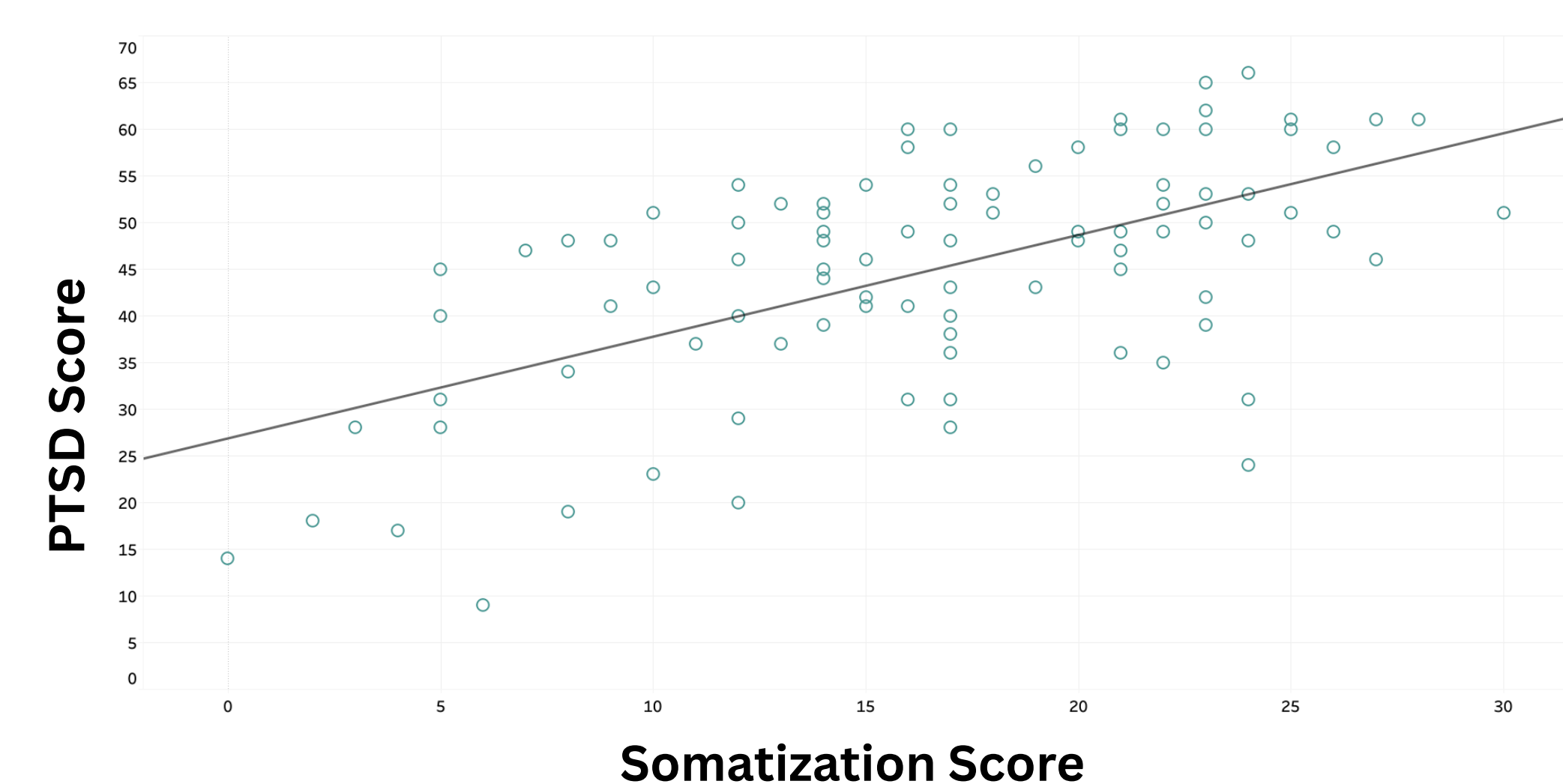


Figure 4. Moderate positive correlation between PTSD vs. Somatic Symptom Scores (ρ=0.52, p<0.001)

There is an **exceptionally high** burden of **PTSD and somatization** among Syrian refugee women living in Lebanon.

Women with **5+ children** had significantly **higher PTSD and somatization** scores.

Women **aged 45+** had significantly **higher somatization** scores.

Conclusions

- Implement routine screening for PTSD and somatic symptom presentations among refugee women using culturally validated assessment tools.
- Provide targeted training for healthcare workers to recognize trauma-related and somatic manifestations of PTSD, enabling improved patient identification, education, and referral to appropriate mental health services.

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