Chapter 36

RECOGNIZING THE WARNING SIGNS OF VIOLENCE ACROSS THE LIFESPAN
Samples from Kuwait and the USA

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ABSTRACT

The World Health Organization (WHO) declared interpersonal violence a world-wide public health crisis (World Health Organization [WHO], 2002). In the United States, victims must be counted in the millions for child abuse (Center for Disease Control and Prevention [CDC], 2006), intimate partner violence (CDC, 1998), and elder abuse (Acierno et al. 2010). Interpersonal violence can be prevented (Office of the Surgeon General, 2001; WHO, 2002) and one powerful form of prevention is violence education (Vieth, 2006). This study compared the effectiveness of violence education curriculums at two universities using the Warning Signs Survey (Berman, Dinkha, Garg, & Swiderski, 2008). The objectives of the study were to assess: the internal consistency of the Warning Signs Survey scales; the perceptions students had about warning signs of destructive behavior; and the utility of the survey for informing instructors about the strengths and weaknesses of their violence education efforts. Subjects included 156 students from Indiana University of Pennsylvania (IUP) and 136 students from the American University of Kuwait (AUK). Internal consistency of survey scales varied with Cronbach's alpha ranging from .5-1.0. AUK and IUP students showed divergent perceptions of the warning signs of destructive behavior. MANOVA indicated that students learned more about violence, suicide, and acceptable parenting strategies with IUP students learning more than AUK students.

Keywords: violence prevention, outcome assessment, teaching effectiveness.

1. INTRODUCTION

Interpersonal violence harms children, youth, adults, and elders (Acierno et. al, 2010; Center for Disease Control and Prevention [CDC], 1998, 2006). It was labeled a world-wide public health crisis by the World Health Organization (WHO, 2002). Interpersonal violence happens in every community and country around the world (Butchart, Brown, Wilson, & Mikton, 2008) and its prevention would increase community health and wellness through decreasing physical health and mental health problems and even premature death (Brown et al., 2009; Felitti, 2002). While even one exposure to violence has been found to have a negative impact on health (Brown et. al 2009; Felitti, 2002), research indicates that both co-occurrence and polyvictimization are the norm (Hamby & Grych, 2013). Thus, while the Administration for Children, Youth and Families (2006) in the United States indicated that 3.3 million reports of child maltreatment were investigated, it is likely that each child was a victim of more than one form of maltreatment and was victimized on more than one occasion (Hamby & Grych, 2013). For example, a child who is physically abused by a parent is likely to have been abused on more than one occasion (polyvictimization) as well as being emotionally abused as well as physically abused within each incident of abuse (co-occurrence). Interpersonal violence occurs across the lifespan. In the United States, the numbers of victims must be counted in the millions for child abuse (CDC, 2006), intimate partner violence (CDC, 1998), and elder abuse (Acierno et. al, 2010).

Vieth (2006) developed a plan to eradicate interpersonal violence through integrating comprehensive violence education at the undergraduate and graduate levels. With effective educational efforts, future mandated reporters would know how to make accurate reports of interpersonal violence, future investigators of violent incidents would know how to effectively

interview potential victims and perpetrators, future prosecutors would know how to gain convictions in violent cases where adjudication was needed, future psychologists and social workers would understand the dynamics of violence and provide better treatment; future parents would understand child development and use nonviolent, child rearing strategies; and, enough community members would understand the dynamics of abuse to provide a political tipping point in favor of legislation that would support nonviolence. Vieth's plan has been endorsed by the National Partnership to End Interpersonal Violence (NPEIV) and the Institute on Violence, Abuse, and Trauma (IVAT) and many universities across the United States and world-wide are developing interdisciplinary, violence education curriculums that are affiliated with these organizations.

The current study is part of a larger effort to develop effective violence education curriculums at Indiana University of Pennsylvania (IUP) and the American University of Kuwait (AUK). This study sought to evaluate the Warning Signs Survey as an effective outcome instrument for determining the effectiveness of these violence education curriculums. The survey was first developed in 2008 (Berman et al., 2008). It has scales covering destructive interpersonal behavior including the warning signs of: violence, suicide, items not reflecting violence or suicide, a maltreated child, signs of typical childhood, a sexually or physically abusive parent, a neglectful parent, and signs of acceptable parenting.

The objectives of the current study were to assess: the internal consistency of the Warning Signs Survey scales; the perceptions students had about warning signs of destructive behavior; and the utility of the survey for informing instructors about the strengths and weaknesses of their violence education efforts.

2. BACKGROUND

Individuals are not born to be violent but their exposure to violence can begin in utero when a pregnant woman is assaulted (CDC, 2006).The experience of violence can change the architecture of the child's developing brain (National Scientific Council on the Developing Child, 2004, 2005). Each incident of violence is connected to a web of past experiences, a context of individuals, stimuli and environmental cues (Office for Victims of Crime [OVC], 2010). Exactly when an episode of violence will erupt is difficult to predict, the likelihood that one will occur may be evident by the presence of warning signs of emotional, behavioral escalation and increased situational cues (Hamby & Grych, 2013).

Studies on the impact of violence initially looked for specific effects based on type of violence exposure (Hamby & Grych, 2013). However, years of research have led to the conclusion that the impact of victimization is more a function of the number of victimizing and/or traumatizing events a person has experienced (Felitti, 2002). As the number of victimization experiences increases, the likelihood of experiencing serious mental and physical health consequences and even early death has been found to increase (Brown et al. 2009, Felitti, 2002; Hamby & Grych; 2013). Interpersonal violence occurs around the world and is a major public health risk (WHO, 2002). Prevention of violence would correspond to preventing the major cause of death for individuals within the first thirty years of life (Haegerich et al., 2014).

3. METHODS

3.1. Subjects
A total of 292 psychology students participated in the study; 156 were from IUP and 136 were from the AUK. Seventy percent of the sample was between the ages of 18-20 and 31% were 21-23. The gender split was 26% male and 74% female. Thirty one percent were freshman, 31% were sophomores, 19% were juniors, and 18% were seniors. Comparing demographics by country, there were no gender differences however, the AUK sample was significantly older, contained more upperclassmen, and came from less rural areas. The majority of students were taking introductory psychology classes but some came from more advanced courses. Subjects represented a convenience sample of students from courses taught by the study authors.

3.2. Measures

The Warning Signs Internet Survey had 143 items on ten scales each containing sentences that described the behavior of an individual. Subjects were asked to identify whether each item represented acceptable behavior or was a sign of destructive behavior towards self or others. For example, on the Physical Abuse Scale, one item was, "the parent has very strict rules and punishes any sign of disobedience". In response to this item, students indicated if it was a warning sign of physical abuse, sexual abuse, emotional abuse, neglect, or was acceptable parenting. For every scale, there were distracter items reflecting neutral or positive behavior as well as warning signs of destructive behavior. Item order on the survey was randomized within each section of the survey.

4. RESULTS

4.1. Internal Consistency of scales

The internal consistency of ten scales was examined using the data generated separately for AUK and IUP students at the beginning of the academic term. For a scale to be considered internally consistent its Cronbach's alpha had to be at least .7 and each item on the scale had to have a correlation with the total scale of at least .2. Data from AUK students indicated that only six of the ten scales met these criteria. Data from IUP students indicated that ten of ten scales met both criteria. Table 1 presents a summary of the Cronbach's alpha analyses. Table 2 presents a summary of the items which, if removed, would increase the reliability of the scale. The items that would increase the reliability of a scale differed between the AUK and IUP samples.

Table 1. Cronbach Alpha analyses.

Scale	No. of Items	Total	IUP	AUK
Suicide	(9)	.715	.694	.618 [a]
Violence	(9)	.66	.728	.512 [a]
No sign violence/suicide	(13)	.851	.856	.604 [a]
Maltreatment	(16)	.746	.721	.762
Not maltreatment	(18)	.935	.953	.800
Physically abusive	(8)	.851	.895	.783
Sexually abusive	(8)	.772	.752	.781
Emotionally abusive	(8)	.635	.689	.564 [a]
Neglectful	(9)	.777	.734	.793
Acceptable parenting	(11)	.780	.713	.729

Note: n= 136 at AUK and n=156 at IUP.
[a] Scale not reliable based on criterion of greater than or equal to .7 and an item-total scale correlation of .2 or greater.

Table 2. Items that increase reliability of scale if removed.

Scale	IUP	AUK
Suicide	impulsivity	threats to harm self
Violence	not respected	victim of violence gang membership rejected by peers victim of bullying
Not v/s	old-fashioned ideas feeling less attractive	swearing taking medication
Maltreatment	signs of fear frequent changes	
Not maltreatment	non-suspicious injury	non-suspicious injury

Table 2. Items that increase reliability of scale if removed (cont.).

Physically Abusive	tie with rope	
Sexually abusive	on lap	
	pornography channel	
Emotionally abusive	threats to harm pet	told not important
	told to lie	told to lie
Neglectful	drugs/weapons	
	parent drinks	
Acceptable parenting		

Note: n=136 at AUK and 156 at IUP.

4.2. Perceptions of the warning signs of destructive behavior

4.2.1. Perceptions of warning signs at beginning of term. Student perceptions of each item on the Warning Signs Survey were examined at the beginning of the term. A decision was made that if 50% or more of the students endorsed it as a warning sign of a particular destructive behavior, then the item was defined as being perceived as being a warning sign of that destructive behavior. Each scale of the survey had items intended to reflect a warning sign of a particular destructive behavior as well as normative behavior and/or distracter items.

Using this 50% criterion, 7 of 9 of the intended warning signs of suicide were perceived by students at IUP to be warning signs of suicide. In contrast, only 2 of 9 of these items were perceived by students at AUK to be warning signs of suicide. The two items that AUK and IUP students agreed were warning signs of suicide included "…. they had no future," and "…the intent to harm self." Items that IUP students saw as warning signs that AUK students did not included, "…ending long standing friendships," "…expressing hopelessness," and "…giving away important possessions." Two items that students from both countries misperceived as not relevant to suicide, were "…showing an increase in impulsiveness," and, "… a significant change in sleeping patterns."

Students in both countries showed highly congruent opinions about what might constitute warning signs of violence. At IUP, 8 of 9 items intended to indicate violence were perceived as warning signs of violence. Similarly, at AUK, 7 of 9 of these were endorsed as warning signs. One item not endorsed by students from both countries as a warning sign of violence was," … being rejected by peers." There were sixteen intended warning signs of a maltreated child embedded within approximately the same number of distracter items. For both countries, students appeared to have developed a response set of endorsing every single item as a potential warning sign.

There had been nine items intended to be signs of a physically abusive parent. AUK and IUP students endorsed eight of these as warning signs of a physically abusive parent. The only item both samples did not consider a warning sign included, "… having a ten year old stand in the corner for four hours." There had been eight items intended to be warning signs of a sexually abusive parent. AUK and IUP students endorsed all eight at the beginning of the semester. There had been eight items intended to be warning signs of an emotionally abusive parent. AUK students endorsed seven of these as warning signs. IUP students only endorsed six of them as warning signs. The one item that students in both countries did not endorse as a warning sign of emotional abuse was, "… one parent drinking heavily and then asking the youth to lie to the other parent about it."

There had been ten items intended to reflect warning signs of a neglectful parent. IUP students recognized nine of these ten and AUK recognized seven of them. Students from both countries did not perceive it as neglectful for, "… a ten year old must always remain inside and never interact with other youth." In addition, AUK students did not see it as neglectful when, "… a parent never showed physical affection," or, "if the parent made illegal drugs while the youth was in the room and exposed the youth to danger due to parental drug use." Finally, there were eleven items intended to reflect signs of acceptable parenting, IUP students endorsed them

all at the beginning of the semester. AUK students considered a number of these items as unacceptable including, "Parent makes all the rules in the family and expects the youth to obey without arguing," "Parent searches youth's room for drugs and alcohol after youth has been behaving strangely all weekend," and, "Parent expects youth to work for the family business after school and on weekends."

4.2.2. Knowledge gained through psychology course work. By the end of the term, IUP students increased their knowledge of the warning signs of suicide, violence, and behaviors that were not signs of violence or suicide; however, knowledge of the warning signs of neglectful parenting decreased. Students from AUK showed no increases in knowledge; their recognition of the warning signs of violence and neglectful parenting decreased. Item analysis indicated these decreases reflected re-categorization of an item from one destructive category to another. IUP and AUK students knew a majority of the items on the Maltreated Child, Sexually Abusive Parenting Scale, Physically Abusive Parenting Scale, and Acceptable Parenting Scale at the beginning of the term; these ceiling effects meant that these scales could not reflect any increases in knowledge at the end of the term. Table 3 summarizes the results of the two way ANOVAS for each scale.

Table 3. Two-Way ANOVA accuracy scores by country comparison.

Scale	No. of Items	Main effect	Interaction	
			USA	Kuwait
Suicide	9	Not significant	Increased [*]	Stable
Violence	9	Not significant	Increased [*]	Decreased [*]
Not v/s	13	Significant [*]	Increased [*]	Stable
Maltreatment	16	Not significant	Stable	Stable
Not maltreatment	18	Not significant	Stable	Stable
Physically abusive	8	Not significant	Stable	Stable
Sexually abusive	8	Not significant	Stable	Stable
Emotionally abusive	8	Not significant	Stable	Stable
Neglectful	9	Significant [*]	Decreased [*]	Decreased [*]
Acceptable parenting	11	Not significant	Stable	Stable

Note: n = 136 AUK and n = 156 IUP.
[*] $p < .05$.

4.3. Utility of survey for instructors

The Warning Signs Survey provided instructors with valuable insights into the strengths and weaknesses of their violence education curriculums. Strengths included that IUP students were learning more about the warning signs of some destructive behavior. However, weaknesses included that the violence curriculums at AUK and IUP were decreasing student accuracy in recognizing the warning signs of neglectful parenting and some knowledge of warning signs could not be assessed due to significant ceiling effects on some scales.

The survey asked students to indicate where they were learning accurate information about destructive behavior. IUP students indicated receiving the most accurate information from their academic courses. AUK students reported receiving the most accurate information from educational TV. In addition, AUK students were almost twice as likely to have indicated that they learned about destructive behavior from personal exposure to violence as IUP students (14% compared to 8.6%). In addition, AUK students indicated being twice as likely to be exposed to a dangerous neighborhood or country as IUP students (21.8% compared to 13%). Table 4 provides further details about these differences.

Table 4. Sources of knowledge about violence.

Source of Knowledge	IUP	AUK
	% indicated provided a great deal of useful information	
Academic Coursework	42.8% [a]	33.8%
Dangerous Neighborhood: great deal	13.0%	21.8%
News Program	18.2%	31.9%
Educational TV/Movies	25.7%	41.0% [a]
Personal Exposure	8.6%	14.1%
Recreational TV/Movies	11.7%	25.4%
Family Teaching	22.2%	34.8%
Personal Reading	23.2%	32.8%

Note: n=156 (USA); n=136 (Kuwait)
[a] This was the source rated as most helpful of all sources of information about violence.

5. DISCUSSION

Interpersonal violence is a serious problem and reducing it would increase physical and psychological health and increase longevity (Felitti, 2002). There are many violence prevention efforts that are ongoing worldwide (WHO, 2008) and best practices need to be empirically validated and widely spread (Vieth, 2006). This study investigated the effectiveness of the Warning Signs Survey as an outcome instrument for evaluating violence education curriculums. The results of the study indicated that survey results could provide instructors with important curricular feedback. For example, survey results indicated that students at IUP were learning accurate information about violence and suicide and both AUK and IUP students were not learning the warning signs of neglectful parenting. Results also indicated that students at both AUK and IUP were able to recognize severe incidences of physical and sexual abuse prior to taking psychology courses. Thus, to improve students' ability to recognize warning signs of some forms of violence, the more subtle signs of them needed to be added to both the survey and the violence education curriculums.

Cultural differences were found between the perception of AUK and IUP about warning signs of some destructive behavior. For example, only IUP students considered spending time with an aggressive gang of peers to be a warning sign of violence. There are many possible explanations for these findings. First, they may reflect real cultural differences. Most of the peers that AUK students spend time with are cousins or long time family friends. Beside Kuwaitis, the majority of people who live in Kuwait are expatriated and those individuals stay within their close circle of some family and more friends. Therefore, an aggressive gang of peers is not viewed negatively when the peer is someone who is seen as a family member. Alternatively, differences on items may be due to simple misunderstandings of the meanings of the items, a lack of knowledge of these topics, or the conservative attitude Kuwaiti society has towards domestic violence and other forms of interpersonal violence that might lead AUK students to discount some warning signs. Finally, the survey was lengthy. While proficiency in English is a requirement of AUK, it was still not the language that AUK students were most proficient in. Thus, as they progressed through the survey, students may have lost their motivation for thinking through each item carefully.

If violence education curriculums do not teach students how to identify the warning signs of destructive behavior, they are in need of revision. From this standpoint, the curriculums being taught at both AUK and IUP need revision to include the more subtle signs of an abused child and destructive parenting practices. In addition, the curriculum at AUK might need to strengthen its didactic material related to all violence warning signs. However, differences

between the knowledge of IUP and AUK students could reflect their comfort in stating what they know. There are many sources of censorship that attempt to protect the image of Kuwaiti culture and discourage a discussion of destructive behavior. This taboo is the result of many factors including the false belief that domestic violence does not occur in Kuwait, that religious teachings forbid such violence, that all Kuwaiti family systems are warm and cohesive, and that it is more important to protect the image of Kuwaiti society than educate the population about the realities of interpersonal violence. While they might be more uncomfortable discussing violence, survey results

indicated AUK students had greater personal exposure to dangerous neighborhoods and being personally exposed to violence, than IUP students. This greater exposure suggests that AUK students need to know more warning signs of violence than IUP students in order to remain safe.

While media in the United States is replete with violence, much of it devoid of realistic consequences to violence (Smith & Donnerstein, 1998). In contrast, Kuwait was a warzone for seven months during the Iraq-Kuwaiti war and continues to share borders with countries in the midst of violent conflict. While the USA military has been heavily in much of this conflict, students at IUP have had limited exposure to the conflicts directly. These differing contexts for violence underscore the need for violence prevention efforts to be tailored to the unique needs and experiences of different cultural groups.

At this time, violence prevention in the United States face the barriers of counteracting pervasive messages from violent media and from cultural messages that violence is a problem of individuals not of cultural attitudes (Alexander et al., 1998). Violence prevention in Kuwait faces the barrier that educational materials on the issues are considered irrelevant and the topics relevant to violence prevention are considered taboo.

6. FUTURE DIRECTIONS

The Warning Signs Survey has been significantly revised to reduce ceiling effects and to include items reflecting interpersonal violence across the lifespan. This revised survey has been evaluated using the data from 700 IUP students. Cronbach's alphas now range form .7-1.0 on all scales. This survey has been translated into Arabic at AUK. Students at AUK have taken the survey in English and in Arabic. A comparison of student perceptions of the warning signs of destructive behavior will be carried out to examine if student perceptions of the warning signs of violence are influenced by the language in which the warning sign is expressed.

REFERENCES

Acierno, R., Hernandez, M. A., Amstadter, A. B., Resnick, H. S., Steve, K., Muzzy, W., & Kilpatrick, D. G. (2010). Prevalence and correlates of emotional, physical, sexual, and financial abuse and potential neglect in the United States: The National Elder maltreatment study. *American Journal of Public Health, 100*(2), 292-297.

Administration for Children, Youth and Families. (2006). *Child maltreatment 2006* (U.S. Department of Health and Human Services Report). Retrieved from http://archive.acf.hhs.gov/programs/cb/pubs/cm06/cm06.pdf

Alexander, J. F., Pugh, C., Parsons, B., Barton, C., Gordon, D., Grotpeter, J., Hansson, K., Harrison, R., Mears, S., Mihalic, S., Schulman, S., Waldron, H., & Sexton, T. (1998). Functional family therapy. In D. S. Elliott (Ed.), *Blueprints for violence prevention series*. Boulder, CO: Center for the Study and Prevention of Violence, Institute of Behavioral Science, University of Colorado at Boulder.

Berman, P. Dinkha, J., Garg, R. & Swiderski, C. (2008). Using digital technology to promote effective education on violence prevention. In M. Jaiswal, & R. Garg (Eds.) *Enterprise systems and business process management: Global best practices.* Macmillan Advanced Research Series. Delhi, India: Macmillan India Ltd.

Brown, D. W., Anda, R. F., Tiemeier, H., Felitti, V. J., Edwards, V. J., Croft, J. B., & Giles, W. H. (2009). Adverse childhood experiences and the risk of premature mortality. *American Journal of Preventive Medicine, 37*(5), 389–96. doi:10.1016/j.amepre.2009.06.021

Butchart, A., Brown, D., Wilson, A., & Mikton, C. (2008). *Preventing violence and reducing its impact: How development agencies can help*. Geneva, Switzerland: World Health Organization Press.

Center for Disease Control and Prevention. (1998). Lifetime annual incidence of intimate partner violence and resulting injuries – Georgia, 1995. *Morbidity and Mortality Weekly Report, 47*(40), 846-853.

Center for Disease Control and Prevention. (2006). *Intimate partner violence during pregnancy, a guide for clinicians.* Retrieved October 25, 2008, from http://www.cdc.gov/reproductivehealth/violence/intimatepartnerviolence/

Felitti, V. J. (2002). The relation between adverse childhood experiences and adult health: Turning gold into lead. *Permanente Journal, 6*(1), 44-47.

Haegerich, T. M., Dahlberg, L. L., Simon, T. R., Baldwin, G. T., Sleet, D. A, Greenspan, A. I., & Degutis, L. C. (2014). Prevention of injury and violence in the USA. *The Lancet*, 384(9937), 64-74. doi:10.1016/S0140-6736(14)60074-X.

Hamby, S. & Grych, J. (2013). *The Web of violence: Exploring connections among different forms of interpersonal violence and abuse*. New York, NY: Springer.

National Scientific Council on the Developing Child. (2004). *Children's emotional development is built into the architecture of their brains* (Working paper 2). Retrieved from http://developingchild.harvard.edu/index.php/download_file/-/view/70/

National Scientific Council on the Developing Child. (2005). *Excessive Stress Disrupts the Architecture of the Developing Brain* (Working Paper 3). Retrieved from http://developingchild.harvard.edu/index.php/download_file/-/view/469/

Office for Victims of Crime. (2010). *In their own words: Domestic abuse in later life.* Madison, WI: National Clearinghouse on Abuse in Later Life/Wisconsin Coalition against Domestic Violence. Retrieved from http://www.ovc.gov/publications/infores/pdftxt/InTheirOwnWords.pdf

Office of the Surgeon General. (2001). *Youth Violence: A Report from the Surgeon General*. Retrieved from http://www.ncbi.nlm.nih.gov/books/NBK44294/

Smith, S. L., & Donnerstein, E. (1998). Harmful effects of exposure to media violence: Learning of aggression, emotional desensitization, and fear. In R. G. Geen, & E. Donnerstein (Eds.), *Human Aggression: Theories, Research, and Implications for Social Policy* (pp. 167-202). New York, NY: Academic Press.

Vieth, V. (2006). Unto the third generation: A call to end child abuse in the United States within 120 years (revised and expanded). *Hamline Journal of Public Law & Policy, 28*(1), 85.

World Health Organization. (2002). *Recommendations from the World report on violence and health*. Retrieved October 12, 2012, from http://www.who.int/violence_injury_prevention/violence/world_report/en/wrvhrecommendations.pdf

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