

Growing Up in Communities Affected by War

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Abstract. The war in ex-Yugoslavia, displacement, rapid economic changes and a deteriorated social context, exposed a hundred thousand children and adolescents to very intensive, often multiple traumatic experiences followed by a chain of chronic and increasing adversities in their everyday lives. During the past 10 years more than 3 million people from ex-Yugoslavia became “refugees”, “expellees”, or “internally displaced persons”. Approximately a million of them found shelter, permanent or temporary, in Serbia. Nearly half of this number were children and young people. Many of them, before finding refuge, witnessed destruction, atrocities, torment and the death of close family or friends or their own lives were endangered, exposed to violence, deprivation or uncertainty. Although child refugees found safety and shelter, the painstaking everyday realities of refugee life and an uncertain future continued to torment them and mark their developmental passage towards adulthood. The aim of the paper is to present the reactions of children and adolescents in Serbia, both refugees and domicile ones, to those traumatic experiences and to discuss how they have coped with such experiences during the last 10 years. The paper is based on several studies done by the research team of the Psychotrauma Center for Children and Adolescents of the Institute for Mental Health in Belgrade in that period [1–5].

1. Traumatic Experiences of Young in Serbia

The number of “domicile” young people in Serbia with traumatic, and in particular with multiple traumatic experiences drastically increased in the last 10 years. In 1991 this percentage, which amounted to 26.4%, doubled itself in 1999 to 55.9%. The most frequent traumatic experiences quoted were family conflicts or family breakdown (17%), direct exposure to life threat (16.8%), death of a close person (10.9%), violence related to school (7.4%) and violence related to peer relationships (5.8%).

The experiences of young refugees were even more severe: 74.1% of boys and 88% of refugee girls went through severe traumatic experiences related to war. Direct life threat was experienced by 41% of young refugees and 14.4% witnessed the killing or wounding of a family member or other close persons. The exposure to multiple traumas during several months prior to seeking refuge was a frequent finding.

2. Reactions of Young to Traumatic Experiences

The life in the shade of war, under sanctions, in isolation, in the context of drastic impoverishment of the society, not only in material but also in a spiritual sense, significantly affected the mental health of all young people in Serbia, both in the refugee and domicile populations.

Our clinical experience indicated increasing psychological and behavioral disorders in adolescents, to the abuse of psychoactive substances, peer violence, joining different gangs, as well as to a nihilistic, aggressive or hedonistic attitude towards the world and the future. Detailed assessment has indicated that underlying unrecognized depression was frequently manifested by aggressive or auto-destructive behavior and an inclination of the young towards anti-social activities (fights, stealing, use of alcohol and psychoactive substances).

The results of the research confirmed our clinical observations. The investigation carried out during 1995–98 with the Achenbach Youth Self Report questionnaire [6], showed that secondary school pupils in Belgrade, aged 15–18 years, had significantly more psychological problems manifested both by externalization (attention problems, delinquent and aggressive behavior), and internalization (withdrawal, somatic complaints, anxiety and depression) than their peers in the USA. This was more frequent in girls than in boys, in refugees than in non-refugees, and in those who had traumatic experiences than in those without them.

The level of traumatization of refugee secondary school pupils, measured by the Impact of Event Scale (IES) [7] was remarkably high, both on intrusion as well as on avoidant scales. This applied particularly to girls. On Achenbach's scale, the refugee boys most frequently displayed symptoms of internalization and thinking disorders, while the scores in girls were very high on all scales.

According to our research results, those at greatest risk for the occurrence of lasting negative effects are children and young people who 1) experienced serious and multiple traumatic experiences, 2) were without adequate parental support in traumatic situations, 3) lost family or friends, 4) lived in collective refugee centers, 5) experienced traumatic experiences or losses in early childhood, and 6) previously suffered from somatic and/or psychiatric disorders.

The follow up of young refugees revealed that the symptoms of a chronic reaction to stress was present in 35.5% after 1.5–2 years of refugee life, and in 25.5% of those living in refugee camps even after 3–4 years.

3. Vulnerable Children

Drastic decreases in resources for health and social welfare and education affected all children, although its greatest impact was on the most vulnerable groups of children whose development, recovery, and survival depended on social support and solidarity.

Beside refugees and displaced children, the most vulnerable were children without parents, abused and neglected children, children with chronic illnesses and handicaps, and children in institutions.

3.1. Children Without Parental Care

The drastic deterioration in economic and social conditions was associated with an increased number of abandoned and neglected children. According to data of the Ministry for Social Welfare currently 9,000 children without parental care are cared for by social services, 45% (4,150) of them are abandoned children, and 27% (2,555) are children whose parents are not able to take care of them.

In this category the risk of abuse and neglect (physical, emotional, health) is the greatest for the youngest children, aged 3 years and under.

3.2. Abused and Neglected Children

Family violence has been a frequent reaction of the family system to stress, traumatic experiences, losses, chronic deprivation and humiliation experienced by individual family members or the family as a whole. The victims of such violence most frequently have been women and children. Reliable data documenting the number of abused and neglected children cannot be obtained in Serbia because there is no system for registration of such children, but we may assume that their number is increasing.

As an illustration, more than 400 children were referred because of serious abuse and neglect to the Center for Child Protection which started to operate two years ago at the Institute of Mental Health in Belgrade.

It is well known that growing up in a family with a high level of violence constitutes a great risk not only for the child who is the victim of violence but also for future generations. Through the process of "identification with the aggressor" the child-victim of violence frequently turns into the perpetrator and in this way the violence is transmitted from one to the next generation.

3.3. Children from Multiple Problem Families

Negative life events to which our families were exposed for many years was reflected in the functioning of families. During 1999 the Centres for Social Work in the territory of Belgrade registered 4,803 children who came from families with disturbed relationships. In two thirds of such families emotional, and frequently physical abuse or serious forms of neglect of children were detected. The most threatened were the children who came from families in which somebody, most frequently the father, displayed psychopathology in the form of alcohol or drug abuse, aggressive behavior, depression as a reaction to war experiences and/or adverse life events.

3.4. Children in Institutions

The social and economic crisis has most drastically affected children in institutions. There are currently 6,000 children in institutions in Serbia and Montenegro. In institutions for mentally retarded children (Kuline, Stamnica, Popovac) the situation has assumed a catastrophic scale.

The placement of children into institutions in the past has been a standard practice in cases of children without parental care, more seriously handicapped children, and particularly mentally retarded children and children with disturbed behaviour.

The policy of gradual termination of institutional placement of handicapped children and caring for them in an open environment, preferably in the family, is an imperative but also a great challenge for all services responsible for the well-being and development of children.

4. Psychological Healing and Ways Forward Following Traumatic Experiences

Despite the concern the above data may cause, they also show that more than two thirds of young people who experienced serious traumatic events did not develop psychopathology. They were able to activate mechanisms for successfully coping with traumas and to develop new forms of adjustment.

By investigating the factors affecting the outcome of exposure to traumatic experiences in childhood and youth, we have concluded that in addition to severity and the number of traumatic experiences, a significant role is played by individual characteristics of adolescents (maturity, cognitive style, self-esteem, quality of previous life experiences, and especially the history of previous traumas and pre-existing psychopathology), their family reaction and, finally, by the attitude of social environment in which the recovery is taking place.

The outcome also depended on the behavior of parents, that is the response of the parental system to the situation. Exaggerated emotional responses, panic, intolerance or depression of parents in traumatic situations have significantly increased the risk for the occurrence of psychopathology in adolescents.

There is a lot of research and debate nowadays concerning the so-called “protective and vulnerability factors” after traumatic experiences. In my belief, the term “protective factors” is not the most adequate one as it may deceive and make us think that there is something that may protect us, make us impenetrable, insensitive to traumatic experience. And, that is not true. We may recover from traumatic experiences, more easily or with difficulty. We may even get empowered. But these experiences will change us forever – we can never be the same as before the traumatic experience. It is more appropriate to speak about “systems of support” that enable and facilitate the recovery after traumatic experiences, than about protective factors.

Of special significance for the impact on adolescent development after traumatic experiences is the social framework in which the recovery is taking place. Man is, namely, “a being in search of meaning”, a being seeking meaning in its experiences. Finding the meaning, giving the meaning to the world, according to Neo-piagetian developmental theory, represents the principal driving power in the developmental process of a child and a young person.

The decisive factor for a positive developmental outcome after catastrophic events is not the severity or duration of the event, but the extent to which such an event damages, breaks or makes it impossible for the child or adolescent to get a coherent understanding or interpretation of the world he/she has experienced.

In situations of organized violence the pre-existing “conceptual maps” are often inadequate. Frequently, even the mechanisms for development of new “maps” get broken down, or destroyed [8]. The breakdown of family, of connections with relatives and friends, closing of schools and other social institutions, in one word the breakdown of a social network, represents in fact the destruction of these mechanisms which provide the child or adolescent with the norms and context for interpretation and understanding of traumatic events.

The research in many environments with lasting conflicts and violence (Israel, Palestine, Lebanon, Northern Ireland) has shown that the cohesion of political motivation and the community’s attitude towards conflicts, i.e., whether the social community condemns the war or considers it justified, as well as high support of the social community offered to victims of conflict, may mollify negative effects of war experiences and violence on children and adolescents.

There is no doubt that ideology, as a way of viewing the world, or put in contemporary wording, as a public expression of one’s personal “conceptual map of the world”, plays a significant role in strategies for coping under extreme dangers. In his consideration of psychological survival mechanisms in Nazi camps, Bruno Bettelheim (1943) [9] noted that those strongly committed to a certain ideology, either to religion or communism, were most able to endure the brutality of everyday camp life. In such

situations, fanatic allegiance to a certain ideology represented an essential defense mechanism against the unbearable, destructive severity of reality in concentration camps, prisons or refugee camps.

However, the allegiance to an ideology is a sword with two edges. The same ideology that gives meaningfulness to life in a war zone may lead to dehumanization, and later to satanization which, in turn, deepens the conflict, decreases capabilities for compromise and teaches young people to view the destruction of their enemies as a way for emotional survival and personal integration. A young person may conclude: "The behavior of the enemy is inhuman. The enemy, therefore, is not a man, he is a devil, a Satan. To destroy Satan is not only essential, but it is justified. Killing is, therefore, a sublime, morally justified act".

By desperately clinging to an ideology which explicates and justifies their fates and acts, the young may successfully cope with war traumatic experiences. When they grow up, however, this same ideology forces them to continue the war and, thus, to expose future generations to suffering. The experience of violence makes them insensitive to brutality and the lesson they learn is that "everything is allowed and nothing is forbidden".

In this way ideology, particularly when in the service of evil easily motivates and becomes a source of unnecessary suffering and death, not only in the present but in future generations as well. Many conflicts in the world confirm this horrible dynamic, and we have, ourselves, experienced this in our recent and more distant history.

Research also indicates the possibility that war and social crises may also promote the advancement of moral development of young people. This can only occur when adults help the young heal their wounds by placing their painful experiences into a more humanistic framework in which dehumanization and satanization are unacceptable, and in which the development of empathy and tolerance are stimulated. Yet this is surely easier to say than do.

A significant place in the process of restoration of trust in people divided by mutual hate and fear belongs to social memory. Social memory has two aspects: the stories about good and the stories about bad experiences [10].

The community that went through bad experiences during history, that has been persecuted, destroyed, traumatized, divided and betrayed keeps this in its memory. These memories continue to live in the individual memory of victims, witnesses and criminals, and also in the collective memory of people, in the stories, songs and traditions.

However, social memory also contains positive experiences, joint life, marriages, children, neighbors and friends. When people find themselves under strong stress it may frequently happen that images of others get spliced into good and bad parts, so that others are seen exclusively as bad or exclusively as good. In the context of war, of immediate life threat, it is dangerous to retain memories of positive aspects from history, of times when tolerance and shared social arrangements were possible. Therefore under war conditions enemies are generally seen as bad, while one's own people, the members of one's own group, are seen exclusively as good which only leads towards further deepening of the conflict.

It is also dangerous if war traumatic experiences are pushed back, denied. This happens, for instance, after peace has been proclaimed by those in power, when people are told that the bad side of history has to be "forgotten" – that one has to keep silent about it. The victims of violence and abuse in such situations are silenced, with no op-

portunity to express themselves publicly. The experience of war crimes remains a shameful secret of individuals, groups or of an entire people.

One knows, nevertheless, what happens when the unresolved past is kept in “the iceberg of history” [11]. The experience hidden for a long time, cut off, held back or fenced in – but never completely forgotten – remains a permanent source of new conflicts, particularly if a new traumatic experience flares it up. Unresolved shame and rage produced by narcissistic injury will further feed the flame, and low self-esteem will spur an excessive need for group identity. In this way a culture that is being created will take the shape of aggressor.

Inability of the previous generation to grieve their losses after jointly experiencing a traumatic event and failure to undo the narcissistic injury and humiliation inflicted by the other antagonistic group, may lead towards inter-generation transmission of violence.

In the explanation of the process of inter-generation transmission of violence Volkan introduces the concept of “selective trauma” under which he understands the mental representation of the past event during which one group experiences a serious loss or helplessness and humiliation in the conflict with a neighboring group [12]. Namely, each individual in the traumatized group has his or her own, unique identity and personal reaction to trauma, but at the same time all group members share a mental representation of the tragedy that was inflicted on the group. Adults, parents “deposit” non-integrated, damaged representations of self linked with the mental representation of the joint traumatic event, onto the next generation of developing children – in expectation that these children will be able to mourn the loss or wipe out the humiliation. If the children fail to work out what has been “deposited” onto them, when they grow up they will transfer their mental representation of the event to the next generation. In this way trauma is transmitted from one to the next generation.

In its passing from one generation to the other, “selective” trauma changes its function, states Volkan. Historical truth about the event loses significance for the community and instead the fact that group members through sharing of the “selective” trauma become tied to each other. “Selective trauma” becomes an inseparable part of the group identity. In situations when the community is in conflict or when it is passing through drastic changes and needs to confirm or strengthen its identity, “big leaders” easily succeed to reactivate these repressed, unresolved traumatic experiences and push the group into new conflicts, violence, and even war.

Such considerations lead us to conclude that psychological healing processes following traumatic experiences will require, in addition to interventions at the individual level, significant interventions at the social level, the so called psychosocial interventions.

Psychosocial intervention under extraordinary conditions is defined as activity that strengthens psychosocial protective factors and reduces psychosocial stressors in the effort to preserve mental health and promote human rights.

In each individual case the “protective” or “supportive” value of each factor should be assessed in relation to the extent to which this will contribute towards “giving of meaning” or integration of experiences. Classical therapeutic intervention thus is not obligatory after traumatic experiences but it becomes justified in situations in which other supportive mechanisms are absent, or in cases where the giving of meaning, integration of experiences is very complex or delicate in view of the social or emotional state of the child or young person.

One of the sources of mental health is a consequent and generally accepted story about the traumatic event, which supports individual feelings of self-esteem and which basically offers an understandable, all-inclusive picture of the world that will pave the way towards the future.

In practice, it is essential to help young people create new, individual and collective memories which will not be tainted by violence but which will preserve the conceptions of peace, positive human and social values and which will make it possible for young people to come out of their aloneness, to open up towards others and to respect the diversity of others.

In order to be able to help young people, to prevent the creation of a cycle of violence, we have to explore ourselves, to keep changing, to find meaning in all that we made meaningless during these years, to learn respect for others, and to honor their attitudes and diversity. A difficult but noble challenge.

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