Psychotrauma in the Everyday Life of Refugees

by

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In Austria there were 22,641 applications for political asylum in 2005 and 13,349 in 2006, representing a reduction in applications of over 40% p.a. (Annual statistics from the Austrian Ministry of Information (BMI)). A further 2092 applications had been received by 1.3.2007.

26% (4063 applicants) were granted, 38% ultimately turned down and 36% were either suspended, withdrawn or considered groundless. Of the 4063 asylum seekers whose applications were successful, around 2,000 came from the Russian Federation, 475 from Afghanistan, 318 from Serbia and 113 from Turkey. The remaining 1,100 positive applications were from Africans and persons from the former Soviet Union states.

According to Amnesty International a worldwide drop in refugee movement was documented in 2006. This was not so much the result of an improvement in the global situation, but was more a reflection of the complexities that fleeing entails. In particular, the willingness by many western counties (not least Austria) to accept refugees or to acknowledge them as such has decreased dramatically.

So much for the facts, which I shall return to later. The University of Vienna initiated the project "Bosnian Refugees at Vienna University" in 1992, under which 150 Bosnian refugees were looked after. They were housed for several years in the old AKH (General Hospital) which the city had allowed the university to use for this purpose. Through pure coincidence I became the supervisory psychologist to this refugee domicile from the autumn of 1992 onwards. This led to a series of degree theses, published in a book in 1995. (Leben im Transit / Living in transit). I would like to recount from this book a selection of biographies of some of the people concerned. Their names have been altered and the stories made sufficiently anonymous that one cannot correlate any individual to a particular story. The accounts are very much prototypical for war refugees.

The Beginnings of a Flight

This is Irina’s story: "Everything happened so quickly. She was sitting having breakfast on her own, as had always been the case recently, since Dragan, her husband, had been called up for service. The bell rang and somebody knocked at the door. She opened it. Three militia men were standing there with their weapons at the ready. They wanted to know where her husband was. They searched everywhere, beat her and threatened to kill her. They stank of alcohol and swore at her. If she would not say where her husband was, they would kill her, but first – and here they made explicit gestures – they would rape her. She muttered something vague about where her husband was. Clearly, she had no idea where he was – he was at war and she had not seen him for four weeks. The eldest of the three men told her that she had precisely ten minutes to pack her things, and then nothing would happen to her. He calmed the other two down, keeping an eye on her. It was strange: earlier – before the war – they had all lived alongside each other, now she was being attacked
by them. They took her, along with the few belongings she was able to pack in those ten minutes, to a truck already containing many other women, all with suitcases and looking very pale. One of them was crying – she had been beaten and shouted at by the youngest of the three men. The truck was driven to the railway station. Every now and then they came to a halt, waited, and when the three men returned they always brought more women and even children with them. Eventually there was no more floor space left on the truck. They wouldn’t even transport animals under these conditions – this thought shot through her mind like a streak of lightning – not even animals. They climbed into a bus that was standing at the station and then had to wait – for a long time. It was hot; they were hungry and thirsty. They had nothing and were not even allowed a visit to the WC. They were very frightened but at the same time extremely angry. She wanted to lash out, scream and bite, but she knew that would be tantamount to committing suicide. Suddenly they were all made to get out. Baggage control: all the bags and cases were ransacked and all photos that the militia could find were confiscated. Even her wedding photo was taken away from her.”

It was no coincidence that Irina ended up in Vienna, for she had friends who had fled before she did. Many refugees have no precise destination, however, when they first set out. Quite often they do not even realise which country they are in when they disembark from the aeroplane. They are exposed to extreme insecurity, often not having control over their own destinies. Both of these are, however, of the utmost importance for psychological well-being. In combination with the events which caused them to flee (harassment, arrest, verbal threats, sexual violence, torture…) one can refer to a massive psychic burden which exhibits multiple traumatic characteristics. The subsequent development of a post-traumatic stress disorder is the likely outcome.

The first phase of ”being here” is usually accompanied by resolve and elation, which help initially to overcome many hurdles. But the confrontation with reality soon changes this determination into a sudden sense of helplessness, particularly in the context of ambivalence in which the decision to leave home was made. Faced with this new situation, alienation, sense of loss of belonging and the inability to interreact with others can all lead to a spectrum of attacks from anxiety through to panic, reflecting the flood of stimuli incapable of being processed. Against a backdrop of specific political developments these fears and panic attacks increase in intensity and take over reality.

Confronted with restrictions, commands and confusing encounters, Irina spends her first days in the refugee camp suffering from loss of appetite, sleeplessness, full of doubt, lack of orientation and disturbed by flashbacks (film snippets in the mind) which are particularly intensive when she discusses what happened in her homeland, or when something takes place to remind her of the events leading up to her eviction or the attack by the militia men. The police, who were recently in the camp in full uniform and carrying pistols, made her feel particularly uneasy. She kept seeing the three militia before her, and was simply unable to comprehend that she was safe here in a camp in Vienna. This is typical for the start of life as a refugee. Nothing is as it was before, everything is strange and unaccustomed.
Emigration as a Potential Trauma

Every migration, whether as a refugee or displaced person, means that the person involved is radically severed from his previous existence. Separation from one’s family roots, a new language and different lifestyle means that all previous every-day routines, applied since childhood, are thrown overboard and new ones have to be learnt. This places the migrant in a similar psychic situation to a small child who has to learn how to cope with its environment, the difference being that the migrant was previously able to deal with his every-day life without any problems, because he already had the necessary skills and ability to do so.

If a carefully-planned migration can cause so many psychic problems, how much more suffering will a flight or expulsion bring in its wake? With a flight or expulsion there is the additional factor of the individual having to leave his home involuntarily or rather being forced to do so. Usually there is no time for those all-important goodbyes and the destination is often unclear. In contrast to voluntary emigrants or expatriates, refugees arrive in a country with no conception of the future and no sense of the timeframe involved. The hope of soon being able to return home often transforms into the exact opposite: the fear of never being able to return. In addition, there is often a feeling of guilt that they have let down those still at home. Every step towards integration is avoided, so that those left behind are not betrayed. Also, the uncertain timeframe is a significant barrier towards active integration. What is the incentive to learn a new language, seek acknowledgement of qualifications or look for permanent accommodation when there is always the hope of returning home in a few months’ time?

What is a Psychotrauma?

A psychotrauma is a psychic disorder, i.e. a psychic illness due to extreme, stressful (traumatic) events. In most trials the diagnosis “post-traumatic stress disorder” (PTSD) is used to indicate this psychic illness. A PTSD assumes that someone has experienced and survived a traumatic situation, and that they later develop a series of symptoms. These are categorised in groups and comprise:

1. Symptoms relating to the burden of recollection (so-called intrusions). For example, to have a feeling that you were reliving a situation again, with nightmares and daydreams brought on by that situation; also memory lapses (amnesia).
2. Symptoms connected with physical hyperarousal, e.g. sleep and concentration disorders, irritability, being easily startled, having difficulty remembering things etc.
3. Apathy and indifference e.g. loss of interest in general, or in processes that once used to be enjoyable; withdrawal from social life or from the circle of family and friends because of feeling “foreign and no longer belonging anywhere”. This is very common, particularly amongst refugees.
4. Avoidance behaviour, e.g. not wanting to confront, to the extreme of avoiding entirely, certain situations which remind them of the trauma, e.g. police questioning, or when in contact with others from one’s homeland.
Here are a few anonymised, but typical examples:

**Burden of Recollection**

*Jana*, a 45-year-old doctor has lived in Vienna for several years. She comes from a non-European country and is an outspoken critic of the religion-orientated laws of her home country. For this she had been arrested many times by the police, beaten, interrogated and imprisoned in solitary confinement for a long time (during which she had for long periods no exposure to daylight, only a naked electric light). From her cell she could also hear the cries of fellow inmates. The prison was overrun with bugs, and their crawling over her would awaken her constantly. Since living in Austria a nightmare, during which she is attacked by verminous creatures, keeps waking her up. She wakes up almost every night drenched in sweat as a result of the intense feeling of horror she experiences during these nightmares. Her skin is scratched and reddened; even during our interview she is constantly rubbing her skin. Whenever her skin itches she is reminded of what it was like in solitary confinement, she hears the terrible screams as if they were happening again right next to her, and sometimes she sees the naked electric light bulb dangling over her head. She realises that this cannot be reality, but she cannot block out these memories. She tries not to scratch herself but the urge is overwhelming. I had Jana transferred to a hospital because her skin needed medical treatment. Directly afterwards she underwent a course of psychotherapeutic treatment.

**Physical Hyperactivity**

*Douglas*, a “black african” – that is how he refers to himself – was a child soldier in an African country for many years. When his village was attacked he was separated from his parents and taken to a military camp where, along with other children, he was trained to be a soldier. He was used to carrying a weapon and using one; his main duty was to provide cover for the retreat operation following an attack. He came to Austria on his own and according to Austrian law has just come of age. Douglas is a compulsive fidgeter. He finds it very hard to sit still, tapping his foot, often standing up during our interview and frequently not able to remember what he has just said. Douglas complains about his acute concentration problems. Recently he forgot to turn off the tap in the flat-share where he lives, which led to flooding. Also, whenever he goes shopping he always manages to forget something, even though he carries a shopping list with him. In order to sleep better he has been doing intensive running training – his aim is to participate in races – but even this heavy physical training does not help much. Douglas has tried to do a German course so that he can take his exams and complete his schooling. He has, however, given up because he is so forgetful and consequently unsuccessful. He is extremely worried about his application for asylum: will Austria accept somebody like him – he asks himself – who can do so little? He is always repeating how much he misses his weapon. He cannot defend himself when he feels threatened. Douglas often feels threatened, e.g. when he is sitting in a tram: he feels very alien in this “enemy” environment, and of course stands out immediately due to the colour of his skin. When I ask him if he easily becomes angry he answers “yes”. I am working with Douglas especially on his ability to relax and to feel somewhat safer. He arrived once, beaming all over his face. He told me he had found a new weapon. I was very worried and asked him to show it to me. Douglas then pulled a prayer book out of his pocket, which he reads whenever he is travelling in a tram or feeling irritable. “Hey Doctor”, he grinned at me "don’t worry,
I am a good guy”. In the meantime, Douglas has passed his school exams and attained his leaving certificate.

**Numbing of Feelings**

*Bianca* came to me as a young woman, about 25 years old. She was accompanied by her husband. They were a handsome couple and you could sense that they were very attached to one another. Michal, her husband, recounted the story of their flight while Bianca listened. Michal came to Austria first because he had been arrested many times. They made the joint decision that they would build up a new life; Michal was to go first and Bianca and the children would follow. This became possible after 3 years. Both of them belong to a persecuted ethnic group. Their two children now live with them. They have also been granted asylum, so everything ought now go well according to Michal. Their worries were because of the children, he continued. He has observed that Bianca is incapable of looking after the children – she does not show any interest in how they are doing at school, does not care when or how they come home, and is no longer interested in fashion or her hobby (creating ornate handicrafts). The housework is neglected. He has the impression that Bianca has suffered a nervous breakdown since coming to Austria. Up to that point, Bianca now describes, when she was living alone with the children she had functioned normally and dealt with everything. She was really happy when she was reunited with her husband at long last, but now she does not understand herself any more. Bianca suffers from massive psychic exhaustion and has withdrawn herself from her family. She cannot imagine being able to develop positive feelings ever again, even though “everything’s turned out for the best”. After several interviews it transpired that Bianca had been put under intense pressure to reveal where her husband was living. She kept this a secret from close family members and also from her husband when she talked to him on the telephone. Gradually it became possible to motivate Bianca into commencing a course of psychotherapy, which at a certain juncture also included her husband.

**Prevention**

There are, unfortunately, still civilisations that associate the rape of a wife with the honour of her husband. This honour can only be fully restored by the victim committing suicide. During the Balkan wars, for example, even religious leaders insisted quite vehemently that women should be officially recognised as war victims.

*Maria* was transferred to me for an appraisal relating to an application for asylum. During an interview she admitted to being a rape victim, but her husband must not find out about it or else she would have to commit suicide. A man’s honour demands this. Maria’s husband came to Austria years ago. He is a migrant worker. Maria arrived only a few weeks ago, living at first in temporary accommodation for refugees before joining her husband and his brother in their flat. Maria’s great concern was that her husband might find out about the rape, mainly because she had had no sexual intercourse with him since her arrival in Austria. Just the thought of such an act triggers extreme memories which horrify her. Despairingly and little by little she recounts the terrible details of her rape. It took place during one of the regular search operations for her husband and his brother. Maria enjoyed making love beforehand – this was how she expressed it – now it caused her anguish. After a while I was able to encourage Maria to reveal all to her husband. The couple then took part in joint
psychotherapy sessions. Two years after our interview I received a card from them informing me of the birth of their first child.

**Nusren** was a 14-year-old when I first got to know her. She was accompanied by her father. Nusren had been challenged on the street by some henchmen of a revolution whilst walking to school, because she had not covered her hair well enough according to the accepted practice in her country. In prison they slit open a chicken’s throat in front of her eyes. She was told this would also happen to her the next time they caught her acting so immorally. In addition, they tried to find out from her more about her father’s political activities. When Nusren was reunited with her family, they decided to flee at once. Here in Austria Nusren now suffers from being unable to go to school on her own as she is afraid of being arrested again. It is quite clear to her that she now lives in Austria, but she cannot rid herself of this fear. At the same time, she wants to go to school because she would like to become a doctor, but she simply cannot manage to leave the refugee camp. Her fear became particularly pronounced after another family from her home country arrived, the father once having belonged to the very revolutionary group that had arrested her. During the course of our discussions Nusren had dressed initially according to the traditions of her homeland. I then transferred Nusren to psychotherapy. After six months I met her in the corridor of the psychotherapy centre. She was wearing jeans and a pullover, and wore her lovely hair loose. She now went to school regularly. Her fear had receded.

**The Facts**

Numerous trials substantiate the profound psychic results of traumatism in refugees. Mollica et al (1999) reported, for example, that 40% of Bosnian refugees in reception camps suffered from depression, 26% had PTSD and 21% had both. De Jong (2005) investigated civilians who had survived war-like violence in Algeria, Ethiopia and Gaza. He found numerous psychic disorders, a high incidence of insecurity, vulnerability, irritability, as well as PTSD and depression. Basoglu et al (2007) came to the conclusion that psychological manipulation, threats, psychoterror and massive stress influences produced results comparable with those from torture. The development of PTSD in reaction to torture, inhuman treatment and severe threats is comparable. Methods of psychic torment do not belong to the forbidden ”practices” in Guantanamo.

In April 2007 the following judgement was passed in Austria by the VfGH (Constitutional High Court): There can be “no grounds for objection” to the termination of family aid for asylum seekers (The Standard, 4.4.2007).

To summarise, it can be ascertained that time does not heal all wounds, and that the human psyche is not infinitely resilient and robust. Torture, psychoterror and adverse conditions in the country of reception increase the risk of psychic disorders developing in refugees and survivors, which in turn affect the second generation, at least. Treatment is essential. Prevention, i.e. the hindrance of atrocities, education regarding the consequences of traumatic events, and an adequate, i.e. professional response to all these would help, so that at least the children of those affected will be able to live successful, joyful lives.
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