

# The Impact of Traumatic Experience on Attitude Towards Future in Refugee Adolescents

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## ABSTRACT

*Traumatic experience has overall far reaching consequences on personality. In particular, it has significant impact on teenagers that are just approaching the phase of solving their identity problems. This research examines the relation of traumatic experience and attitude towards the future in two groups of adolescents. The first group consists of 20 adolescents-refugees from the East Slavonia that were settled in Rijeka area with their parents during the last six years. The second group consists of 20 adolescent's local inhabitants that were influenced by the war only indirectly. Results show significant difference between refugees and non-refugees in expressed interpersonal trust, frustration tolerance, and formation of close contacts, adaptability, precaution, bitterness, and social desirability. Both groups show increased depression, pessimism and poor self-control. This might be considered as general characteristic of society in war.*

## Introduction

War, as a traumatic situation, in many ways affects individuals, families, and society as a whole, and represents source of all types, most often multiple traumatic events, which are outside usual experience for great part of population<sup>1</sup>. Post-traumatic events and psychical sequel,

same for adults as for children and adolescents, depends on character of trauma, personal psychical resources and social support<sup>2,3</sup>. Traumatic experiences to which children and adolescents are most often exposed in the war are separation from members of their families, refuge, observation of fear and weakness of parents, death of a close member of the fam-

ily, bombing and other indirect menace of life, economic destruction of the family and similar.

According to our experience and literature response to children and adolescents, trauma includes number of reactions from which the PTSD entity is only one form of reaction<sup>4-11</sup>. So that indirect reaction to trauma shall have its characteristics, effects shall be different if they seek help several months later, while long term response to trauma will be characterized, among other, by deviation of developing phases, change of individuality and other.

During the war, parents, teachers, friends and others are themselves affected by war, misfortunes in different ways and are not capable to follow needs of a child and adolescent and to give them adequate support. Social structures and structures of community become damaged or destroyed, and the whole system of social functioning becomes compromised and is no longer in position to represent »protective membrane«. In such surroundings the adolescents are very often pushed in situation to take over the role of »premature grown-ups« within traumatized family, which essentially influences development of identity and creation of self-picture<sup>9</sup>. On the other hand, they already possess capacity for understanding of traumatic situation without illusion about being free from injury. Their basic supposition about the world as a safe place, about the fact that death happens to others, and that there is always somebody who will help, because essentially endangered by trauma, additionally damage feeling of omnipotence. The aim of the work was to determine whether refuge influences on degree of establishment of maturity, which is expressed in individual dimension of personality or attitude towards self, environment, and future. Therefore we wanted to find out whether adolescent refugees are

different from adolescents who had not gone through refuge in consideration of readiness for cooperation, unselfishness, trust in people and frustration level.

### **Respondents and Methods**

Criterion group consisted of the group (N=20) of adolescents refugees from Vukovar, students of final grades of secondary school, age between 18 and 19, who had been settled for almost 6 years in the organized shelter with their families in the part of Croatia which had not been indirectly affected by war destruction. Their traumatic experience is refuge, separation from members of their families for longer time (mainly father, who was most often captured or on the front), loss of members of the family, fear and inadequate reaction of parents, bombing immediately before their departure from Vukovar and other life aggravated situations, including economic deprivation of the family.

Comparison group consisted also of adolescents of domicile population equal to age and sex, affected by war indirectly through information, economic deprivation, and enlistment of their family members for the front. Respondents of both groups did not show any psychopathology and members of their families and teachers as an adequate one evaluated their functioning within the family and school. Respondents were examined together in form of questionnaires and scale, and the following were adopted:

- a) Scale of trust in people
- b) Scale of readiness for cooperation
- c) Scale of unselfishness
- d) Scale of tolerance on frustration
- e) Plutchik Profile Index Emotions, which tests the following dimension of personality:

sociability, trust, and impossibility to control, caution, pessimism-depression, criticality,

self-control, aggression and social desirability.

The first four scales were constructed for purposes of this questionnaire, and consist of 20 units. The results are evaluated by summary of changes on units, with use of Likert type scale of 4 levels (a to d).

### Results

Means, standard deviations, and standard deviations for self reports of trust, willing for cooperation, unselfishness and frustration tolerance are present in the Table 1, together with t-test for significance.

According to this study, adolescents-refugees show greater lack of trust towards people ( $t=2.92$ ,  $p. 0.01$ ,  $df=38$ ) and significantly poorer frustration tolerance ( $t=1.21$ ,  $p. 005$ ,  $df=38$ ). Scores achieved on Plutchick's Emotion Profile Index are transformed, according to norms, in three categories: unsociable, avoiding contacts not found of being close to people.

Thus, partly developed trait have those who score between 0 to 40, normally developed trait scores from 40 to 60, and highly developed bipolar dimension considers scores from 60 to 100. Significance tested with Chi square is presented in the Table 2.

Statistically significant differences are found in dimensions of reproduction, incorporation, uncontrollability, self-protection, aggression and bias, all on the level.001 to.005 ( $df=2$ ). On dimension of deprivation, negativism and exploration there were no statistically significant differences found.

Refugee adolescents tend to avoid social contacts and close interpersonal relations, and behave less socially (Chi square=26.71,  $df=2$ ). Refugee adolescents have lack of trust in people less then local (Chi square=6.3,  $p<. 005$ ,  $df=2$ ). They do not take things and events for granted.

Refugee experience adolescents group tends towards stability and security and show less plasticity and adaptability then local adolescents (Chi square=18.44,  $p<. 001$ ,  $df=2$ )

Statistically significant differences are found in the dimension of self-protection too (Chi square=18.44,  $p<.001$ ). Refugee adolescents are more cautions, horrified, sensitive, frightened and anxious. They care for other people's opinion, while domicile adolescents are less anxious and cautious. Still, on dimension of deprivation (Chi square=1.4), negativism (Chi square=0,) and exploration (Chi square=0,  $df=2$ ) there was no statistical differences between the two groups. Both groups show increased depression and pessimism, have lower self-control and are less critical towards them.

Generally, refugee adolescents are more aggressive, show more extreme reactions, they are more passive and without life expectations, bitter and full of rage (Chi square=7.5,  $p<. 005$ ,  $df=2$ ) Refugee adolescents tend to have less socially desirable self evaluations then domicile ones (Chi square=20.94,  $p<. 001$ ,  $df=2$ ).

**TABLE 1.**

MEANS, STANDARD DEVIATIONS AND T-TEST FOR FOUR SUBSCALES THAT MEASURE THE ATTITUDE TOWARDS THE FUTURE

SCALE	REF-UGEEES	LOCAL	t-test
trust	10	7	2.92 **
frustration tolerance	3	4	1.21 *
willingness to help	14	14	
unselfishness	7	7	

Level of significance:

\*\* .001

\* .005

**TABLE 2.**

FREQUENCIES OF SUBJECTS THAT SCORED LOW NORMAL OR HIGH OF EACH DIMENSION OF WITH CHI-SQUARES COUNTED BETWEEN GROUPS

	REF- UGEES	LOCAL	
PIE di- mensions	low	normal	high
low	normal	high	Chi square
reproduc- tion	6	6	7
1	10	9	26.71**
incorpora- tion	5	2	12
2	5	12	6.3*
uncontrol- lability	13	4	4
8	6	6	18.44**
self-protect ion	6	1	13
8	7	6	18.44**
depriva- tion	6	2	12
6	5	9	1.4
negativism	10	5	5
10	5	5	0
exploration	16	2	2
16	2	2	0
aggression	5	5	10
2	10	8	7.5*
BIAS	10	2	8
3	8	9	20.94**

**Discussion**

Results obtained on the scale in consideration of trust of people show that refugee adolescents are less trustful to-

ward people than domicile ones, which means that refugee adolescents do not work through previous phases of development in order to resolve identity process. Refugee adolescents had experienced different traumas with existing capacity for understanding; they are no longer in the phase of idealization and omnipotence<sup>1,12</sup>. They understand how much they depend on the group and have need for reparation of the object, lack trust in their environment, but rather incline to isolation and show lesser degree of tolerance on frustration on mentioned scale. It demonstrates that they use regressive mechanisms of defense because of fear from relapse of frustration, causing destruction of self-structure, and that experience prevents them from trying to repair their self through relationship with the wider surroundings.

On the scale of readiness for cooperation and that of unselfishness between refugee adolescents and domicile ones there are no significant difference. It gives us hope that trauma after all had not destroyed their basic developing needs, although due to traumatic events they were stopped and deviated from the normal development.

On basis of the PIE test we discover the background of obtained results on above mentioned scales. Their distrust in people created by traumatic events led to unsociable behavior of refugee adolescents, registered in PIE test. They express pronounced striving for isolation and withdrawal from social surroundings, and do not make close interpersonal relations, which reconfirms that they stopped with their development. They have no need to exercise separation. There is an obvious fear not to reexperience disappointment in people. They have only selective friendship, refugees with refugees. One who had experienced an early trauma knows how much it hurts and believes that only adolescent

with the same experience can understand him. On the contrary, domicile adolescents show usual adolescent curiosity and need to associate, they are curious, impulsive, like surprises and incline to adventures.

Level of significance:

\*\* .001

\* .005

Domicile adolescent's work on their earlier phases of development in order to achieve individualization. Refugees, on the other hand, aspire to stability and security, they are less plastic and do not like changes, they constantly worry not to fall in any difficulties, especially in those they cannot overcome, keep the picture about themselves and are fixed to

the remaining of symbolic needs, as though they always check their position in relation to reality. They are scare, cautioned. Domicile adolescents incline to risk, because they do not have such traumatic experience which would stop them in their constant testing of separation from parents and seeking their place in wider environment. This community is in fact part of their self, which is not the case with refugee ones. Risk of separation from parents domicile adolescents accept and test in everyday life, while refugee adolescents avoid it.

This age of development even free from trauma is chaotic and disorganized, however, at the same time there is a huge need that in this chaos an adolescent finds new strong point in outside the family circle within the wider social environment, and those are their adolescent groups<sup>13,14</sup>. Refugee adolescents do not practice that. Seeing themselves in the future means to build a picture of a new member in the future social community. Experienced trauma, but also war stress, as a general everyday life, left the trace on the entire refugee adolescent population. There is no difference in obtained re-

sults relating to dimension of optimism-pessimism. Both groups are irreligious, nondependent, without any undertaking, liable to past authority because of material dependence, do not incline to criticism or refusal. Both groups do not plan future and are disorganized. The difference is in amount of rage which refugees openly express while domicile adolescents do not. Refugees feel they are socially unwelcome, while domicile one finds themselves in socially privileged position. This is their city, their grandparents. The environment is part of their self and social identity.

In traumatized families very often adolescents are the ones to overtake the role of adults, which can give an impression of good adaptation<sup>14,15</sup>. Unwilling to seek and accept any kind of psychological help, on the other hand they represents a »silent group«, very often ignored, therefore their vulnerability is neglected<sup>16,17</sup>.

### Conclusion

We can conclude that refugee trauma has influence on person's maturity. Traumatic experience slows down the process of individualization. Therefore we believe that more attention should be paid to this group within refugee psychological help in order to prevent further consequences of traumatic experience.

### REFERENCES

1. VIDOVIĆ, V., V. JUREŠA, V. RUDAN., Z. BUDANKO, J. ŠKRINJARIĆ, D. DEZAN, Coll. Antropol. 21 (1997) 269. — 2. GORDON R., R. WRAITH: International Handbook of Traumatic Stress Syndromes (Plenum Press, New York, 1993) 561. — 3. MACKSOUD, M., A. D. YREGROV, M. RAUNDALEN: International Handbook of traumatic Stress Syndromes (Plenum Press, New York, 1993). — 4. HOROWITZ, M., J. of Stress Response Syndromes (Northvale, J. Aronson, New York, 1986). — 5. MORO, L.J., V.

VIDOVIĆ: War Psychology and Psychiatry (GSSRH, Zagreb, 1992). — 6. VIDOVIĆ, V., N. BEGIĆ, LJ. MORO, T. FRANČIŠKOVIĆ, G. TOCILJ, Med. Jad. 23 (1993) 13. — 7. GILLILAND, M. K., S. M. ŠPOLJAR VRŽINA, V. RUDAN, Coll. Antropol. 19 (1995) 103. — 8. MARTIĆ BIOČINA, S., S. M. ŠPOLJAR VRŽINA, V. RUDAN, Coll. Antropol. 20 (1996) 301. — 9. RUDAN V., Coll. Antropol. 20 (1996) 149. — 10. CUFFE, S. P., J. of Am. Ac. of Child and Adol. Psy. 2 (1998). — 11. MC CLOSKEY, L. A., J. of Am. Ac. of Child and Adol. Psy. 1 (2000). — 12. NIKOLIĆ, S.: Mental Disorders in Children and Adolescents (Školska knjiga, Zagreb, 1988). — 13. KULENOVIĆ M., V. RUDAN, R. KRALJEVIĆ, Coll. Antropol. 18 (1994) 337. — 14. KULENOVIĆ, M., V. RUDAN, Z. BUDANKO, N. JOKIĆ, Coll. Antropol. 18 (1994) 329. — 15. BECKER D. F., J. of Am. Ac. of Child and Adol. Psy. 6 (1999). — 16. PYNOOS, R. S., K. NADER: International Handbook of Traumatic Stress Syndromes, (Plenum Press, New York, 1993). — 17. SACK, W. H., J. of Am. Ac. of Child and Adol. Psy. 9 (1999).

Primjenjene su 4 skale: skala povjerenja u ljude, skala spremnosti za suradnju, skala nesebičnosti i skala tolerancije na frustraciju konstruirane za potrebe ove studije i PIE test. Rezultati pokazuju značajnu razliku između ove dvije skupine adolescenata u interpersonalnom povjerenju, toleranciji na frustracije, načinu formiranja bliskih relacija, prilagodljivosti, opreznosti, gorčini i osjećaju socijalne po'eljnosti. Obije grupe iskazuju povišen nivo depresivnosti, pesimizam i slabu samokontrolu. To se mo'e djelomično shvatiti kao općenita značajka društva u poraću.

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UTJECAJ TRAUMATSKOG  
ISKUSTVA NA STAV PREMA  
BUDUĆNOSTI U ADOLESCENATA  
PROGNANIKA

#### SAŽETAK

Traumatsko iskustvo na mnogo načina utječe na osobnost. Posebice se to odnosi na adolescente koji se razvojnopravo nalaze u fazi razrješavanja problema identiteta.

U ovom istraživanju ispituje se utjecaj traumatskog iskustva na stavove prema budućnosti u dvije grupe adolescenata. Prvu grupu sačinjava 20 adolescenata prognanika iz Istočne Slavonije koji su zbog rata bili smješteni u riječkoj regiji sa svojim obiteljima tijekom šest godina. Drugu grupu sačinjava 20 adolescenata lokalnog stanovništva koji su ratnim zbivanjima bili pogođeni samo posredno.