

## **ANXIETY IN THE NARRATIVES OF THE DISPLACED BY THE WAR POPULATION**

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### **Abstract:**

1908 August war was short but claimed many lives. Thousands have been displaced due to combat and bombing. Separation from the native places had a long lasting and severe effect on the well-being of population. Qualitative study was carried out to describe and measure the emotional reaction to war and displacement. Analysis of 5 minutes length narratives of the displaced population registered after 10 and 15 months from displacement by Gottshalk-Gleser method revealed high level of six types of anxiety measured by scales. The comparison of anxiety scores over time points at the persistence of negative emotional state induced by the war and at the importance of displacement, reflected both in number of references to displacement and separation anxiety scale scores.

**Key words:** **Displacement:** *war, anxiety, separation anxiety, place attachment, well-being*

### **1. Introduction**

Last decade witnessed dramatic increase of displaced population over the world, turning it into one of the top concerns of international politics. In 2017 the number of forced migrants in the world amounted to 65.6 million, among them more than half, 36.627 were internally displaced, these are people who stayed within official borders of their countries (UNCHR,2017). Displacement can be forced or volunteer. While voluntary relocation is often accompanied by positive changes (e.g.

upward mobility, economic gains) and can be planned, forced relocation is mostly sudden and is associated with worsened living conditions and well-being.

A forced migration is defined as “a migratory movement in which element of coercion exists, including threats to life and livelihood, whether arising from natural or man-made causes” (International Organization for Migration, 2011, p.39).

The Russian-Georgian war of August 2008, was a little war, lasting only 5 days but “nevertheless a little war that shook the world” (Asmus, 2010. p.4). It caused serious destruction and loss of human lives: Around 850 persons died and more than 100,000 fled their homes (IIFFMCG, 2009).

Flight, exposure to conflict related violence, witnessing death, mutilation and destruction induces stress reaction and triggers anxiety that consequently affects health outcomes (Teerawichitchainan & Korinek, 2012)). The impact of war related events on both mental and somatic health among affected by ethnic wars Georgian population is well documented through self-report assessments of health by standard measures (Report, 2012; Saxon, et al, 2017; Comellas, et al, 2015). Much less described or measured is affective-emotional reaction of population on events caused by the war.

Displacement was the experience that was shared by the majority of population. It is linked with disruption to place attachment. Place attachment involves positively experienced bonds between individuals and their socio-physical environment. Importance of place attachment is determined by its contribution to the formation, maintenance and preservation of the identity of a person, group, or culture (Riley, 1992). Hence individual, group and collective self-definition and integrity in a considerable degree rests on embeddings in the environment (Low., & Altman, 1992). Places are often experienced as extensions of self and are only fully realized when they have been disrupted (Brown., & Perkins, 1992).

Relocation is linked with depression and other forms of psychological distress (e.g. Alexopoulos, 2005). Craving to return to homeland, grieving on what was lost, displacement, were most often named complaints of displaced by war persons in Georgia (Report, 2012).

Exposure to combat and displacement are considered as severe traumatic life events, which generally are accompanied by high levels of anxiety (Palmer et al, 2016).

Cambridge dictionary defines anxiety as “uncomfortable feeling of nervousness or worry about something that is happening or might happen in future”.

## **2. Aim of the study**

Events causing disruption and relocation of whole communities happen rarely in the context of one country, although are not seldom worldwide. War causes drastic changes to whole communities, disrupting and jeopardizing the lives of hundreds and thousands of its members. Effect of war is multiple and complex. It invariably changes affective-emotional states of the individuals involved in it (Palmer et al, 2016) , especially of those who experience bombing, witness atrocities, are exposed to the threat to life, see dead and wounded, loose the members of the family and loved ones. Impact of war is aggravated by displacement, that entails losing houses, farm animals, small businesses, plots and gardens, but also objects, photos, graves, views and water springs, all that connects persons with their past (Cutchin, 2001). Due to its magnitude, unique character and effect on well-being, any such event demands special attention, description and analyses.

The analysis reported in the article is a part of the study: "Forced Migrants Living in Post-Conflict Situations: Social Networks and Livelihood strategies" supported by National Science Foundation, USA. Article presents description of affective-emotional state of the individuals who experienced the war and displacement in 2008 war, analyses the content of verbal communication on respondents' interesting or dramatic life event and measures magnitude and stability of different types of anxiety manifested in the stories of displaced population. Death, mutilation, separation, shame, guilt, diffuse scores and aggregated score of overall anxiety are registered twice; Stability of anxiety and its scope in regard to the exposure to different war-related experiences are measured. The effect of background characteristics, such as age and sex of the respondents, exposure to death, wounding and combat are also examined.

### **3. Method and procedure**

Article describes the results of the qualitative part of the study based on Gottschalk-Gleser method (Gottschalk and Gleser, 1969) and analyzes the verbal samples obtained from the displaced population.

Gottschalk and Gleser instrument makes possible to measure magnitude of a mental or emotional state by content analysis of verbal material elicited in the least obtrusive way?, as interviewer before taking the speech sample informs respondents, that would not neither put a question or respond to any until completion of 5 minutes.

Displaced as a result of the 2008 August War 60 persons, residing in four settlements specially built for them were recruited and visited twice, after 10 and 15 months from displacement.

Respondents received a standard instruction to talk 5 minutes about interesting or dramatic event of their lives. The instruction is supposed to elicit speech approximating free association and minimizing the influence of interviewer's behavior in determining speech content. Videotaped speech samples were transcribed.

Five researchers content-analyzed the transcribed texts, identified the topics of the narratives and subjected the text to analysis according to Gottschalk-Gleser scales.

Strictly following the manual (Gottschalk-Gleser, 1969) scores were standardized on 100 words and constant .50 was added to all scores to make different length of samples comparable. Thus standardization of scores permits the comparison of results between the respondents as well as between the samples obtained from the same respondents over time. The scales has been tested on Georgian population (Hentschel, et al. 1996).

Anxiety scale taps subjective awareness of the anxiety and classifies anxiety into six types: death, mutilation, separation, guilt, shame and diffuse or non-specific anxiety. Grammatical clause serves as the unit of content analysis. Scoring of narratives on affective scales rests on the following assumptions: Everyday language besides deliberately intended messages also contains indicators of affective state of the speaker; Statements reflect an equivalent amount of current anxiety whether they pertain to the past, present or future; The more anxiety person feels, more is the probability that he/she will speak about it directly, referring to him/herself, rather than indirectly, referring to others or even inanimate things. Therefore more weight is ascribed to the direct indications of anxiety;

Denials of anxiety are also scored as they serve as manifestations of existing anxiety; subtypes of anxiety are of equivalent importance to the magnitude of overall anxiety, therefore the mean scores of all six types are summed up to obtain measure of total anxiety (Gottshalk and Gleser, 1969).

Five researchers independently scored the same verbal samples. The group discussion determined the final scores when interscorer reliability reached 0.80 as is considered a standard (Viney, 1983).

Verbal samples were taken from 60 persons, but only 43 respondents, 44.2 percent male and 55.8 percent female satisfied the requirement of minimum 100 words of narrative for scoring speech samples in both rounds. So that 86 samples were scored. Half of interviews were taken at the first, i.e. June, 2009 and the second half at the second, i.e. November, 2009 round of enquiry.

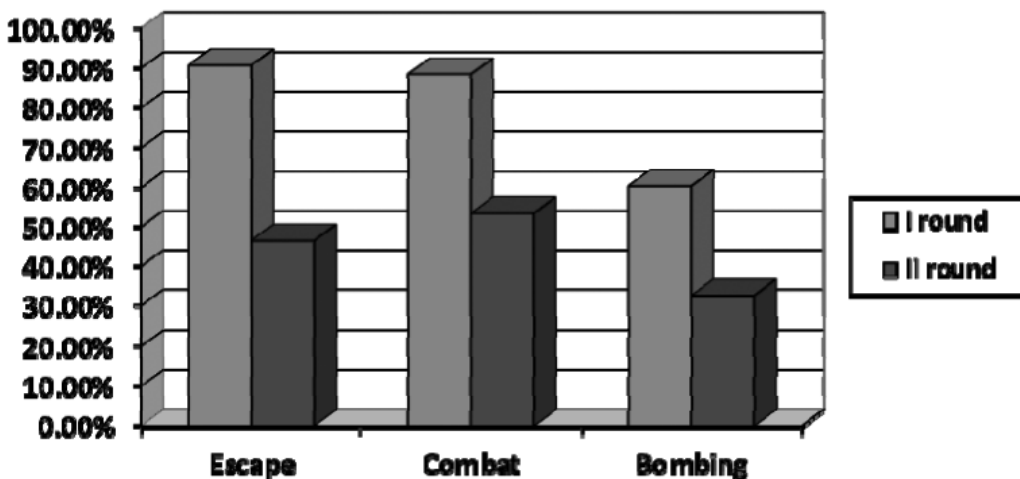
## 4. Results

### 4.1. Topics

Given the freedom to talk about any dramatic or interesting event of their lives respondents mostly choose to talk about the war, although narratives often referred to more than one topic and covered four time periods: time before the beginning of ethnic tension, i.e. before nineties of XX century, period of tensions, 5 days of war and period after the displacement. The topics changed over time, majority (60.5 percent) recalled the different, 32.6 percent somewhat different and 7.0 percent exactly similar episodes in the two rounds.

War related experiences were rather similar for all the respondents. All had to escape, though threats and difficulties associated with leaving native places were different. 88.1 percent experienced bombing, 66.7 percent was exposed to direct combat and 47.6 percent saw the dead and wounded

If in the first round of the field work all the narratives to some degree covered war – escape, combat or bombing, in the second round the share of those who talked about the war decreased to 67.4 percent. At the same time narratives faded, became less laden with emotions.



Gr. 1

War related topics in narratives of the first and the second rounds

N. Sumbadze, B. Mitchenek, J. Regulska, A. Kitiashvili, E. Pirtskalava, T. Makharadze, M. Maisuradze

Exposure to war was linked with narrative topics. Escape seems to be the most dramatic and experienced by everyone event, as 90.7 percent of respondents talked about it after 10 and 46.5 percent after 15 months.

Respondents were accustomed to tensions and shootings, but did not expect war and displacement.

*We did not have a slightest idea about probability of war. Ossetian villages were warned, people were leaving, taking their furniture, all the possessions, and we were only laughing at them.- they are mad, what they are doing? We had no idea what was to happen (51 years old male).*

Almost entire Georgian population had to flee, even those whose villages were not affected by bombing or battle. Villagers did not have much time, they had to escape quickly and to use any means for it. They were confused, not knowing what to take and what to do with the cattle, domestic and farm animals. Abandonment of animals haunted them for months.

*Two days would not pass if I do not recall this, regret and cry. I remember my house, everything I had, my fingerprints on everything. I remember how the bullets were showering, how airplanes flew in...My neighbors were looking for me, but I was collecting hens, cows and did not know what to do with them, to leave the door open or lock them. I was looking for my dog and was saying that would not leave the place, that I prefer to die here.(48 years old female).*

*I did not want to leave. But all the villages were empty and the neighbors did not let me to stay, I was crying, bagging them to leave me, was in hysterics, rushed in and out. I wanted to collect my husband's and son's cloths and to find the documents, but was so agitated that could not manage to do anything (48 years old female).*

People are lamenting of not only loosing houses and animals, but also leaving gardens, water springs and landscapes.

*I am thinking all the time about our valley, our churches, nature, woods and water springs... In my dreams I am always there (28 years old male).*

Despite to the risk to the life many villagers were refusing to leave their houses and left only due to the insistence of other villagers.

Escape was difficult, more so for those having disabled or wounded family members.

*I filled my car with the women, the road was all bombed, all the neighborhood was under fire, the electricity poles were burning, on the road the bomb has been exploded, the big tree was uprooted and nearby the car was standing with dead people inside (50 years old male).*

Those who later managed to return to see what has happened to their village were shocked.

*I went to the village. Everything is burned, the houses are burned, all the wooden materials are taken, the roof timber and bricks are taken. The farm animals are taken, what else can I say? Everything is destroyed; there are neither gardens nor houses left. Everything people were building during all their lives is lost. I do not know how we are still sane. When I saw all these I was not crying, I was howling (43 years old male).*

Combat was described in 92.9 percent of narratives in the first and in 53.6 percent in the second round. Population of war affected region during the years of ethnic strife was exposed to shooting, shelling, saw wounded and dead, lost the loved ones.

*There has never been a calm life in Tamarasheni for the last 20 years. We always were expecting death, even when we went out in the yard there were shootings. (47 years old female).*

If population was accustomed to the combat, the bombing was a novel and the most frightening experience. Among those who experienced bombing 64.9 percent talked about it in the first and 35.1 percent in the second round. Bombing had a devastating effect, claiming the lives and injuring the population.

*The windows were cracking from shootings. We were sitting in the kitchen and my son said that he would go and have a look how many windows were broken. He made three steps and the bomb exploded. I saw him on the floor with sand and earth on him....I rushed and dragged him in and saw that all his back was open and bleeding, the bullet entered from one side and went out from the other side...I became confused, I did not know what to do, could not find water, bandage, spirit. I was just repeating "don't be afraid, don't be afraid"...the emergency took us to Kurta, where he was operated, they took bullet out from his back. The boy was in the ward, and with each bombing I was bagging the personnel to take him down, in a bunker. When bombings stopped we took him up, when resumed took him down, this was tormenting (60 years old female).*

## 4.2. Anxiety

Analyses of narratives by the Gottshalk-Glesser Anxiety Scale revealed high level of anxiety, mean of total scores of two rounds being 4.41 (SD 0.79). Total Anxiety score is the mean of the sums of the following six subscales constituting Anxiety Scale (Gottshalk-Gleser, 1969).

1. Death anxiety measures reference to death, dying, threats of death or anxiety to death by or occurring to: self, animate others, inanimate objects destroyed or to denial of death anxiety ( $M$  2.46;  $SD$  .73).

*I looked up and saw the airplane on fire. It was falling down and I thought to turn off the road, as the airplane could explode and fell down on me. I stopped the car and my wife and I got out of the it. In a less than 5 minutes, we looked up and saw that the pilot was ejected from the airplane (35 years old female).*

2. Mutilation anxiety measures reference to injury, physical damage, or anxiety about injury or threat of such experience by occurring to: self, animate others, inanimate objects or denial of such anxiety ( $M$  1.49;  $SD$  .68).

3. Separation anxiety measures references to desertion, abandonment, loneliness, ostracism, loss of support, loss of love or love object, or threat of such experience occurring to self, animate others, inanimate objects, or denial of such threat ( $M$  2.57;  $SD$  .88).

*I did not want to leave. But all the villages were empty and the neighbors did not let me to stay, I was crying, bagging them to leave me, was in hysterics, rushed in and out. I wanted to collect my*

*husband's and son's cloths and to find the documents, but was so agitated that could not manage to do anything (48 years old female).*

4. Guilt anxiety measures references to adverse criticism, abuse, condemnation, moral disapproval, guilt or threat of such experience by self, animate others and denial of such a treat ( $M$  0.98;  $SD$  .37).

5. Shame anxiety measures references to ridicule, inadequacy, shame, embarrassment, humiliation, over-exposure of deficiencies or private details, or threat of such experiences by self, animate others and denial of such threats ( $M$  1.60;  $SD$  .58).

6. Diffuse or nonspecific anxiety references to anxiety or fear without distinguishing type or source of anxiety by self, animate others and denial of such anxiety ( $M$  2.19;  $SD$  .98).

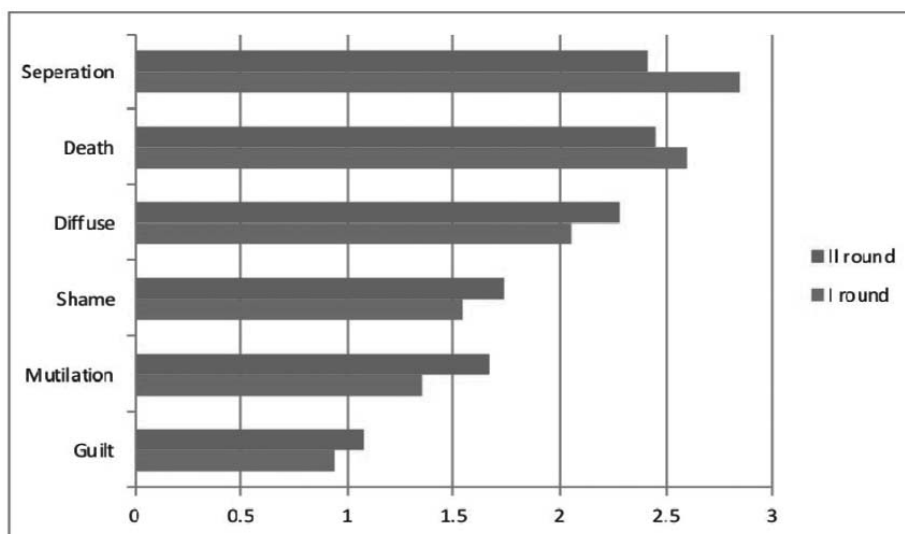
*Due to everything that I and my children suffered, I was ready to fight for everything, people thought I was insane, this was neurosis. Then my legs began to tremble, then hands. I was sitting at night and thinking that airplanes were coming to bomb us (37 years old female).*

Thus average in two rounds scores are the highest for Separation anxiety followed by Death anxiety and Diffuse anxiety scores.

Scores of Separation anxiety are the highest in the first ( $M$  2.85;  $SD$  .78) and the second highest ( $M$  2.26;  $Sd$  .89) in the second round. Respondents spoke of leaving the native places, houses and possessions, plots and gardens, animals and objects, closely tied to their memories.

Average for two rounds scores on Shame, Mutilation and Guilt anxieties are much lower.

Anxiety remained high even after 15 months from displacement, but over time the narratives became less emotionally laden. This reflected in the significant decrease of total anxiety score from 4.38 ( $SD$  4.84) in the first to 3.82 ( $SD$  4.54) in the second round ( $F$  4.06;  $df$  1;  $p < .05$ ). The decrease is mostly accounted by decrease in the score of separation anxiety from 2.85 ( $SD$ ; .78) to 2.26 ( $SD$  .89) ( $F$  9.61;  $df$  1;  $p < .005$ )



**Gr. 2**

**Mean Anxiety scores in the first and the second rounds**

Anxiety scores were not linked to age or gender of the respondents. As for the experiences, diffuse anxiety was associated with experience of combat ( $F 10.06$ ;  $df 1$ ;  $p < .005$ ) and exposure to death ( $F 4.83$ ;  $df 1$ ;  $p < .05$ ). Those who did not experience combat had lower diffuse anxiety scores ( $M 1.95$ ;  $SD .79$ ), than those who witnessed the battle ( $M 2.61$ ;  $SD .98$ ). The similar pattern was found in case of exposure to death and wounding ( $M 1.95$ ;  $SD .80$ ) of those not witnessing death, compared to those who witnessed it ( $M 2.40$ ;  $SD .97$ ).

It can be definitely said that war and displacement caused high anxiety. Especially great was the effect on separation anxiety. The time decreased overall impact, reflected in decrease of total anxiety score, which is accounted by decrease of separation anxiety score, although anxiety scores still remained high.

## 5. Discussion

Anxiety experienced by our respondents was quite high, even higher than anxiety experienced by soldiers of 1992 ethnic conflict in Georgia (Hentshschel, et al., 1996). Results of our study are in line with conclusions accumulated in literature and demonstrate severe and long lasting effect of war on individuals and community. Negative events not only create a negative emotional state, but also can trigger mental and somatic disturbances, affect the course of illness and treatment results (Henzen-Niejodek., Gottsschalk., & Januszek, 1999). Traumatic event induces anxiety which often accompanies stress (e.g. Baum & Fleming, 1993; Jordan, et al., 2004; Elbedour et al., 2007). Stress reduces immune functioning directly or indirectly, through activating harmful behaviors like smoking, drinking, etc. Memories of stressful events have the similar to actual events impact (Straub, 2015). Data of our qualitative study showed persistence of both, of a war related events in the memories of individuals and of a negative emotional state associated with it.

Survey of WHO Georgia (Endrelein, U. (2009) showed that the majority of conflict affected population can be considered as having mental problems, suffering depression, anxiety, stress disorders, sleeping problems and PTSD. Effect of 2008 year war on mental and somatic health is still apparent after years following it (Saxon, et al, 2017; Comellas, et al, 2015).

The importance of specific war experiences – exposure to combat and death on emotional state, documented in our study is in line with similar results obtained elsewhere. Prevalence of PTSD among US troops varied from 10 percent among soldiers who did not see combat to 30 percent among those who experienced it (Dohrenwend, et al., 2006; Hoge, et al., 2007).

As a result of war all our respondents had to abandon their villages. Salience of displacement was reflected in the number of narratives about flight and the amount of anxiety associated with it. Decrease in scores on separation anxiety can be taken as the signs of adaptation to new surrounding and life conditions.

With dramatic increase of displacement increased the research interest towards place attachment. The recently coined concept of “aging-in -place” , the ability to remain in current setting as one ages, maintaining competence and control over environment (Cutchin, 2003) underlines importance of accustomed physical environment for elderly. Forced displacement is linked with loosing control over own fate and life and in this way contributes to the feeling of powerlessness



in person. The study of displaced by the war elderly in Georgia showed prevalence of depression, nervousness, anxiety and stress, grief and hopelessness (Report 2012).

## 6. Conclusions

Inner, psychological state of the individual has a decisive role on well-being. It is crucial when a person is confronted with necessity to adjust to a novel, challenging situation. Results of the study definitely pointed to severity and persistence of negative emotional state induced by war. Due to its holistic, multi-faceted and complex nature displacement poses great threat to the well-being of individual. Tearing connections with accustomed environment results in feeling of powerlessness and poses the threat to personal integrity. Displacement affected almost all the population and induced the most severe reaction in them.

The study pointed to the need even after the decade since the war to continue psychological support of affected population. Especially useful can prove community oriented interventions.

Severity of the effect of displacement and its prominence in the world renders necessary to study deeply impact that displacement has on an individual and community, to investigate its differential effect on identity formation and maintenance among youth, middle aged and elderly, women and men and based on evidence to plan and implement effective preventive measures that will secure and foster individual and group identity and defend from isolation.

## References

- Alexopoulos, G.S. (2005). Depression in the elderly. *Lancet*, 365 (9475), 1961-7.
- Asmus,R., (2010). *A little war that Shook the World*. Basingstone and N.Y: Balgrave Macmillan.
- Baum, A., & Fleming,I. (1993). Implications of psychological research on stress and technological accidents. *American Psychologist*,48,665-672.
- Brown,B.B., & Perkins, D.D. (1992).Disruption in place attachment. In: In S.M.Low & I.Altman, eds. *Place attachment* .Plenium Press:N.Y & London 279-304.
- Comellas, R.M., Makhashvili, N., Chikovani, I., Patel, V, McKee,M., Bisson, J., & Roberts,B. (2015). patterns of somatic distress among conflict-affected persons in the Republic of Georgia. *Journal of psychosomatic Research*, vol.78, Iss. 5, 466-471.
- Cutchin,M.P. (2001). Deweyan integration: movingbeyond place attachment in elderly migration theory. *The International Journal of Aging and Human Development*, 52, 29-44.
- Cutchin, M.P. (2003). The process of mediating aging-in-place: a theoretical and empirically based model. *Social Science & medicine*, 57, 1077-1090.
- Dohrenwend, B.P., Turner,J.B., Turse,N.A., Adams,B.G., Koenen, K.C., Marshall,R. (2006). The psychological risks of Vietnam for U.S. veterans: A revisit with new data and methods. *Science*, 255, 946-956.
- Elbedour,S., Onwuegbuizie, A.j., Ghanam,J., Whitcome, J.A., & Abu Hein, F. (2007). Post –traumatic stress disorder, depression, and anxiety among Gaza Strip adolescents in the wake of the second uprising (Infitada). *Child Abuse and Neglect*, 31 (&), 719-729.
- Endrelein, U. (2009). Mental health and psycho-social support for conflict affected population. Results of WHO Georgia study. Power point presentation.

- Gottshalk, L., & Gleser, G.C. (1969). *The measurement of psychological states through the content analysis of verbal behavior*. Berkley, CA:Univ. of California Press.
- Hentschel, U., Sumbadze, N., Sadzaglishvili, S., Mamulashvili, M., and Ulumberashvili, S. (1996). Deffensive and Affective-emotional reactions to war: The Abkhazian war as reflected in people's subjective reactions. *Psychological Reports*, 78.135-143.
- Hezen-Niejodek, I., Gottschalk, L.A., & Januszek, M. (1999). Anxiety and hope during the course of three different medical illnesses: A longitudinal study. *Psychotherapy and Psychosomatics*.68, 304-312.
- Hoge, C.W., Terhakopian, A., Castro, C.A., Messer, S.C., & Engel, C.C. (2007). Association of post-traumatic stress disorder with somatic symptoms, health care visits, and absenteeism among Iraq War veterans. *American Journal of Psychiatry*, 164, 150-153.
- IIFMCG (2009). Independent International Fact-Finding Mission on the Conflict in Georgia.
- IOM (2011). Glossary on migration, 2<sup>nd</sup> ed.
- Jordan, N.N., Hoge, C.W., Tobler, S.K., Wells, J., Dydek, G.J., Egerton, W.E. (2004). Mental health impact of 9/11 pentagon attack: Validation of rapid assessment tool. *American Journal of Preventive medicine*, 26 (4), 284-293.
- Low, S.M., and Altman, I. (1992). Place attachment: a Conceptual Inquiry. In S.M.Low & I.Altman, eds. Place attachment .Plenium Press:N.Y & London.
- Palmer, M, Nguyen, G, Mitra, S, Mout, D, 7Groce, N. ( 2016). The long-term impact of war on health. Households in Conflict network, working paper 216.
- Report (2012). Johns Hopkins Bloomberg school of public health and the Institute for policy studies Report. "Aging in displacement: assessing health status of displaced older adults in the Republic of Georgia".
- Riley, R.B. (1992). Attachment to the ordinary landscape. In: In S.M.Low & I.Altman, eds. Place attachment .Plenium Press:N.Y & London 13-36.
- Saxon, L., Makhashvili, N., Chikovani, I., Seguin, M (2017). Copying strategies and mental health outcomes of conflict affected persons in the Republic of Georgia. *Epidemiology and Psychiatric Sciences*, vol.26, Iss.3 276-286.
- Straub, R. (2014). Health psychology. 4<sup>th</sup> ed. Worth Publishers.
- Teerawichitchainan, B, & Korinek, K. (2012). The long term impact of war on health and well being in Northern Vietnam:some glimpses from recent survey. *Social Science and Medicine*, 74, 1995-2004.
- UNCHR. (2017). Global Report 2016. [reporting.unhcr.org/sites/default/files/gr2016/book\\_Gr\\_2016\\_english\\_complete.pdf](https://reporting.unhcr.org/sites/default/files/gr2016/book_Gr_2016_english_complete.pdf) last accessed April, 27, 2018.