

Chapter 5 – BUILDING RESILIENCE IN CIVILIAN POPULATIONS

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The topic is building resilience in civilian populations – a difficult and multi-faceted topic due, in part, to the fact that it is impossible to reproduce what’s being done elsewhere. We largely focus on those who have experienced combat in the Northern Caucasus. For three years, we were engaged in the Chechnya War from 1994 – 1996, followed by a second war from 1999 – 2004. We can talk from firsthand experience about how difficult it is to form resilience, to resist hardships (note that we don’t have the same exact term in Russian, our term is narrower in meaning). Today, Russia is a multi-ethnic republic. Chechnya is part of the Russian Federation. Grozny, the capital of Chechnya used to be mostly indigenous Russian, but it is not anymore. Tremendous changes in the populations changed that, with 250,000 people lost before the first war in 1994.

After the disintegration of the Soviet Union, separatist movements appeared in Chechnya. They were agitating people with nationalistic propaganda and talk of independence. Russians, other ethnic groups, including Jews, were pushed out with threats, cruel acts and murder even before the first Chechen war. People were inspired by the notion of a new republic because they had initial resources, including oil that could provide wealth – but didn’t have labour (a key component). Chechnya has mineral resources but needed specialists to extract these. Currently some indigenous Chechen cultural traditions are being restored and hopefully this will help restore peace and “normal” behaviour. The conflict in Chechnya is not new – even back in the 18th century, Chechnya was a difficult region! More recently, there were attempts to help Chechnya before 1994.

Conflict is far from over in Chechnya. Before the war, separatists preyed on Chechnya’s ethnic Russians. Since the war, there has been a hard time restoring normalcy. Several hundred thousand Chechens live in Russia, in Moscow and St Petersburg. They are not part of the conflicts, not agitators. Chechnya was badly damaged in the war. And Grozny, like many other towns, was completely destroyed. After the first war, Chechens came back to Grozny and tried to restore it. People were deprived of safety, habitation, secure income, good food and water. 300,000 Chechens tried to escape and moved to neighbouring Ingushetia, staying there in refugee camps for 5 years. Due to the trauma, the loss of infrastructure (electricity, water), broken family ties and scarce food, some family members became refugees, and some left and settled in Scandinavia and Belgium. Many of those individuals have no special hope or desire to return, based on my conversations, because it won’t be restored as before. The conditions were really difficult. Our survey of Chechens in Grozny and Gudermes produced statistics on the incidence of various experiences related to trauma. This survey indicated that 16.7% of males and 18.5% of females experienced direct and real threats to life, 5.1% of males and 0.7% of females experienced bullet injuries and/or mine wounds, 0.7% of males and 0.7% of females witnessed violent death and 3.3% of males experienced physical violence and torture.

Akhmad Kadyrov participated in the first Chechen War as an insurgent. In the second war, he sided with the federal forces. He forbade the mullahs, the religious authorities/Muslim clerics, to visit the schools and incite the teenagers to go to the mountains and take up arms and go to war with the federal forces. The militants acted through the mosques. The Chechen Muslim community is not generally that radical in Chechnya. Kadyrov forbade supporting the insurgents and was quite effective as, in general, youths indeed didn’t replenish the ranks of the insurgents. He became president in 2002. When Chechnya was well on the way to recovery (hospitals, schools starting to work), he was assassinated in a stadium bombing. His son, Ramzan, took over from him. He is continuing his father’s recovery policies.

Life is getting back to normal, thanks to the constructive attitude of the Chechen community. The local authorities, in an unprecedented manner not seen in the West, acted within this society's traditional hierarchal structure (i.e., obedience to elders) and are slowly sorting things out. The measures used by those in power might be tough, and might not conform to democracy, but they're resurrecting the Chechen way of life. The economy is improving. The need for humanitarian aid is decreasing. People have received compensation for lost property and pensions.

As medical doctors, we try to help people and need to know the truth and not the official information. To get reliable information, we conduct our own studies. In 2002, we conducted surveys in Chechnya in Grozny and other small towns that assessed the incidence of threats to life, injuries, witnessing violent death, physical violence, torture, relatives' violent deaths and disappearances, divorces, witnessing of homes destroyed, psychological trauma, and other events. We performed these surveys in rural and urban areas and also surveyed former residents of Chechnya, etc., in 2002, 2004, 2006 and 2008 in an attempt to quantify the prevalence of mental disorders. We assessed the incidence of sub-clinical mental disorders and pronounced mental disorders using a general mental health questionnaire (GHQ-28). In 2002 (a year that saw high fatalities), we found that 77.3% of the respondents exhibited sub-clinical psychological disorders and 9% exhibited pronounced disorders. In 2004 (the year marked by the violent capture of trains and the Moscow theatre siege, etc.), 69.7% of the respondents exhibited sub-clinical disorders and 6% exhibited pronounced disorders. In 2006, when active combat stopped, 58.9% of the respondents exhibited sub-clinical disorders and 4.4% exhibited pronounced disorders and in 2008 (marked by limited conflict in individual areas, especially in mountainous areas) 41.7% of the respondents exhibited sub-clinical disorders and 1.4% pronounced disorders. We found that women, the creative part of society, started the Chechen recovery.

We cooperated with specialists all those years to mitigate language and cultural barriers and make it possible for us to mix with the local population and help them. This was essential, as we needed to influence the entire community. However, we could not communicate with common Chechens. There is a very complex social hierarchy there. Traditionally in Chechnya, senior citizens are considered to be the masters and they are the most important members of the family, e.g., the senior brother has authority over the sisters. War disrupted those values, but the return to peace has brought things closer to "normal". In 2007, when there were still many destroyed buildings, the hospital had not yet been restored.

Many psychologists in Moscow and St Petersburg have studied PTSD among Chechens, the incidence of which is: 31.1% (2002), 30.4% (2004), 25.2% (2006), and 24.9% (2008) versus 3.9% for the control group. The current rate of PTSD is 5.1% (assessed using the Munich survey and based on a good sample). We did follow-up questioning, focusing on youth and college students. These individuals were probably not belligerents during the war, they did not have destructive motives and traumatizing factors affected them less. Only 4% of the teenagers we questioned who returned from the refugee camps developed PTSD. They are not politically motivated, but simply want an education and a job. The conflict in Chechnya was viewed as being between the federal government and the indigenous Chechen population. This research was conducted with Dr. Idrisov collaborating with Professor Krasnov. The World Health Organization assisted with the surveys. This team is now focused on Georgia.

The mental health survey we conducted from 2002 to 2008 involved 4600 people from five districts, Grozny, Gudermes, Urus-Martan, etc. The control group came from the Nadterechnaya district where there were no major battles. Indicators of distress according to the general health questionnaire (GHQ-28) showed a slowdown from 86% (2002) to 75% (2004) to 65% (2006) and 56.9% in 2008. The control group exhibited fewer indicators of distress: 44% (2004), 44.5% (2006) and 43.1% (2008). Those directly involved with conflict showed higher figures. The stigma attached to having a psychiatric disorder is substantial. Individuals are afraid to apply for help from a psychiatrist (e.g., a girl won't typically get married if she sees a psychiatrist and it is known in her community; she can only see someone in the general ward). Only 4% of patients with non-psychotic psychiatric disorders applied to psychiatrists –

others applied for help from primary health care or healers. For this reason, a medical network was set up to identify patients with mental health problems at the primary health care level. Medical and psychological approaches do play a modest role in recovery and reconciliation processes. We provide medical and psychological support. In addition, new clinics have been built.

We cannot use western democratic models in Chechnya, Pakistan and Gaza. The people are smart and have resources; they are not backward people. Conflict was predictable there. The tendency for the situation to improve was observed, but it was not obvious until the reestablishment of a strong local authority, and law and order. It was not very democratic at the beginning, but it was efficient. The rules and habits of peaceful life have been enforced under threat of repression (e.g., by Kadyrov). The social model of “kinship” was better for Chechens than democracy. Mullahs often provide counselling for people (people would rather go to the mosque rather than go to a doctor). A visitor to Chechnya first encounters historic ethnic traditions, in spite of modern education and communications systems (internet). We have the “Greatest Mosque in Europe” (the largest in Europe) in Chechnya (in Grozny). Note: this mosque, also known as the “Heart of Chechnya Mosque” was built in memory of Kadyrov and opened in 2008.

5.1 DISCUSSION

(Jongman) The name of Grozny has been changed – is this not officially recognized by Russia? In Tolstoy’s time, they were engaged in the Crimean War. The towns described by Tolstoy were used to protect the northern part of the empire. The name Grozny indicated the threat of aggression and it was necessary to counter the threat. Grozny can be translated as threat or threatening.

(Speckhard) In terms of working with the local structure to promote mental health, is there a push to work with the local mullahs? In terms of religious traditions – the Muslim tradition is not as strong or as deeply rooted as Christianity. When the Caucasus was conquered in the 19th century, many Muslims immigrated to Turkey in order to stay Muslim and not convert to Christianity. The number of Christians in Grozny is very small, though, because eventually they were squeezed out. A priest in Grozny was killed at the end of the war, in an attempt to sustain the conflict. People come to the mullahs for a variety of reasons. In the local culture, it is considered normal for the mullahs to render health aid and drive the “devils” out of the people (psychological disorders are “jinns” or devils). We try to give medical aid, but mullahs also help people cope with various conditions. We need well-educated clergy who understand the situation and the value of therapeutic conversation, and who will thus advise people to go see a professional medical doctor. In terms of education, they are trying to get workers back from Russia (teachers, etc.). In Chechnya, the closer the interaction with universities and science, the better the situation will be.

(Danielsen) Are there lots of types of psycho-trauma? Are you aware of gender related violence, rape, in the Chechen conflict? In the Northern Caucasus culture, violence against young girls or women would be punished severely. But in military conflict, men do not avoid engaging in such criminal activity. The limits of what’s acceptable change (during war) and ethical norms are thrown away. They forget that rape is a criminal activity. This is true of every war, even wars raged for noble causes, even wars for liberation. Participants of war rationalize that “we have our cause, our transgressors are held responsible”. In Chechnya, it is illegal and trials are held. If transgressors are found and they have evidence (for rape), they are tried in court. Blood is everywhere, in times of conflict, it happens. This is one of the reasons Akhmad Kadyrov viewed it a priority after the war to restore law and order, hospitals and universities and normal social structures.

Currently, the populations facing the greatest difficulties are women and men between 40 – 60 years of age because they can’t find jobs. In Russia, at 60, a man can apply for a pension (55 for women). Women have a better chance to get a job; for example, they can find jobs as cleaners in hospitals, but men are really in trouble. There is 50% unemployment in this demographic. Those who aren’t educated or members of a

certain profession (teacher, etc.) are particularly vulnerable. They cannot get a job in the militia or with the police. In many cases, their families end up supporting them.

(Wientjes) I would like to say something about rape. In the Netherlands, to obtain a Ph.D., you must make a series of statements. Rape in conflict must be considered warfare, a crime of war. As a psycho-physiologist, I can say why rape is occurring. Testosterone levels (important for survival) in war are 40 – 50 times normal – this produces a strong drive to fight, but also to be sexually active. Another consideration is the evolutionary benefit – males, in combat situations, when their lives are at risk have one option (or imperative) – to produce offspring and that is why they rape women.

(Danielsen) Raping women is harmful for civil society. Soldiers are ordered to rape to demolish social structure. It's been a regular practice in warfare. Russian troops in Germany in World War Two were ordered to rape and raped a lot of women. Then they stopped when they thought it would be unpopular with the US. Rape is sometimes used as a military strategy. It is a popular way of destroying the social structure (examples are Algeria and the Balkans). I cannot answer, but I will comment. The cruel fact is widely known that during World War II (initially perceived as a patriotic war in Russia, since Hitler invaded Russia), Germans were decent at first but that changed and that spurred guerrilla warfare against the Hitlerites. Some leaders punished rape committed by their troops and others turned a “blind eye” – much depended on the commanders. It is known that, during the first offensive, some Germans raped too. There was a lot of this behaviour. After the Southern offensive started, different troops behaved differently.

I wouldn't trust the American sources of information on this – as they were engaged in a propaganda offensive against Germany, designed every bit as much to defeat the Nazis as was the British demolition of Dresden. I have my thesis. I think it is a crime and internationally recognized as such. We need to look for reasons, rational, or not. When we started working with Chechens, I tried to avoid discussing war – we can discuss treatment, etc., but not war as that made people tense and take the opposite position on the violence, saying that Russians were ordered to perform atrocities. I don't think there was an order to rape Chechens, but certainly things were ignored at times and some may have done it without being punished. Survey participants ask, “why (someone was) killed”, although the people doing the survey were not responsible (for collecting this information). The surveyors often changed subjects to deal with this uncomfortable situation.

(Speckhard) Rape in conflicts is common. I was stunned when I met US psychologists and they told me that US servicemen admitted to raping women in Vietnam. We know that in the Balkans it happened on a huge scale. In our research I learned that men were raped, too (in Iraq and Chechnya as well). The effect is to try to humiliate and say “I have power over you”. When it comes to being shunned after a rape within a conservative society I can say as for the Chechen case, the families would not reject a woman who was raped in war, they were not shunned, because they were seen as clearly not at any fault for the rape.

(Jongman) According to Rapoport's four waves of terrorism, the fourth wave involves the use of suicide terrorism as a tactic. Rape could be one of the characteristics of the fifth wave. An Australian anthropologist is looking at Africa and this issue of rape.

Was the sample of your survey about 4600 people? It was 4600, (not including the teenagers (under 17). It was conducted in the same areas as Grozny, but it was a random sample. It was not a longitudinal survey and thus it was not conducted with the same people or the same population since many displaced people had gone back to their homes – the participation was voluntary. Khapta Akhmedova and others were involved – 75% of the respondents were the same in the survey conducted 2 years later. The households had moved quite a bit. Urus-Martan had changed quite a bit. It was a centre of the conflict, a mountainous region, and the resistance was quite active. Basayev and opponents of Kadyrov were located there. Gudermes was less affected – there was no bombing, it was not destroyed. The heaviest losses were in

Grozny. Correspondingly, that is where we saw the worst psychiatric problems. For comparison, we took samples and in terms of personalized matches it was about 65 – 70%. The teenagers were different because after 2 years they would move out.

Did you make comparisons to other samples by other researchers? I don't think there is another survey with the same scale and scope. We are aware of other work and go to conferences.

Are there differences between regular military and others? There is no scientific data, but there is common knowledge. It is thought that the contractors are crueller; the ethical norms for them are non-existent (they are “dogs of war”). Others confirm this. Take the US. The average person is nice. However, it is well known that in Vietnam, some would throw victims from helicopters to see if they'd have heart attacks before they hit the ground. War unleashes the darkest forces in people.

(Mutatoff) Is there a significant decrease of people stressed during wartime because they get used to the situation? In general terms, the military has some data (that they won't make public) showing that people do get accustomed to war. War becomes a “normal” lifestyle, one characterized by excessive aggression, and possibly by abnormal hormone levels. Some people can get accustomed, but they effectively become compressed springs and have a hard time going back to “normal” after the war. Let's take an example of an uneducated younger man from a village, an average person with average ideas about life. This person comes to a mountain village and people are hostile to him. He perceives a threat – someone could ambush him. This sense of a threatening environment is very important. He could get into a real ambush. Some people have trouble acclimating to a new environment (e.g., in the city after living in the mountains). The environment and surrounding people take part in creating the personality.

