

3. The protective role of school

An important life space

The mental health of children, their psychosocial development and their chances to overcome war related adversities, all depend on the organisation and quality of their every day life.

The school is, after the family, the second most important life space for school-aged children. Almost all children between the ages of 6-15 go to school and spend a large part of their waking life there. The school, therefore, can have an enormous impact on the quality of life and psychosocial well being of almost all children in any community. Most traumatised, or otherwise psychosocially affected children may not receive professional mental health care but can be helped by their teacher within the context of school.

The school as a field of psychosocial functioning

The wellbeing and development of children is based on how they feel (e.g. sad, joyful), how they look at the world around them (e.g. optimistic, pessimistic), how they look at themselves (e.g. with high or low self-esteem) and how they behave. Their behaviour can be accessed by: whether their social behaviour is adequate or inadequate, do they or don't they fulfil the normal tasks connected with their age group, and have high or low learning achievements. All of these differing factors are interconnected.

We often observe signs of emotional distress and sadness in children affected by war, but at the same time their social behaviour and

achievements are surprisingly satisfactory. Having the opportunity to interact within a framework of adequate social behaviour is a very important protective mechanism against the deterioration of psychosocial functioning. It can also prevent the later development of psychological problems by helping these children to cope with their distress and sadness. Lack of opportunities for normal social interaction will endanger a child's wellbeing and development.

Thus, the school is a very important place for the psychosocial functioning of a child. The quality of the school determines the range of opportunities for normal social interactions, and therefore the wellbeing and development of the child. Within the school, both adults and peers are models of appropriate social behaviour and in turn, can provide positive reactions in response to adequate social behaviour shown by the child. This aids in development of a feeling of social competence, which in turn contributes to the development of self-confidence, and a positive attitude.

Success in school work; being a good student or at least excelling in some school related activity such as sport or art, is a potent force for enhancing self esteem and self confidence. Both, self-esteem and self-confidence have a positive influence on coping capacities.

The importance of school during and after armed conflict

During an armed conflict the school may be one of the few continuous aspects of normal

life. Often school is the *only* institutional structure that has remained a constant from their previous life, the pre-war life. The complete break with the normal life after displacement is bound to have a severe psychological effect on children. Therefore, every activity that can narrow the gap between the normal life and life in exile will have a large impact on the child's psychological condition. Going to school is an activity that can successfully narrow the gap, and therefore makes the lives of children more normal, even for displaced and refugee children.

Going to school also fills the daily life of children with purposeful activity; it gives structure and meaning to each day. Inactivity is one of the greatest hardships of refugee life. In refugee camps, people often are forced into a state of idleness. Idleness, time wasting and emptiness enhance passivity and can result in, or deepen, a depressive mood. A meaningful, regular activity like going to school can prevent this from happening to children. The school also creates opportunities for children think of the future: the class of tomorrow with the next lesson for which they need to do some homework, the end of the school year, etc. The school facilitates encounters with new, interesting and attractive people. A child can make new friends. In school he/she will find new acquaintances and friends so that the circle of his social contacts broadens and becomes more diverse. The people he/she meets are no longer just family, extended family, or people with whom he is sharing accommodation.

At school, the children can hear new stories. In a refugee centre, the child will often hear stories of disasters that have hit, or may hit, family members or friends. They will also often hear worried adults talking about war events. In school, the child's

thoughts are engaged in the pursuit of other topics. His/her intellectual and experiential world is broadening and filled with new ideas. The school offers opportunities for acquiring new knowledge and insights, as well as developing new interests. The school can make the child mentally and emotionally more active, awaken their curiosity and motivate them to prepare for further intellectual and social development. The school can also help the child develop good working habits. In normal life most children would have some household duties or chores, but in refugee life these duties may be very limited. The working habits connected with school become, therefore, all the more important. A child going to school is, to a certain degree, gaining control over their life. He/she is at least partly relieved of dependence on others. Participating in school enhances independence and self-reliance, as it is up to the child whether they do their homework, learn the lesson, what their grades are and whether they will pass the class.

Going to school also tends to stabilise the daily life of children. During political tension or armed conflict, when it is impossible to know what the next day will bring, any stabilising elements that bring some predictability are of the utmost significance for the psychological condition of children. Refugee children, characteristically, have a feeling of insecurity. The terrible events and shocks they have experienced were usually unexpected. A continuing uncertainty surrounding their present life situation also contributes to a feeling of insecurity. Within the school there is a regular rhythm and predictability that can counter these feelings and enhance the feeling of safety and security in children.

A recognised effect of becoming a refugee is the negative impact on self-esteem.

Children experience injustice and humiliation, just as adults experience these feelings. They are deprived of many of the material and social attributes that previously supported their positive self-image. As school children, they partly regain a social role. They are students again and they receive recognition for their work, which helps develop a sense of competence. The school makes it possible for a child to be successful in certain subjects, or in extra-curricular activities. The teacher, who respects and accepts the children they teach, can considerably raise the children's self esteem.

The school gives refugee children the feeling of belonging to a social structure, which constitutes part of the broader social structure, and enhances the sense of belonging to a community.

At school a child meets many people who may help him with his developmental and psychological problems. These are his teachers and schoolmates. School acts as a remedial agent for all refugee children, but it is also a rich source of psychological help for the children with serious emotional problems. This is particularly true when parents are - for whatever reason - unable to provide the support and consolation needed. A male teacher may become especially important to children who have lost their father, and may occasionally assume the role of father. By the same token, a female teacher may become especially important to children who have lost their mother.

The teacher is also important in maintaining contact with, and offer support to, parents. As a result, the relationship between parents and their children (even the ones that are too young to go to school) may be vastly improved.

Protective factors in general

A popular topic for discussion in develop-

mental psychology is the huge range of possible responses to stressful events and deprivation. In children, the adaptive reaction to stress are thought to be related to *coping skills*, which in turn are seen as the result of a balance between more or less permanent *stress factors*, and *protective factors* (Garmezy, 1985).

The term stress factor (or risk factor) is commonly used to refer to factors that include: traumatisations and neglect, marital conflicts between parents, delinquency or mental disorder in one of the parents, etc. These factors are thought to interfere with normal personality development, and may also make the individual more vulnerable to traumatic experiences. In a retrospective investigation, Davidson, Swartz, Storck, Krishnan & Hammet (1985) have shown that 66% of the people in their sample who were suffering from a mental disorder after a traumatic experience came from a family in which one of the members had a prior mental disorder.

The term protective factors may refer to *individual characteristics* observable from early childhood, such as activity, social responsiveness, social intelligence, the capacity to seek and accept help from others, and other temperamental characteristics. These can be considered congenital. It may also refer to *capabilities* like the ability to emotionally distance oneself from traumatic memories, the ability to assimilate the knowledge that one survived traumatic circumstances, and to transform this knowledge into a feeling of inner strength. It may be seen as the ability to find meaning in one's life (Helmreich, 1992).

Trust, in the sense of a belief that one can overcome life difficulties also seems to be a protective factor. This trust is often connected with meeting, 'by coincidence', a person who provided opportunities to over-

come a problem, and thus encouraged a more positive self-image and view of life (Werner, 1993).

Another group of protective factors is related to *favourable family conditions*, such as the availability of at least one competent adult, opportunity for autonomous behaviour, and the absence of disrupting conflicts.

A further group consists of conditions outside the family, such as a supportive school environment. Some authors subsume both family conditions and protective factors outside the family under the single heading of *social support* (Oei, 1987; Parry & Shapiro, 1986).

Next to psychological factors however, some *material* parameters, whether within the family, the school, or the wider environment, may be more protective than others. For example: a freshly painted school building with clean toilets and adequate educational tools will be more protective than a derelict building without facilities (Van der Veer, 1998).

Finally, the term protective factor may also be used for individual characteristics resulting from a process of personality development where experience and *interaction* with the environment played an important part. Examples show an increase in positive self-image and self-respect; the experience of 'required helpfulness', that is the experience of *competence* as result of the necessity to help others, (Rachman, 1979); or, a friendly, cooperative attitude which invites favourable reactions from the social environment.

Protective factors appear to be similar in diverging cultural situations (Werner, 1989).

Protective factors in the school

Maintaining good schools and developing their protective psychosocial shield is an

efficient way of improving coping capacities for the local population of children. Many studies (Rutter, 1994; Garmezy, 1985) show that the school can be an important protective factor for many children experiencing armed conflicts, social adversities, or adverse family situations.

In these studies, the following factors are recognised:

- good school achievement,
- good relationship with teachers (who offer social support),
- good relationships between peers, (belonging to a group, having a friend)
- being competent and successful in sport, art or other activities, in or outside school.

A school of good quality with regard to; the psychosocial climate, the relationships among teachers and children, and the psychosocial help offered to the children, has all the potential to act protectively.

Good school achievement has a significant impact on self-esteem of children. This is of special importance for children who have been exposed to multiple traumas and adversities. Children with high self esteem experience the feeling more often that they can directly influence their lives and have more active coping strategies.

Offering social support means providing additional resources and/or reinforcing existing resources. For children who have experienced important traumatic events and losses the most available support system beyond the family is the school.

The importance of the school, under these particular circumstances, is much greater than in normal life circumstances. The parents can be as seriously affected as the children and frequently; the impact of war events has a much longer and more severe impact on parents than on children. Therefore, the natural supportive and pro-

tective role of primary caregivers is reduced, or even absent, in many families. The school can fill this gap to a large extent. Research (Rutter, 1994) has shown that the protective role of the school is more significant in children with family adversities, than in children from normal family environments.

Prevention of negative school experiences

Multiple traumas and emotional distress increase the risk of psychosocial disorders. Unfavourable and stressful experiences in school (rejection by mates, conflicts with teachers, school failure, drop out) could be the final straw to break a child's self-esteem, hope and coping capacities. Therefore, it is of the greatest importance to prevent school failure and other negative school related experiences.

The school is the space in which children with problems can be identified and helped by teachers

Schools are social spaces in which children spend as much time with teachers and classmates as with their own families. Teachers have ample opportunities to systematically observe the children and identify those in crises, or with special needs.

Teachers are also in a relatively good position to provide various ingredients of psychosocial help to children, such as emotional support, enhancing the child's self-esteem through educational achievement, developing social skills, etc. Events and experiences that can cause emotional problems to many children can be treated within the framework of different school subjects, like arts and sports. The experience and knowledge of teachers can be enriched by special training, which will therefore enable them to act as psychosocial helpers. And last but not least, all school children are reachable with-

in the school; all those who would never visit mental health institutions can therefore be exposed to a positive influence. These influences may be of a structural nature (such as organisation of life, predictability, being challenged to deal with age appropriate tasks), an interpersonal nature (such as teachers' empathy, support, exchanges, and debriefing with schoolmates) or even based on more specific psychological interventions like expressive techniques and behaviour therapy, all implemented through the teachers within the framework of the school.

The psychosocial climate and relationship are the most important

Children damaged by war and exile need warm human relationships more than techniques. The three main pillars of each helping, or therapeutic relationship, with a child are:

1. an empathic *human relationship*,
2. *interventions that change the social reality of the child's life*: improving the child's life situation, for example by boosting his integration in the class, including him in various activities, enriching his social network through befriending as a volunteer,
3. *specific professional knowledge*: psychotherapeutic techniques, psychoactive drugs, special teaching techniques, etc.

In normal life circumstances the last mentioned component, specific professional knowledge, is usually considered as the most important. Yet, when dealing with children affected by armed conflict, it is the human relationship that acquires a tremendous added importance, as it works to counteract the previous war-related negative emotional experience. As for the second component, both teachers and clinicians in conflict areas know from experience, that interventions that change the

social reality are also much more important than the use of specific therapeutic knowledge.

However, often psychosocial programs implemented in schools are based on the use of therapeutic techniques, such as play therapy and art therapy. Such programs are frequently, at least initially, much liked by teachers or paraprofessionals because they give some concrete tools of how to work effectively with children.

But, the efficacy of these therapeutic techniques when used without the other two pillars of a therapeutic relationship should not be overestimated. Specific professional knowledge does not change the broader social context of the child's life. Nor does it tackle the problems of the child outside the therapeutic hours, and therefore such knowledge is in most cases not sufficient on its own.

Supporting the school is supporting the parents

I have been often asked: '*your program is aimed at supporting teachers, what about parents and families?*' In (post) conflict areas there are always large numbers of families, which, according to mental health standards, need support. In practice however, it is often not feasible to reach a significant number of these families. Access to both teachers and schools is much more feasible. Community-based programs, oriented directly to children do influence the quality of the child's life and the range of their

experiences; even when the family is not directly included.

That does not mean that parents and families do not benefit from the program described in this manual. In the frame of the program, teachers are empowered to cooperate with parents, to support them, and to counsel them.

And finally, the child is not only just *submitted* to family influences, the child is also *shaping* the family atmosphere, as well as influencing the emotional status and energy of his parents. The child can also actively contribute to the healing processes in his/her family¹.

Supporting the school

In order to assume the protective functions described in this chapter, the school needs capable teachers. Teachers can be empowered and supported: psychosocially, educationally and morally. This can be done through Seminars for Teachers, conducted by local trainers.

In addition, volunteer work can be introduced in order to enhance the protective climate in the school.

¹ In ideal circumstances, and with sufficient resources, all families needing psychosocial help from external professionals should be supported. However, the existence of a school-based psychosocial program should not be an obstacle to developing programs of specialised psychological assistance to the most affected families in a community.