Youth clubs: psychosocial intervention with young refugees

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The war in former Yugoslavia (1991-95) exposed hundreds of thousands of children and adolescents to very intensive, often multiple traumatic experiences, followed by a chain of chronic and increasing problems in exile. This paper describes the theoretical framework, implementation and evaluation of Youth Clubs, a community-based psychosocial intervention implemented during the war years with the aim of supporting the psychosocial recovery and reintegration of young refugees in Serbia. The evaluation study confirmed that Youth Clubs are an efficient intervention that reduces suffering and prevents a negative outcome of traumatic experience in the majority of adolescent refugees. The author discusses the hypothesis that the ‘healing’ effect of the Youth Clubs intervention might be due to providing norms and context for the interpretation and understanding of traumatic events, offering young people opportunities to master the reality and find some new, meaningful goals that they can identify with and fight for. Thus, their pre-existing “conceptual maps”, which were destroyed or profoundly shaken by the traumatic events, could be replaced by new ones enabling the young to give meaning to past and present experience and to pave the way towards the future.

Keywords: war, traumatic experiences, adolescent refugees, psychosocial intervention, conceptual maps

Adolescents and the stresses of war

To become a refugee and continue to grow up in a community which is itself severely affected by war represents, no doubt, one of the most difficult experiences a young person could have. And that is exactly what happened to hundreds of thousands of children and young people as a result of the war, armed conflicts and drastic social changes which went on for almost ten years in the former Yugoslavia (1991-1999). During that period about 3.2 million people fled their homes in the face of war and political violence and found shelter in other parts of the world or, more often, in the other republics of the former Yugoslavia, which had become ‘new states’ in the meantime. Nearly one half of that number were children and young people.

Before exile, many of these children and young people had witnessed destruction, atrocities, and the torture and death of close persons, or their own life was endangered, exposed to violence, deprivation and uncertainty. 41% of these young refugees experienced direct threat to their lives, and 14.4% witnessed the killing or wounding of a family member or other close person. Exposure to multiple traumas several months prior to
seeking refuge was a frequent finding. (Ispanovic-Radojkovic et al. 1994).

But the pain often continued after they reached safety and found shelter. Worry about those family members who stayed behind in war zones, as well as the cares of everyday refugee life, diminished or non-existent opportunities for education, uncertainty about the future, continued to torment and adversely affect the process of growing up.

Life in the shadow of war, under sanctions, in isolation, in the context of a drastically impoverished society, in both a material and a spiritual sense, significantly affected the mental health of young refugees in Serbia. According to our studies, the symptoms of psychological suffering were present in 65-81% of children and young people during the first months of their refugee life. After 1.5 - 2 years, difficulties were present in 35.5% of children, while 25.5% of children showed symptoms of chronic reaction to stress even after 3 years (Ispanovic-Radojkovic et al, 1994; Ispanovic-Radojkovic, 1996; Ispanovic-Radojkovic et al, 2002).

Despite the concern the above data may cause, they also show at the same time that more than two thirds of young people who experienced serious traumatic events have not developed psychopathology, but have been able to activate mechanisms for coping with traumas and to develop new forms of adjustment.

Beside the severity, nature and number of the traumatic events themselves, three groups of factors influencing the outcome of war-related traumatic experiences in childhood and adolescence are being recognized nowadays. The first is related to the individual characteristics of the child (maturity, cognitive style, self-esteem, quality of previous life experience, and especially the history of previous traumas and pre-existing psychopathology), the second to the strength and the cohesion of the family and the third to the support of the social environment in which the recovery is taking place (Macksoud, Dyregrov & Raundalen, 1993; Jensen & Shaw, 1993; Ispanovic-Radojkovic, 2000).

The significance of social framework for the outcome of development after traumatic experiences is especially great in adolescence. There is evidence that the attitude of the community, the belief that the war is justifiable, and cohesion of political motivation of the community can mitigate the negative effects of war on young (Punamaki, 1983). How to understand these findings? I believe that it has to do with the basic urge of every human being, the ‘search for meaning’. Finding meaning and giving meaning to the world, or creating one’s own ‘conceptual maps’ is an important driving force of the developmental process, particularly in adolescence.

In a situation of war or any other form of organised violence, a young person’s pre-existing ‘conceptual maps’ are no longer adequate and even the mechanisms for developing new ‘maps’ are often damaged or destroyed (Garbarino, Kostelny & Dubrow, 1991). The breakdown of family, of connections with relatives and friends, the absence of school, work and other social institutions, in one word the breakdown of a social network in the situation of war, represents in fact the destruction of mechanisms which provide the adolescent with the norms and context for the interpretation and understanding of traumatic events.

In order to facilitate the restoration of previous ‘conceptual maps’ or the development of new ones, young people with traumatic experiences should be helped to process and place their painful experiences
in a more humane framework, and should be given opportunities to come to terms with reality and formulate meaningful goals that they can identify with and fight for.

Such considerations led us to assume that a psychosocial intervention might be an appropriate way to assist a large number of adolescent refugees who came to Serbia during the war years. Psychosocial interventions after traumatic experiences should strengthen the psychosocial protective factors and reduce psychosocial stressors in the effort to protect mental health and promote human rights (Agger, 1994). In each individual case, the ‘protective’ or ‘supportive’ value of each factor should be assessed in relation to the extent to which this will contribute towards ‘giving meaning’ or integrating experience.

The aim of this paper is to give a description of the Youth Clubs; a community-based psychosocial intervention, as an innovative practice which has had beneficial effects, according to the persons who implemented it and the young people themselves.

An evaluation of the Youth Club intervention was done also in an attempt to understand better what was happening with the young people who took part in the intervention. The study took the form of empirical research rather than of a very strict scientific study, as it was hard to apply a strict scientific methodology in a war situation.

**Youth Clubs**

The implementation of Youth Clubs started in Serbia in 1992 with the aim of addressing the psychosocial needs of adolescent refugees from Bosnia, Herzegovina and Croatia, and to aid their psychosocial recovery and reintegration. The aim of this intervention was to activate their strengths. It was expected that emerging from the passive role of ‘victim in need of help’ and starting to face daily practical challenges, would help young people to overcome their past difficult experiences and (re)gain control over their lives. It was expected that creating meaningful goals, not only for everyday life but also for the future, would have the same effect.

Since 1992, the Youth Clubs have been implemented in 8 boarding schools and youth hostels in Belgrade, which house 2400 students (aged 15-18 years), including 400 refugees. During 1993-94 the Clubs’ activities were supported by the British humanitarian organization OXFAM and since 1995 by INTERCARE, a Dutch humanitarian organization.

The Youth Club activities took place in the afternoons or evenings, after school hours, once or twice a week, in each of the boarding schools. The Clubs were open to young people attending the boarding school, refugees as well as local young people. The activities usually consisted of two parts: a ‘creative-recreational’ one and a ‘talk shop’. The adolescents had complete jurisdiction in deciding the content of the creative and recreational activities, which generally consisted of communal games, music, poetry, painting and drama or sporting activities. Club sessions were sometimes attended by public figures invited by the young people, with whom they held discussions and debates about the subjects of interest to them (Bojanin & Ispanovic-Radojkovic, 1993; Bojanin, Ispanovic-Radojkovic & Lazic, 1994). The number of participants in these activities ranged from 20 to as many as 80.

The first recreational part of Club activities was followed by a ‘talk shop’, lasting about 90 minutes and supervised by young mental health professionals (psychologists, social workers, pedagogues), two of them in each Club. Participation in the group was...
open to all young people, but in practice there was a core group of about 10-12 adolescents in each boarding school who attended ‘talk shops’ regularly, while the others did so occasionally.

In these ‘talk shops’, young people could debate on anything without fear of rejection or condemnation. In the first months after the traumatic experiences they most often talked about injustice, national intolerance, hatred and the desire they often felt for revenge on ‘enemies’ who had caused them pain and loss. Such aggressive reasoning and fantasies were not condemned by the facilitators; they encouraged young people to view them as a natural and justified strategy for coping under extreme dangers. However, little by little, the facilitators introduced the idea that the same strategy that gives meaningfulness to life in war zones may lead to dehumanisation, which, on its own behalf, deepens the conflict, decreases the ability to compromise and forces the young to continue the war and thus to expose themselves and future generations to unnecessary suffering and death.

By this time, some of the young people’s stories and memories of positive experiences of their past life with ‘enemies’, neighbours, and friends started to emerge in the ‘talk shops’, and they were encouraged by the facilitators. It was gradually explained that when people find themselves under great stress it may frequently happen that the image of the other gets split into a good and bad part, so that others are seen as exclusively bad or exclusively good. In a war situation, under immediate threat to life, it is dangerous to bear in mind the memories of positive aspects of the past, of times when living side by side was possible. Therefore, under war conditions the enemy as a whole is seen as bad, while one’s own people, the members of one’s own group, are seen exclusively as good; this only leads towards further deepening of the conflict (Agger, 1994).

It was important that the young started to understand that one of the prerequisites for overcoming the hatred and fear they felt deep inside themselves was to allow positive memories of the past to resurface and be expressed. According to the observation of the group facilitators, the emphasis on current positive personal experience of empathy, tolerance and support provided by the group itself was also an important tool in the healing process. It helped young people to develop better self-perception, to obtain better control over their present life and to direct them towards the future.

Adolescent refugees stated that they found the Clubs a very pleasant and effective means of integrating themselves into new surroundings. ‘The most important thing is the constant contact between Club members; talking, arguing, competing, falling in love, having fun together…We were no longer labelled as refugees. We became people with real values and had influential moral figures as role models’, wrote one young person (P., 15 year-old refugee boy).

**Evaluation study of the Youth Club**

In order to evaluate the effects of the above-mentioned Youth Clubs, an evaluation study was done in the school year 1995-96 by comparing the changes seen in the experimental and control group of adolescents before and after intervention.

The sample was made up of 1,106 students (813 boys, 293 girls) from boarding high schools in Belgrade, aged 15-18 years, 158 of whom were refugees. Adolescents (N=128) who had taken part in Youth Club
activities for at least 6 months formed the experimental group, while the rest (N=978) formed the control group.

The evaluation of the effects of Youth Club activities was done by computing the differences between the first and second measurements in both groups and comparing them (Ispanovic-Radojkovic, 1996; Ispanovic-Radojkovic et al., 2002).

The hypothesis of the study was that the applied psychosocial intervention significantly decreases symptoms of psychological suffering (anxiety, withdrawal and aggressive behaviour) and levels of trauma, and increases the self-respect of adolescents with war traumatic experiences.

The main instruments used in the study were:

- The Youth Self Report, for ages 11-18 (T. Achenbach et al, 1991),
- Adolescent Self-Esteem Measure (B. Wolf, H. Davis et al. 1996)
- War Trauma Questionnaire (B. Wolf, 1994);
- Impact of Event Scale (Horowitz et al 1979)

We are presenting here the main findings of the study while more details on the study's design, methods and results can be found elsewhere (Ispanovic-Radojkovic, 1996, Ispanovic-Radojkovic et al., 2002).

Traumatic experiences were more common in girls (66,8%) than in boys (56,2%). The difference was even bigger in refugees where 88% of girls and 74,1% of boys had traumatic experiences, mostly related to war, while in non-refugees 63,3% girls and 53,2% boys had 'peace-time' traumatic experiences.

The level of trauma of young people from our sample was between medium-high and high. Refugees, especially the girls, expressed a significantly higher level of trauma, according to the Impact of Event Scale, than non-refugees.

Significant connections were found between the psychological problems of young people as measured by the Achenbach Scale, and sex, refugee status, and traumatic experience. Girls had higher results than boys on all scales except on the scale of Social problems and delinquency. Male refugees had significantly higher scores than male non-refugees on the scales Withdrawal, Somatic difficulties, Anxiety-depression and Cognitive problems, which indicates that male refugees tend to internalise their problems. Self-respect was lower in refugees, more so in girls than in boys.

Here are some of the most significant changes in the young people who participated in Club activities. 78% of the adolescents said that their understanding of themselves had improved; 63% reported an improvement in their understanding of others; and 60% said that it was also much easier for them to make contact with their peers.

A significant increase of self-respect was registered in all adolescents.

The psychological problems of young people, especially refugees, were significantly decreased. Significant decreases of symptoms following the Achenbach Scale were registered: Withdrawal and Anxiety-Depression (for male refugees), and Withdrawal and Social Problems (for female refugees).

The level of traumatic stress of young non-refugees decreased; however, this positive effect did not happen with refugees – although a slight but insignificant increase in IES scores was registered.

Discussion

How can we explain what seems to be a contradictory result: refugees who took part in Youth Club activities felt better, their
psychological problems, measured by the Achenbach instrument, decreased, their self-esteem increased, but their trauma-related symptoms, as measured by the IES Scale of Intrusion and Avoidance, actually showed a slight increase?

There are several possible explanations. The answer may be found in the nature of the intervention itself. The Youth Club is a psychosocial intervention focused on the activation and strengthening of the personality. It is possible that participation in Club activities helped adolescents to feel stronger, ‘allowing’ them to face their hitherto suppressed painful memories more easily, in an attempt to integrate these into their personal concept of the world and their position in that world.

Considering the fact that the dominant psychological mechanism of young refugees, especially males, before the interventions was internalisation, we can presume that their participation in Club activities helped them to ‘open up’, to reject the passive role ‘of a victim that needs help’ and to gain control over their lives, thoughts and feelings. This explanation is confirmed by the fact that young people felt better after the intervention, regardless of the fact that they were thinking about traumatic events even more.

The other explanation could be related to the instrument which was used in the study, namely to the Impact of Event Scale. After 10 years of experience with people traumatized by war in former Yugoslavia, I am convinced that it is not the most appropriate instrument to measure the internal processes of young adolescents who are recovering from difficult war-related experiences. It certainly does not measure, nor was it originally intended to measure, the process of ‘giving meaning to the world, to the past, present and future’ which is, in my view, the central theme of the healing process.

As to the effects of the Youth Clubs intervention, research confirms that such clubs constitute an efficient psychosocial intervention, capable of reducing suffering and preventing negative outcomes of traumatic experience for the majority of adolescent refugees.

The question is whether the healing process that was strengthened by this intervention could be successfully brought about with all adolescents, and whether some adolescents need a more extensive psychotherapeutic intervention. A long-term study of refugee adolescents who took part in this intervention could give an answer to this question. According to our experience a classical therapeutic intervention is not obligatory after traumatic experience, but is justified in situations where other supportive mechanisms are absent, or in cases where the giving of meaning, integration of experiences is very complex or delicate in view of the social or emotional state of the young person.

In practice, it is essential to help young people with difficult life experiences to create new ‘conceptual maps’ untainted by violence, but in which the conceptions of peace and positive human and social values prevail, which will make it possible for young people to emerge from their isolation, to open up towards others and to respect their diversity.

References
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