

# CHILDREN AND TORTURE



It is shocking to associate children with torture. It is however a reality that children suffer from oppression, war, and torture directly or indirectly. In the twentieth century, children have increasingly become the target of oppressive regimes. It is alarming to comprehend the magnitude of the phenomenon: half the world's refugee population are children.

Organized violence can affect children in numerous ways and can be viewed as direct trauma, family trauma, or social trauma (i.e., disintegration of the child's environment).

## Direct Trauma

Direct forms of torture used on adults have also been carried out on children. Kidnapping, rape, forced labour and executions, witnessing scenes of extreme violence such as murder, rape, beatings, or torture of others, including one's parents.

"Sometimes [the children] were shocked seeing the violence in jail and still remember. Sometimes they feel depressed and they always remember and ask about it and sometimes they can't sleep.... All of my family members, including the children, have nervous problems since

being in jail as a result of the lack of clothing, the fierce cold, nowhere to bathe, the shortage of food and the suffering.”

## The Traumatized Family

A situation of war, frequently experienced by refugees, has a disorganizing and traumatizing effect on the entire family. Trauma of this sort, occurring before or after a child’s birth, can limit or damage the parenting skills of the parents. Parents may be preoccupied, depressed, anxious, in mourning, or otherwise rendered incapable of properly caring for their child or children as a result of the trauma. Some children develop problems in school. Such was the case for the family in the following passage:

“We have a family of nine children.... One child, a nine year old, vividly remembers her father being picked up and [as a consequence] has severe problems at school, stutters, is very destructive of toys and other objects and urinates in class.”

## Social Trauma

In situations of war or organized violence, children may experience “social trauma” created by social tension when, for example, civil liberties have been restricted. In fact, it has been reported that children in Northern Ireland speak of the events of the on-going war as part of normal life and no longer express “upset” about them. A climate created by on-going organized violence can also produce generalized feelings of insecurity and uncertainty for children, thus making it impossible for children and youth to feel that they have a future. Children and youth who have lived in a situation of war may have been traumatized directly or indirectly and may exhibit a wide range of symptoms. This variation of symptoms depends on the following:

- the nature of the trauma
- the child’s developmental stage
- the child’s gender
- the dynamics of the child’s family
- the child’s personality.

Often children and youth who have experienced trauma through torture receive little attention at the time of the ordeal and can go for long periods of time before receiving attention.

Children often experience their emotional trauma on their own, as parents and other family members are often trying to cope with their own trauma and are therefore not able to give emotional support to their child. For any person, traumatic events such as the torture, murder, rape, or disappearance of a loved one are extremely difficult to grasp. Young children who experience these horrors lose their ability to trust and feel safety and, consequently, children may develop an unsupportive attitude toward their surviving parent. Such was the case for this young boy:

“One nine-year-old boy’s family was forced to flee their country because of their father. The child did not understand what his father had done and was angry because his family life had changed drastically. His father, a doctor, who had enjoyed respect and prestige back home was now cleaning offices in Toronto.”

## Symptoms of Torture in Children

Young children who have experienced or been exposed to some form of torture may have numerous symptoms, including recurring nightmares, and have trouble sorting out what is reality and what is fantasy. For children, exposure to traumatic experiences can create anxieties and insecurities that can cause them to perceive every aspect of the world as being unsafe and frightening. The severity of the symptoms depends on a number of factors, which include the age of the child at the time of trauma, the duration of exposure to the trauma, the degree to which the child is isolated socially from family members, the stories they have been told about what happened to a family member, and the levels of support received.

## The School System

According to Marlinda Freire, in her article “Refugees: ESL and Literacy” (REFUGEE, Vol. 10, No. 2):

“The school system is not well equipped to deal with the complexities of issues involved in teaching refugee children. They are seen as part of the large groups of students that require ESL support. Many if not all of the difficulties that the student experiences academically will be generally attributed to the ESL factor. These youngsters are very much at risk for repeating

grades, presenting with academic delays, and being streamed into special education or basic academic programs. If these children display “acting behaviours” that disturb the well-being of the classroom situation, they may be referred to social workers, psychologists, or psychiatrists for evaluation. If these children are compliant, apathetic, withdrawn, passive, or depressed, they will likely be referred for evaluation of their emotional difficulties, even though they may not be learning. Children with the highest risk are those of refugee parents who are highly traumatized, of low educational background, and/or illiterate. These factors may present themselves in any combination.”

## The Healing Process

It is important for healing to take place in a supportive environment such as within the realm of the family. Healing is also dependent on the family’s remaining structure and its protective and nurturing qualities. Healing for the child is also dependent on the degree to which the family has adapted to the new culture and, in turn, the degree to which the child has adjusted to a new life (i.e., school, involvement with peers, and adaptation to a new culture and language).