Long-term effects of political violence: Narrative inquiry across a 20-year period


Published in:
Qualitative Health Research
Long-Term Effects of Political Violence: Narrative Inquiry Across a 20-Year Period

Karola Dillenburger
Montserrat Fargas
Rym Akhonzada

The Queen’s University of Belfast, Belfast, Northern Ireland

The study of long-term effects of political violence generally concentrates on effects of a single event or period of violence on individuals or groups of individuals and commonly relies on recollections from those who experienced violence a long time after the event. Against the backdrop of Northern Ireland’s Troubles, in this article we use narrative inquiry methodology to explore the long-term effects of violence across a 20-year period on a different level. Using two sets of interview data, one collected 20 years ago during a period of intense violence and the other collected recently, after the ceasefires when levels of community violence had decreased, we allow for comparisons of contemporaneous experiences and personal narratives that illustrate differences and similarities across a 20-year period. Personal accounts of violent experiences, individual coping and psychological health, social support needs and provision, and political and cultural change mirrored fluctuating levels of community violence across time, showed growing levels of societal awareness of victims’ issues and increasing levels of service provision, and illustrated the effects of postceasefire violence.

Keywords: coping and adaptation; trauma; narrative inquiry; Northern Ireland; violence

It is generally acknowledged that traumatic events, such as natural disasters, political conflicts, and wars, affect the psychological well-being of individuals and communities. Commonly, narrative inquiries (Bogdan & Biklen, 1982; Stake, 1988) in the area of trauma (Etherington, 2002) consist of subjective individual accounts of specific events (Miliora, 1998) and descriptions of physiological or psychological correlations (Griffith & Griffith, 1994). In this article, narrative accounts based on in-depth interviews (Marshall & Rossman, 1995) that span 20 years of life in Northern Ireland are analyzed to actively find the voices of victims and survivors and locate them in time and space (Connelly & Clandinin, 1990; Keenan & Dillenburger, 2004).

Since 1969, people living in Northern Ireland experienced traumatic events related to sectarian violence and political conflict, colloquially known as the “Troubles.” During the Troubles, more than 3,600 people were killed, more than 40,000 were injured (Sutton, 2001), and thousands witnessed explosions or shootings, or were attacked or intimidated (Dillenburger & Keenan, 2001; Fay, Morrissey, & Smyth, 1999; Hillyard, Kelly, McLaughlin, Patsios, & Tomlinson, 2003). The ceasefires in 1994/95 and the Good Friday Agreement in 1998 meant that the death toll decreased, but violence continued in the form of punishment beatings, riots, feuds, and intimidation (Dillenburger, Fargas, & Akhonzada, 2008; Healey, 2004; Jarman, 2004; Monaghan, 2004). With an increased recognition of victimization (Bloomfield, 1998) came an infusion of national and international resources (McDougall, 2006), a growth of services (Dillenburger, Akhonzada, & Fargas, 2008), and intensification of research into the psychological, social, and economic costs of the Troubles (Smyth & Fay, 2000; Tomlinson, 2007). However, the lack of early research meant that little is known about life in the early years of the Troubles and recent research relies on retrospective or postceasefire data.

Authors’ Note: Aspects of this research were supported by the Department of Health, Social Services & Public Safety with resources provided under OFMDFM Victims Unit, Strategy Implementation Fund. The authors wish to thank Mrs. Grace Kelly for research assistance. Correspondence should be addressed to Dr. Karola Dillenburger, School of Education, The Queen’s University of Belfast, 69/71 University Street, Belfast BT7 1HL, Northern Ireland; e-mail: k.dillenburger@qub.ac.uk.
Employing narrative inquiry methodology (Connelly & Clandinin, 1990), in this article we compare accounts from the only preceasefire study of violently bereaved widows that was conducted in the mid-1980s (Dillenburger, 1992) with recent postceasefire accounts of victims of the Troubles (Dillenburger, Fargas, & Akhonzada, 2007a). This longitudinal method allows us to explore differences and similarities between pre- and postceasefire narratives and focus on traumatic experiences, individual differences, social support systems, and cultural contexts (Dillenburger & Keenan, 2005). The overall aim of this article is to ensure that the voices of those who have experienced trauma over the years are heard and listened to.

Method

Participants

Thirty-five adult women \((n = 27)\) and men \((n = 8)\) who had experienced violent bereavement, intimidation, and/or injury because of sectarian violence took part in the study. Participants lived in Northern Ireland, and their traumatic experience dated back between 1 and 30 years. At the time of the study, all participants availed of services from voluntary sector victims’ organizations.

Research Instrument

The main research instrument consisted of in-depth semistructured interviews exploring traumatic experiences (e.g., “How have you been affected by the Troubles?”), individual coping (e.g., “How have you coped?” “Have you talked about your experience?”), social support (e.g., “Has anyone helped you, and if so how?”), and service provision (e.g., “What services have you used?”) and cultural differences (e.g., “How have you changed over the years?”).

In addition, participant observations (Sandgren, Thulesius, Fridlund, & Petersson, 2006) took place before and/or after the interviews when research staff had the opportunity to interact with participants informally.

Procedure

The study was conducted in two parts. The first data set was collected in 1985/86. Given the difficulties in accessing hard-to-reach populations and studying sensitive topics (Groger, Mayberry, & Straker, 1999), such as victims of sectarian violence in Northern Ireland, and considering the difficulties with practice-close research (Lykkeslet & Gjengedal, 2007), a gatekeeper approach was utilized (Erickson, 1982). This meant that victims’ organizations were identified, using newspaper reports and word of mouth, and the chairpersons of these organizations were asked to identify service users who were willing to take part in the interviews. Individual service users who had given informed consent were interviewed on the premises of the organization or in their own home, whichever was preferred. Interviews took 30 to 60 min, were tape-recorded, and were transcribed.

The second data set was collected 20 years later in 2005/06. Generally, the same methodology was employed as in 1985/86. The Office of Research Ethics Committee Northern Ireland (ORECNI) granted ethical approval (ORECNI did not exist in 1985/86). As in the earlier part of this research, a gatekeeper approach was used to identify participants. The number of victims’ organizations had grown dramatically because the first data collection and groups were easily identified, using a governmental data bank (this did not exist in 1985/86). Chairpersons were asked to identify potential participants. Interviews were held at organizations’ premises, took 15 to 60 min, and were tape-recorded, transcribed, and verified by interviewees.

Narrative Data Analysis

For data analysis, interview transcripts were read repeatedly to identify common themes, which were subsequently categorized into free and tree nodes and attributes, using NVivo-7 software (NVivo-7 software was not available in 1985/06. The first data set therefore was manually analyzed). Quotes from 1985 to 2006 are cited from Dillenburger (1992). Data collection in 2005/06 was part of a larger study (Dillenburger, Fargas, & Akhonzada, 2007a); however, interview quotes reported in this article have not been published before.

Results

Contrary to earlier theories (Kuebler-Ross, 1969; Parkes & Weiss, 1983), it is now acknowledged that the way in which people cope with trauma and violence does not follow a universal or linear sequence and responses depend on many different factors (Dillenburger & Keenan, 2001; Hamber, 2003; Hentz, 2002; Orsillo, Batten, & Hammond,
Dillenburger and Keenan (2005) suggested that individual reactions to traumatic events depend on at least four interrelated contexts: (a) the Death or traumatic event itself, including its type, duration, and intensity; (b) Individual factors, such as age, gender, health, and personal trauma history; (c) Social circumstances, such as social support and family network; and (d) Cultural and political contexts. The narrative inquiry presented here follows this contextual analysis, visually presented as concentric interconnected circles in Figure 1.

**Traumatic-Event-Related Factors**

During the early years of the conflict, the psychological impact of political violence was not fully recognized. In fact, researchers and psychiatrists thought that people were reacting with astonishing resilience (Cairns & Wilson, 1984; Fraser, 1973; McCreary, 1976). In contrast, we found that the death of a spouse was one of the most stressful life events (Daggett, 2002; Holmes & Rahe, 1967), especially if the death was violent (Kaltman & Bonnano, 2003):

> The gunmen had shot [my husband] straight into the face. His face was so bad that they just put a plastic bag over it. All I can see when I close my eyes now is that white plastic bag. I cannot even remember his face (1985/86).

> Leaving my husband back to work the gunmen were waiting in a van. They came up to the car that myself and youngest child were in and shot my husband. He died shortly later in hospital (1985/86).

> The way trauma was communicated was important. Those who were present at the time seemed to cope better in the short term, whereas those who were told by others coped better in the long term (cf. Dillenburger, Fargas, & Akhonzada, 2007b):

> I was at work five minutes when they came for me. When I went to the reception and saw the police I knew it was my husband. I said, it’s my husband, isn’t it? The policeman said, yes it is. I said, is he badly hurt? He said, he is dead (1985/86).

> I saw a newsflash in television and then his family told me. They were all a great help and comfort to me (1985/86).

Sudden and violent death of a child was particularly traumatic (Malacrida, 1999; Rando, 1993), and time did not mitigate against poor coping. Twenty years after the events, people still relayed their traumatic experiences vividly:

> [My mother] was already a widow, at the time of [brother]’s death. She was saying, “I must have done something awful bad in my youth because why would God be punishing me like this” (2005/06).

> The police didn’t even come to tell my mother, we heard it on the news. My [older] brother says to me “well it’s on the news that there’s been a body found” and I says “catch yourself on, that was a man,” you know the way you thought of [younger brother] as a boy (2005/06).

> Many of the participants had experienced multiple traumata and struggled to cope:

> My brother was killed. I had an uncle and a cousin both shot dead and another one shot and he died soon after, another one shot in the head (2005/06).

> Five members of my family murdered; my brother, my nephew, two second cousins and a cousin of my father. Also killed seventeen of my best friends and my own house was attacked several times (2005/06).

> Public acknowledgements of trauma experiences were important but rarely forthcoming:
[Name of Secretary of State] was here. I told him the whole story in detail and he just sat looking at the guy beside him and said, “Is this real?” I said, “Yeah, it is, you go and check up all the records, you will find it.” And he said “It’s impossible.” So then, all of a sudden he came back with a letter to say “Yes, we are sorry, [brother’s name] was a victim of the Troubles.” Anyway, like we didn’t need to be told that (2005/06).

**Individual Factors**

The age of the bereaved was particularly pertinent in cases where a parent had been killed (Paterson, Dunn, Chaston, & Malone, 2006). In cases where participants had lost a parent when they were children, time did not seem to make a difference. In fact, some participants felt worse years after the event when the full impact became apparent:

[The death of my father] affected me badly because I was at that impressionable age, eleven, twelve, so I rebelled until I got to my late teens and it still never really goes away (2005/06).

At the beginning, it was like it happened and that was it, just move on, and then, as we got older, and started realising that he wasn’t there, it was harder. I just remember you had to be ok for my mummy, to keep her ok (2005/06).

Gender differences were noted (Denton, Prus, & Walters, 2004; Kenney, 2003; Ptacek, Smith, & Dodge, 1994; Simmons & Granvold, 2005):

[Men] will never talk about the true issue. They’ll talk about everything else but that issue, they’ll talk about football, what’s on TV. Women are great at getting to the core of the problem and talking about it and discussing (2005/06).

Women reported long-term effects and depression (Cairns & Mallett, 2003; Curran et al., 1990; Hayes & Campbell, 2000; McWhirter, 2002; O’Reilly & Stevenson, 2003; Potter, 2004), whereas men expressed resentment and anger (Dillenburger et al., 2007b):

(My grown up children) say I have to forget him and they think I should be over it after all these years [10 years]. But I will never forget (1985/86).

If there was a door here, where we are sitting, I would have to go over and open the door. I can’t bare the door closed. Probably because of the way they came in through my back door and murdered my husband [17 years ago] (2005/06).

[Thirty years after the event I feel] deeply traumatised, throw-backs, feeling that you were on a long journey to hell, that nobody gave any thought to you, nobody cared for you. It was like acid was poured down to your brain, down your spine, you were burn and now you were eaten away. It was like rust going down your skeleton, and your skeleton was chipped away, chipped away and nothing was coming back to you (2005/06).

I know it’s thirty odd years ago but it seems like yesterday and I still have not got over it and I will never get over it (2005/06).

To me, I would say, inside deeply, I still haven’t snapped out the death of my husband. I would say it’s still there but it will be there until the day I die. It does not go away. It won’t go away and I have learned to accept that (2005/06).

Nightmares and sleeping problems, anxiety or restlessness, flashbacks, and suicidal thoughts (Black, 2001; Tomlinson, 2007) dominated responses across time:

I find it difficult to get a good night’s sleep. Often I waken during the night because I think I heard a noise (1985/86).

After his death I went numb and couldn’t even cry. After that I was hysterical. I don’t remember much for about six months. I had to be drugged. A year later I took an overdose of tablets and ended up in a mental hospital for a few months (1985/86).

At the start, it was fear. The fear was always there. And then, the man that caused it all got arrested. So, the fear eased off a bit. But, in the last five years, it’s there constant. I think about it all the time, what might have happened, what could have happened and I think that we were lucky that we didn’t lose part of our family (2005/06).

I never slept, I was scared to sleep. Then, if I did finally get asleep, the least wee noise, and I was up because you didn’t know what the noise was, who it was, where it was coming from. And, in the end, my doctor put me on anti-depressants. I’m still on them. And I can’t do without them (2005/06).

Til this very day, it has left me with terrible, terrible nightmares. [As a child] I would start in the middle of the night and I would be screaming and yelling and [mommy and daddy] would come in and wake
me and I always said, “Please if you hear me, wake me” because you have no idea how sore and severe it is in your chest. And those nightmares are still continuing to this very day. Then, it would be every, every night, but now, it would be maybe a couple of nights a week. I would go to bed and have a nightmare (2005/06).

Some respondents had been physically injured or disabled or were on long-term medication:

My doctor gave me nerve tables. After a while, I got a bit better and he stopped the prescription. But he said I could always call on him if I needed help (1985/86).

I didn’t want to go to the doctor for tablets at first. But my family talked me into going. He didn’t seem to mind. He knew my husband and we talked about him. Then he gave me the phone number of a bereavement counsellor. That helped more than tablets would have done (1985/86).

Well, physically I don’t have any great power in that arm (2005/06).

At that particular time, you didn’t hear about counselling and things like that, so people would have gone to the doctor and would have been prescribed anti-depressants (2005/06).

The night that [my brother] died, the doctor wrote a prescription for sixty Diazipan and I can’t remember what the other thing was, and he says, ‘Yous will need to take this’. We are not really into that type of lifestyle, so we were quite annoyed with that (2005/06).

Social Factors

Social factors, communication, and family relationships (Follette, Ruzek, & Abueg, 1998) were important. In some cases, education was affected in the long term:

My daddy always [said], go to university and go and see the world. None of us did. Although I stayed in school until I was just coming up to twenty and got a job. I think if he was here, would I have done it different (2005/06).

I’m doing “Essential Skills” course at the minute. My education was affected by the Troubles [lost father at 11 years of age]. I’m starting to get brainier now (2005/06).

[My son] was only nine and the school sent for me and when I went up, it seems that he was laughing all the time in class and he was annoying the teacher. I took him and they asked him why he laughed all the time and he said that well, every time he thought about his daddy he didn’t want to cry so he laughed (2005/06).

[My daughter] had just turned thirteen. She couldn’t cope at school whatsoever. The phone be ringing, “Mrs (name), come and collect your daughter. She’s in the sick room.” It was just all the time. So, they advised me, whenever she came to the age to leave school, to put her into a wee job that would occupy her mind, and then, if she wanted, whenever her mind was cleared, she could go back to her education. It did ruin her life, all the teachers said, “she was so clever,” but yet all she wanted to do was lying on bed, crying. That was it. She did not go back and do her education (2005/06).

Traumatic events had detrimental financial and economic consequences, especially in the early years:

Sometimes I don’t really know how to manage. Money is always tight and it is difficult to make ends meet (1985/86).

I mainly worry about the children. They see their friends getting new toys and clothes and I just cannot keep up. At times I get very depressed because of this (1985/86).

I spend all my money on the children. They come first. That leaves me with nothing for myself (1985/86).

[My husband] was a businessman and him and I ran a business together. So, whenever that happened, I had to close the business. I had a 13-year-old daughter and I had to cope with bringing her up. I did not want to go on. I thought the world came down round me, my business, I lost my business, I lost my husband. I just didn’t want to go on (1985/86).

For some, the traumatic events meant the complete breakup of family and social relationships and consequently participants suffered intense loneliness:

Loneliness is really the worst of it all. I feel so alone since he was killed. He was always there for me (1985/86).

I had one son that time [of my husband’s death]. He was nine years of age. He’s forty now and I haven’t
saw him for seven years. I’m also a grandmother. I don’t see the child either. All these things that I have lost, for the loss of my husband (2005/06).

[My mother] went like a recluse, and she only died last year and I just realised that I’m 61 and the last 32 years of my life have just passed. I don’t remember my children growing up, you were concerned about my ma. Me and her were always fighting, that’s just the way it has affected me, and she was the same, she was like in a time warp, she just never moved on really and I was looking after her (2005/06).

It’s nice to think that somebody is thinking about you, that you are not left sitting in the house, ’cos when it happens so long ago, people are incline to forget that your hurt is still the same (2005/06).

Social support was very important across time (Brewin, Andrews, & Valentine, 2000; Guay, Billette, & Marchand, 2006; Ozer, Best, Lipsey, & Weiss, 2003):

My mother, my sister, my brother and my husband’s niece helped me by looking after the children and by loving and caring for me and in other ways I cannot find words to express (1985/86).

My family was very, very supportive. Only for my parents, I suppose, and my brother, life would be a lot harder (2005/06).

I had a friend and I hadn’t seen him in years and years. He turned up in the funeral and [after that] he came to the house every other day, and we had a cup of tea. We never talked about [my brother’s] death or anything and I think, it was his banter and talk. I started to come round, I started to believe life had to go on (2005/06).

However, some found it particularly hard to talk with their own families:

Never mentioned. If somebody said his name, somebody cried, so it was easier, don’t talk about him (2005/06).

No, we didn’t talk to each other. That was our way of dealing with it (2005/06).

Political and Cultural Context

Over the years, the kind of violence experienced by participants changed (Dillenburger et al., 2008; Hamber, 2004). Most of the violent deaths occurred prior to the ceasefires; however since then, paramilitary feuds, riots, and punishment shootings continued at considerable social and economic cost (Hillyard, Rolston, & Tomlinson, 2005):

[The Troubles] split the community in two and this is my community, this is where I’m from. It devastated me when I see what was happening to my area (2005/06).

It was very difficult situation to be in. You were afraid to say anything around other people. It actually destroyed this community. The atmosphere, you could have cut it with a knife. Really, really awful (2005/06).

Social migration in the early years was because of financial reasons, because of sectarian intimidation, or to avoidance of painful memories:

I moved house because I could not live in the house where my husband died (1985/86).

We moved into the small town nineteen years ago to get away from the Troubles in Belfast (1985/86).

We had to move house after terrorists attacked our previously owned home. We did not feel safe in the old house anymore (1985/86).

In the early years there was little structured support for victims (Darby & Williamson, 1978):

There was no therapies about, then. I don’t think it was understood how much of an impact it did have on people (2005/06).

You were on your own. The statutory bodies were a pain in the backside, you know, because dealing with the statutory bodies was a disaster. Well, first of all, many of them didn’t know how, didn’t know how to react, didn’t know what to do, either that or didn’t want to (2005/06).

With the beginning of the Peace Process, increased attention was given to victims’ issues (Dillenburger et al., 2007a; Fay, Morrissey, Smyth, & Wong, 1999; Hamber, 2003; Hayes & Campbell, 2000; Kulle, 2001; Morrissey & Smyth, 2002; Northern Ireland Office, 1998; O’Reilly & Stevenson, 2003; Smyth, 1997, 2000). After the Good Friday Agreement in 1998, victims’ issues were more fully recognized (Bloomfield, 1998) and substantial support became available (Dillenburger, Akhonzada, & Fargas, 2006; McDougall, 2006):
I hold the victim support group very dearly. It’s like a second home to me. And it’s somewhere where I feel that I can come in and be understood. If there is anything that I need, there’s somebody there that maybe can help me (2005/06).

If the group went away in the morning, where are we going to go? You know, we would be lost without the group. If the group folded in the morning, we are back into the corner. You know, it’s all taken from you (2005/06).

Everybody in the group is a victim. We all know each other, where we came from and where we are going to, whereas you go in somewhere else, you don’t know who this is, you don’t know who that is. Specially, when people come into the house, and murder your husband. What trust have you? You don’t know who did it, you know, they could be sitting beside you and you don’t know (2005/06).

I’m happy with the people here, I know nobody is judging me here and knowing that the people here are possibly from similar circumstances that I’ve been through. I know I’m alright here (2005/06).

I think the reason I still come here is because it was there for me at the start. Because the people that started this up, we all went through the same thing, we all knew how each other felt. And I think that’s what’s holding all us together so much, the closeness (2005/06).

We are all in the same boat. Maybe some haven’t had it as bad as others, or maybe they have a completely different reason why they are here, but everybody, it’s the same stuff muddle on through together, you know what I mean (2005/06).

We have a common denominator. And people that come here I have affinity with them and as I say, we all hone in on the same subject. And the people who come here are people who are also affected, and you can relate too with them, and for bys, if you went outside this group, you just don’t know the people and I don’t trust, fully trust the people in other groups, possibly because I don’t know them, and I don’t want to know them, because I feel safe in my own environment here (2005/06).

Although political changes led to an ending of continuous bombings and shootings, the peace process did not end violence per se (Jarman, 2004). For example, in 2005, a series of violent street riots affected a particular area in Belfast:

There was a few incidents that happened on the road here, last year, which affected me pretty badly, because a lot of the stuff happened outside my work here and I was able to watch it from the top of the street (2005/06).

I actually sat there in here and cried, because of the state of the place, you were coming down and you were having to wash the doors before even get in. And it affected me pretty badly and I was really, really depressed here for a couple of weeks. It brought everything back again what you have suffered. It just brought it all back again, our nervousness (2005/06).

But this is after the Good Friday Agreement, after the ceasefires were on, you know, when everybody said “The war’s over. We are finished with it.” And everybody sort of said, “We don’t have to look over our shoulder every five seconds.” And basically people were walking in the street thinking that this would never happen (2005/06).

[During a feud] I saw the police land rover and I jumped in front of it and I says, “Please help me! Please help me! Get my family out.” And they said, “No, we can’t go in there,” and they wouldn’t stop. So I jumped in front of it. And I shouted, “Stop! Or run over me!” So, they stopped and I begged them to go down. I says, “Please, get my family out of there.” They says “We can’t” and they drove away in the other direction. The situation on the road with the police is terrible, really, really, really bad. And it has been this five years (2005/06).

The need for justice was expressed particularly in the early years (Hamber, 2003) and after the ceasefires, the early release of prisoners was of great concern (Gilligan, 2006; McDougall, 2006):

If we didn’t live in this troubled society my husband would still be alive today. I think the government should do something to stop this senseless killing (1985/86).

I feel really very bitter towards society, in particular because it was our own side who killed him. Are these murders ever going to stop? (1985/86).

I think, in many ways, you lose faith in democracy. The people who killed my brother were never brought to justice. The democratic system persecuted my sister-in-law rather than help her (2005/06).
And they were never caught the ones that murdered my husband. No-one was ever brought to justice (2005/06).

No, because nobody was charged, nothing was done. And they said there was no proof, no anything about it. Now I have never in my life seen my dad that angry (2005/06).

The police never even told me that the two boys that were in jail were let out. Someday [I could] meet them up in the street. [Should I] ignore them as if nothing happened, as if they had never tried to kill me (2005/06).

The Government had put in place drop-in-centres for ex-prisoners, but for the ordinary decent law-abiding citizen, who became a victim, there was nothing (2005/06).

It’s us that has to pay the price, not them, they’re running about free, happy, laughing up and down the street with their own children. I meet them up the town, they are coming along happy, laughing. I’m not laughing. I have nothing to laugh for (2005/06).

Conclusions

In this article, we used narrative inquiry to explore the effects of long-term violence and trauma. Through personal accounts across a 20-year period in Northern Ireland, it became apparent that people experience the effects of trauma many years after the events. Considering the reasons for long-term effects of trauma and to bridge the gap between this kind of individualistic microlevel analysis and a more general macrolevel analysis, we used a contextual analysis framework (Iversen, 1991; Kawachi, Kennedy, & Glass, 1999) developed by Dillenburger and Keenan (2005) that included trauma-related factors, individual variables, level of social support, and cultural/societal factors.

- **Trauma-related factors:** We found that despite differences across time in the intensity of trauma, the experience of multiple traumata, and the immediacy of the trauma experience, there was little difference in the way the trauma related factors were recalled. By and large, participants were able to remember traumatic events in great detail across a 20-year period. They were able to describe exactly what happened, where they were at the time, and how they knew about the events. They were able to recall in explicit detail how they and others were affected at the time, and there was no major difference in the level of detail reported.

- **Individual variables:** We found that individual variables, such as age, did not play a large part in the way participants were affected by trauma over time, except for children who lost a parent. However, there seemed to be some gender differences, with men coping by engaging in public behaviors, whereas women engaged in more private behaviors (Keenan, 1997). Multiple trauma experiences had adverse affects across a 20-year period.

- **Level of social support:** The level of intrafamily support was very important factor in coping across time. Those who were able to talk openly to family members and received support from family and friends coped better over the 20-year period than who did not receive social support. The vacuum of public service provision in the early days of the Troubles accentuated feelings of abandonment, loneliness, and desertion. Recent increases in service provision were appreciated and seemed to help in the coping process.

- **Cultural and society factors:** The impact of political changes across the 20-year period was significant. The peace process and particularly the Good Friday Agreement in 1998 brought with it changing patterns and lowered levels of violence and trauma (Dillenburger et al., 2008). Overall, this had a positive impact; however, some aspects of the agreement, specifically the early release of prisoners, were difficult, especially for those who had experienced multiple traumata.

The research reported here uncovered a stark contraction between early researchers who stated that people coped with the Troubles through intrapsychological processes such as denial, distancing, and habituation (Cairns & Wilson, 1984; McWhirter, 1986) and those who still rehearse the same argument today by saying that “only with the ceasefire in 1994 and the subsequent building of peace were people able to begin to address their higher needs” (Manktelow, 2007, p. 36), and the reality of victims’ lives. Clearly, people who had suffered trauma 20 years ago had higher needs, wanted to address these, and spoke out (Dillenburger, 1992). The problem was that, during the height of the Troubles, no one listened to them!

Today, the realization that coping with trauma is not merely an intrapsychological process (Dillenburger & Keenan, 2001) means that microlevel narratives
cannot be analyzed in isolation but rather should be put in macrolevel contexts (Dillenburger & Keenan, 2005). Personal narratives are an important means to recall and remember what happened and constitute a useful way to record the history of events (Christie, 2000). As such narratives have specific social and cultural function (Thornton, 1995) and can be used to illustrate and record the learning histories of individuals as well as communities (Schwartz, Gramling, & Mancini, 1994). The importance of narrative accounts should not be underestimated; however, in the long term, the question remains as to what should be done once narratives are collated and recorded. For how long are narrative and personal accounts necessary before people can move on and rebuild their lives and their communities? In terms of the shaping of a truly peaceful society, the question is, What happens after the narrative? As Skinner (1980) said some time ago, “One can picture a good life by analyzing one’s feelings, but one can achieve it only by arranging environmental contingencies” (p. 127).

References

Groger, L., Mayberry, P., & Straker, J. (1999). What we didn’t learn because of who would not talk to us. Qualitative Health Research, 9, 829-835.


Kulle, D. (2001). Victims and survivors: A study of the dynamics of the victims’ debate in Northern Ireland. In J. Magowan & N. Patterson (Eds.), Here and now... and then... Developments in victims and survivors work (pp. 79-87). Belfast: The Northern Ireland Voluntary Trust.


Schwartz, S. M., Gramling, S. E., & Mancini, T. (1994). The influence of life stress, personality, and learning history on...


**Karola Dillenburger**, PhD, BCBA, is a Reader at Queen’s University of Belfast, Northern Ireland.

**Montse Fargas**, BSc, MSc, is a research assistant at Queen’s University of Belfast, Northern Ireland.

**Rym Akhonzada**, BSc, is a research assistant at Queen’s University of Belfast, Northern Ireland.