Conflict, Peace and Mental Health
David Bolton

What are the human consequences of war, conflict and terrorism, and what are the appropriate policy and service responses? This book seeks to provide some answers to these important questions, drawing upon over 25 years’ work by the author in Northern Ireland and elsewhere. Focusing on the work undertaken following the Omagh bombing in 1998, the book describes how needs were assessed and understood, how evidence-based therapy services were put in place and the training and education programmes that were developed to assist first those communities affected by the Omagh bombing - and later the wider population affected by the years of conflict. The author places the mental health needs of conflict-affected victims and communities at the heart of the political and peace processes that follow when conflicts end. This is a practical book and will be of particular interest to those planning for and responding to conflict-related disasters and terrorism, policy makers, service commissioners and providers, politicians, diplomats, civil servants, leaders of religion, peace builders and peace makers. It also includes an extensive overview of the efforts to understand the mental health impact of the years of violence in Northern Ireland, reviewing for example, the impacts of loss and PTSD, why it seemed to take so long to recognise the impact, and the challenges of undertaking research in a community that is in violent conflict.

Assessing the mental health impact of the Omagh bombing
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in Conflict, Peace and Mental Health: Addressing the Consequences of Conflict and Trauma in Northern Ireland

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Following the Omagh bombing in August 1998, the local public health and social care services provider in Omagh undertook four major needs assessments in the local community. The experiences and mental health related needs of adults, younger children, adolescents, and health and social care staff, were assessed through four important studies. These produced valuable findings upon which services and practice were developed and which informed the case made to funders. The studies examined the risks to those caught up in the bombing of acquiring trauma related disorders, such as PTSD. These needs assessments provide valuable information for other communities affected by acts of war, conflict and terrorism.

The mental health impact of the Troubles, 1969-1999
David Bolton

in Conflict, Peace and Mental Health: Addressing the Consequences of Conflict and Trauma in Northern Ireland

This Chapter is the first of two that describe efforts to understand the mental health and related impacts of the conflict in Northern Ireland, often referred to as The Troubles. The Chapter covers the period from the outbreak of violence in the late 1960’s up until the period around the peace accord, the Belfast Agreement (or Good Friday Agreement) of April 1998. The early studies reveal little, if any, major effects on the wellbeing and mental health of the population, but as the years go by, evidence starts to build of the impact of the violence, particularly as the ceasefires of the early and mid 1990’s take hold. The developing understanding of the impact was due in part to the evolution of methods and approaches being used by researchers - which is discussed in more detail at the end of Chapter 5.

The mental health impact of the Troubles, 2000–2015
David Bolton

in Conflict, Peace and Mental Health: Addressing the Consequences of Conflict and Trauma in Northern Ireland
Following on from Chapter 4, this Chapter explores the development of the understanding of the impact of the violence in Northern Ireland from the period following the Belfast Agreement in April 1998, until 2015. The ceasefires and demilitarisation of the 1990’s and the development of politics in the late 1990’s and thereafter, coincided with increasing evidence that the violence had had a significant adverse impact on the mental health and related wellbeing, economic and social needs and circumstances of the population. The author explores why this might be so. He discusses how the cessation of violence, the challenge of shifting from conflict to peace time ways of thinking and behaving, the use of more appropriate methods of research and other factors, exposed a high level of mental health need linked to the Troubles - with one study suggesting Northern Ireland had the highest level of post traumatic stress disorder (PTSD) across 30 or so identical international studies. One explanation is that the Troubles endured for over 30 years with high levels of exposure to violence and threat. The trans-generational impact of the Troubles is also discussed. The Chapter concludes with lengthy discussion on these themes and on the challenge of undertaking research in communities where violence is on-going.

Claiming trauma

Carol Acton and Jane Potter

in Working in a world of hurt: Trauma and resilience in the narratives of medical personnel in warzones

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Unlike representations of military doctors and nurses in the First and Second World Wars as working heroically against all odds, returning medical personnel from the Vietnam War were seen as an integral part of a vilified military machine. The negative reception on their return home profoundly affected the psychological trauma they carried in the war’s aftermath. In the particular instance of nurses they were even denied the support of veterans groups, since, being women, they were not considered to have a legitimate claim to belonging to these organisations. This chapter focuses on writing (and some interviews) by Vietnam nurse veterans and their importance as the first medical personnel in the 20th Century to claim the legitimacy of their experience as traumatic. As important as their political action, their memoirs paved the way for a broader understanding of what was beginning to be diagnosed as Post-Traumatic Stress Disorder (PTSD) and the recognition
that it was induced not only by combat, but by constant witnessing of and medical response to the violent consequences of war.

Crying silently
Carol Acton and Jane Potter

in Working in a world of hurt: Trauma and resilience in the narratives of medical personnel in warzones

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The Vietnam nursing experience has received more attention than that of doctors and other men serving in a medical capacity. To redress this imbalance, this chapter considers a range of accounts by doctors and medics to explore the diverse range of their experiences during the Vietnam War. Some doctors worked under enormous mental and physical pressure in field hospitals that took in mass casualties; others worked in the Vietnamese community, part of the American ‘hearts and minds’ campaign. While on the surface it might appear that mass casualty surgery was the most psychologically difficult work, doctors accounts of treating Vietnamese civilians record how they bore an equal psychological burden of working in very poorly supplied facilities, treating a huge range of diseases, many of which were incurable or where treatment resulted in death from post-neglect. They also had to confront the consequences of their own military’s actions on civilians. For both doctors and medics, these accounts show that they had difficulty finding resilience in a sense of achievement as their counterparts had done in the two world wars, since, on a personal level, they were unable to screen out the sense of the futility of their work.