

Social Psychology Health and Terrorism

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Social Psychology

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- **Social Psychology** is the scientific study of how the thoughts, feelings, and behaviours of individuals are influenced by the presence of others as well as the internalized social norms that humans are influenced by, even when alone.
- It helps in understanding how each person's individual behaviour is influenced by the social environment in which that behaviour takes place.

- Social Psychology encompasses a wide range of social topics, including:
 - Group behaviour
 - Social Perception
 - Leadership
 - Nonverbal behaviour
 - Conformity
 - Aggression
 - Prejudice

- The way that we see other people (and the way we think they see us) can play a powerful role in a wide variety of actions and decisions.
- Just think for a moment about how you sometimes act differently in a public setting than you might if you were at home by yourself????
- The presence of other people can make a difference in the choices we make and the actions we take.

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Health

Health

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- WHO defined health as:

- *“a state of complete physical, mental, and social well being and not the mere absence of disease or infirmity.”*

- **Physical health** – refers to anatomical integrity and physiological functioning of the body. To say a person is physically healthy:
 - All the body parts should be there.
 - All of them are in their natural place and position.
 - None of them has any pathology.
 - All of them are doing their physiological functions properly.
 - And they work with each other harmoniously.

- **Mental health** - ability to learn and think clearly.
- A person with good mental health is able to handle day-to-day events and obstacles, work towards important goals, and function effectively in society.

- **Social health** – ability to make and maintain acceptable interactions with other people.
- E.g. To feel sad when somebody close to you passes away.



- **Disease** is the existence of some pathology or abnormality of the body, which is capable of detection using, accepted investigation methods.
- **Illness** is the subjective state of a person who feels aware of not being well.
- **Sickness** is a state of social dysfunction: a role that an individual assumes when ill

Terrorism

Terrorism

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- Terrorism has challenged the physical, psychological, occupational , economic, and spiritual health of Pakistan for more than a decade now. It has affected all geographic settings and sociocultural sections of the nation.
- **WHAT IS TERRORISM?**
- Terrorism is a violent and coercive intimidation strategy. It aims to generate fear , panic , insecurity, hopelessness and helplessness as well as mistrust in societal institutions. It is employed as a tool to challenge , destabilize , and destroy a country , or a society in the same way as war.

- Often , the country's reaction to terrorism in the form of excessive use of force, disruptive legislation and extensive security measures may add to the fear and distress of its people.

- Terrorism has a negative health impact on the individual and on society as a whole . It isolates individuals , families , communities , cultures, and even countries from others.
- It generates strong feelings of mistrust , paranoia , depression , anxiety and can even have clinical consequences in form of conditions like posttraumatic stress disorder.(PTSD)

- At any individual level, the survivors reactions include changes that may persist for several weeks, months and even years.
- These include a preference for isolation , tolerance for noise , marked irritability and hyper vigilance .
- Hyper vigilance is a state of increased sensory sensitivity and an increase in the intensity of behaviours that defuse threats.

- Survivors also experience periods of increased religiosity , followed by alienation from religion, intermittently.
- Survivors are at an increased risk for excessive smoking and misuse of tranquillizers , cannabis , opiates and alcohol.
- They may also develop a tendency to undertake reckless actions, particularly while driving.

- They also start believing in hearsay , false attributions and negative propaganda.
- A higher degree of greed, mistrust, jealousy, prejudice, need for revenge, paranoia and intolerance towards minorities and certain cultures tends to prevail amongst survivors of terrorist attacks.

- These individuals are more prone to develop psychiatric disorders like PTSD , Dissociative states, Depression and medically unexplained symptoms and the lowered immunity leaves them vulnerable to autoimmune disorders in the years to follow.

Profile of Suicide Bombers

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- Suicide bombers are known to share the following socio demographic parameters:
- Suicide bombers are borne out of social settings challenged by poverty, illiteracy , ignorance , intolerance, disease, insecurity and injustice.
- They come from large families with many children restricted in small houses with minimal civic facilities in slums and katchi abaadis.

- The lack of adequate monitoring and falling out of regular schooling adds to the risks of falling prey high risk factors that add to the risk includes:
 - Homes with a culture of domestic violence
 - Physical, emotional and sexual abuse
 - History of delinquency
 - Conduct disorder
 - Limited availability of emotional outlets like music, sports, gender interaction

- A traumatic childhood filled with humiliation, feelings of powerlessness and lack of affection is exploited by charismatic trainers who provide group identity, strong affinity and brotherhood to overcome isolation from family and community.
- Males between the ages of 10 to 24 are the most common recruits of this introduction.
- Recently however females have also begun to be recruited.
- A suicide bomber is driven mainly by strong feeling of anger, revenge, and hatred.

Is a terrorist suffering from mental illness?

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- Terrorists are known to experience paranoid anxiety, envy, magical thinking, omnipotent denial, grandiosity and massive depression.
- At the same time they are often highly intelligent, sane, very focused, and have no identifiable psychopathology.

Psychosocial Management of Consequences of Terrorist Act

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- Some key areas to be addressed include:
- **1. Mobilization of Psychotrauma Teams:** In the same way as health professionals are trained to respond to injuries, trained teams of health professionals need to be formed to address psychotrauma. These teams need to operate as first responders. They can be formed by training volunteers, rescue workers, ambulance staff.

- **2. Sensitized and train the surgical team members in psychotrauma and its management.** Training in the use of effective communication skills, empathy, awareness that fear and numbness can act as aggravating factors in the perception of pain and reactions to injuries can help in management.

- **3. Linking up survivors and the dead with families and units/centers:** The biggest psychosocial support in response following a terrorist activity comes through help in establishing contact between the survivors of the act and their family and loved ones.
- **4. Updating:** incase exact information about the lost, injured or dead is not available, it is important to not leave the affected families unattended with crowds, media, and irresponsible people often lurking outside such settings.

- **5. Reconstruction of dead bodies:** The bodies of the martyrs in terrorist incident may sometimes be found in a mutilated and deformed state. Seeing such bodies can have a traumatizing impact. Attempts at reconstruction of these bodies by professional and presentation of the dead bodies in customized coffin boxes may be considered.

- **6. Religious and cultural rituals:** Sensitivity must be shown to the burial customs, and funeral rituals that the family or a community prefers.
- **7. Ongoing Psychosocial support for survivors and family:** The exhaustive rescue operation following a terrorist attack is often followed by a period where everything goes quiet. The initial enthusiastic response and commitment shown must be followed up by a sustained effort to maintain medical, psychological surgical follow up after discharge from the hospital.

- **8. Return to Normal Activity:** An early restoration of life in all its vigor and normality is the key to building resilience and health. Affected children who do not have disabling injuries and are not suffering from any acute medical condition should be encouraged to return to the pre-trauma routines of life as early as possible.
 - Sports
 - Drawings
 - Supported discussion groups
 - Mutual support and organized activity

