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Research Article

PSYCHOLOGICAL MECHANISMS HINDERING THE MOURNING PROCESS AMONG WIDOWS OF SPOUSES WHO WERE VICTIMS OF TERRORIST ATTACKS AND INTERCOMMUNITY CONFLICTS IN BURKINA FASO

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Abstract

Terrorist attacks and inter-community conflicts, which affect Burkina Faso in some places, cannot leave anyone indifferent, especially with regard to their impact on widows of men who are victims of those scourges. It is in this perspective that the current study is situated. It aims to highlight the dynamics of post-traumatic stress symptoms and their impact on the mourning process of widows of people who died in terrorist crises and intercommunity conflicts. This is done through three case studies using the semi-directive clinical interview method performed on the site of internally displaced persons in Barsalogho, Center North of Burkina Faso. The thematic content analysis was conducted on the verbal material collected. It reveals that the type of post-traumatic stress disorder, the brutality and virulence of the beloved one's death, the experience and the reaction to the tragedy, complicate the mourning process for widows.

Keywords: Mourning, Post-traumatic stress, Disorders, Conflicts.

INTRODUCTION

The terrorist and inter-community violence that is currently shaking Burkina Faso, particularly in some of its regions, is a cause for reflection. They compel human sciences to take an interest in them because of the collective and individual human loss they generate. One of their most dramatic consequences is their paroxysmal level with thousands of deaths, including heads of families. With the disappearance of those heads of families, a world or an organization collapse, including the family unit, and serious upheavals and disturbances are recorded by the individual or the community. In a nutshell word, the human suffering extends or amplifies. From this point of view, death affects the psychological balance of the family members. It is more painful for the widow who has a community of interests in common with the husband, but who is suddenly pushed into the forefront of the family entity for which she is materially and socially responsible. The suffering of the wife is all the more intense, long-lasting and difficult to bear if the disappearance of the beloved one occurs in particularly traumatic circumstances and puts the wife in a trial, experiencing her own end on earth in the same context. It is therefore essential to help the widow adjust psychologically to reality by successfully mourning her husband. This will help her to quickly stand the situation in order to contribute to the psychological balance of the family and the preservation of the future of its members. The current study is therefore of interest, by focusing on the post-traumatic stress disorder of the person most exposed to the tragedy of loss of a beloved one. The study drawson the basis that successful mourning will have a positive impact on individual and family life through its new driving force, the widow, and also focusing on this question: Why mourning is often undermined?

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Senior Lecturer in Clinical Psychology and Psychopathology, University Joseph Ki-Zerbo, Burkina Faso Thus, this study aims to understand the psychological factors that may hinder the mourning of the widow whose husband is torn away from her affection by terrorist attacks and intercommunal divisions.

PROBLEMATIC

Burkina Faso, like other countries such as Mali and Niger, has been plagued since 2015 by violent behavior in the form of threats, terrorist attacks and relatively frequent intercommunal conflicts. These actions, sometimes of unprecedented violence, are psychological assaults on vulnerable people such as children, women and the elderly, not forgetting other society members. Over the years, the toll on both the defense and security forces and the civilian population has increased. For example, an attack on 19 August 2019 against the military branch of Koutoukou resulted in 24 deaths among the military, according to Cann et al. (2019). Similarly, a terrorist attack on the West African mining company (SEMAFO) resulted in 37 civilian deaths and 60 injuries. In 2019, Burkina Faso has a total of 1,295 deaths due to terrorist attacks and intercommunal divisions, according to International Crisis Group (2020), and a population of 486,360 displaced people related to those violence (Ministry of Women and National Solidarity, Family and Humanitarian Action, 2019). The consequence of such a fact is human suffering as Josse (2016) writes, terrorism aims to spread horror, outrage, revolt and terror within a targeted population and above all, to set horror within it. This shows the serious psychological effects of these unprecedent violence actions, including their inevitable physical damage. The same applies to the various deep and/or lasting traumas suffered by a relatively fragile category of people, both biologically and emotionally, who are considered as the cornerstone of the family unit: wives. Wives whose husbands disappeared in terrorist attacks and inter-community crises experience a multi-faceted and unbalancing internal drama. On the one hand, they are confronted with the sudden loss of a

beloved one, their husband, in sometimes shocking conditions. On the other hand, they have to face a new family context and a new personal psycho-affective life. Finally, they wonder how to get out of their disarming situation and have a future for themselves as well as for those around them. This thus justifies the interest in the theme of mourning for the widows of terrorist attacks and intercommunal antagonisms victims. For that, a central question arises: what are the manifestations of post-traumatic stress disorder and how can they hinder the mourning process?

Before answering this question, it is necessary to clarify the meaning of certain terms. These are the notions of trauma and mourning at the core of this research. If the former is the psychological injury resulting from a critical or unbearable event of a brutal nature, the latter is the reaction resulting from the loss of an object of attachment accompanied by distress and moral pain. From this perspective, trauma and mourning are closely related. Only the nature of the emotions makes them different in the sense that fear marks trauma while sadness marks mourning, as Mormont (2009) argues.

These terminological clarifications shed light on the meaning of this research: is mourning not likely to be undermined by the type of symptoms of post-traumatic stress disorder?

In our opinion, there should be an issue of psycho-traumatic symptoms in the adjustment to mourning among widows who lost their husbands in terrorist acts and intercommunity conflicts that have spread to certain regions of Burkina Faso. This is a real problem in the psychopathology of mourning. Indeed, the widows of men who disappeared due to violent actions have a specific psychological state. They experience post-traumatic stress disorder. As a result, we can consider that they can be characterized by at least one of the following manifestations: revival, avoidance, hyper activation. These symptoms seem to us likely to have a significant influence on the mourning process related to the loss of their husbands. Bowlby (1984) theory of attachment and Janoff-Bulman (1985) theory of shattered core conceptions support this view. Based on the concept of bonds, the former maintains that a loss only takes on its meaning in the solid and lasting bond established with the lost being, the lost object, which means that we cannot talk about mourning without reference to this bond. Building on the disruptive effect of the traumatic experience to sketch out an explanatory scheme for posttraumatic stress disorder, the second theory provides an understanding of the mourning process. Combining this with the disruptive effect of the tragedy, it reveals how the critical event breaks the inner life of the person confronted with the loss of a beloved one and alters the latter's perception of themselves, of the world and their conception of the relationship with reality. Such analyses seem to be corroborated by some existing scientific work. Thus, in an attempt to examine the variables likely to complicate the mourning in a sample of 69 individuals who lost their beloved one through suicide or illness, Thériault et al. (2011) report that the insecure attachment style and the intensity of traumatic reactions are effective in predicting the development of a complicated mourning. This conclusion is in line with Bacqué (2003) view that the symptoms of post-traumatic mourning do not facilitate the mourning process. This can be observed in people with a certain psychological vulnerability and in those with a borderline personality in particular. The explanation is that, because of their psychological fragility, the mourning

process seems to be inhibited in these people, especially if the death of the beloved one is brutal and violent. Bournival *et al.* (2011) make a similar point. Working on 46 widows who lost someone through suicide or unintentional death, they point out that a high level of psychological distress negatively affects the mourning process because of, among other things, the attachment style with the deceased and the couple quality of life before the husband's death. Therefore, we can consider that the dynamics of post-traumatic stress disorder (PTSD) (negatively) conditions the mourning process of widows of terrorist attacks and intercommunal conflictsvictims. This is the objective of the present research. To achieve it, we must adopt a qualitative methodological approach appropriate to field data collection.

METHODOLOGY

The methodology used here is based on three main components: the study framework and participants, the material used, the analysis of the data collected.

Study framework and participants

The effect of the current terrorist acts and inter-community conflicts in Burkina Faso is the insecurity felt, the internal and external displacements of populations, not forgetting the psychological disturbances the individuals undergo. The municipality of Barsalogho is one of the areas severely affected by this dramatic cycle, as it is one of the red zones demarcated by the government at national level. It has 78,919 inhabitants divided into 10,897 households and 43 villages, according to 2006 General Census of Population and Housing. In addition to its predominantly young population, it is characterized by $52.\overline{79}\%$ women proportion of the population. This means that violence, threats to life, insecurity and many other misdeeds caused by terrorist attacks and inter-community crises psychologically unbalance the female population, which is in the majority. When we know the importance of women's roles in the family as well as in society and the economy, we wonder about the seriousness of the post-traumatic disorders that affect some of their members. This explains the choice of the Barsalogho site in the province of Sanmatenga and the population of internally displaced women in this area, who have lost their husbands in terrorist attacks or intercommunity conflicts. This is all the more undeniable as women, say Kessler et al (2005b), suffer more post-traumatic stress disorders for longer periods than men. Also, given the qualitative approach that presides over this research, we opt for case studies that are emblematic of what these women experience with the violent and sudden disappearance of their husbands. This leads us to select 3 women representatives of this cohort with 4 characteristics. They are mothers, at least 18 years old, have already been exposed to the critical events of terrorist attacks and/or inter-communal conflicts, have experienced the mourning of their husbands after 6 months following the critical events.

MATERIALS

The clinical method is used here because it is suitable for qualitative studies such as ours and focuses on the search for meanings as we see it. The clinical interview implemented is semi-directive. It is a question, for us, of creating a situation of dynamic exchange which, while limiting participants'

rambling possibilities, oblige them to express themselves on the precise aspects submitted, to let show the background of their psycho-cognitive and affective state. Thus, the person will tell with a certain autonomy or ease (suppression of psychoanalytical resistances), their life history, through their representations, emotions, feelings and undergone experiences. In a nutshell, the semi-directive interview used will probe the depths of the participant to allow us apprehend the manifestations of their post-traumatic stress disorder and the strategies they deploy to cope with the mourning of the husband.

To this end, the interview focuses on the following points:

- Identification of the person: recording of certain personal characteristics such as age, socio-cultural group, marital and socio-economic status, number of dependent children;
- Experience of critical events (terrorist attacks, intercommunity conflicts): circumstance, reaction, current state, subjective explanation of the situation;
- Conditions of mourning: moments and circumstances of the husband's death, immediate experience, perception of the future, apprehension of the moment, meaning given to the loss;
- Loss of the beloved one and the mourning mechanism involved: perception of mourning, attitudes and behaviors before the loss, recall of the last relationship with the deceased, current difficulties encountered, possible opportunities for resilience (ease), social support (from relatives, in-laws, friends, brothers, sisters);
- Current consequences experience regarding the new personal and family situation.

The interview was conducted in a room in the chosen study setting for 1 hour and 45 minutes. At the beginning, we make sure that the participant who needs to speak has a certain balance or comfort level. At the end, we try to console or provide psychological support to reduce the negative psychological state or to reinforce the psychological exit from mourning.

Data analysis

The speeches produced by participants cannot be used directly for interpretation because of the risk of distorting some aspects of them due to subjectivity, strong emotion, distress or the risk of personality disturbances. Thus, we use content analysis to extract the essential and explicit elements from the verbal statements. This method, says Bardin (2005), allows for the objectification of discourse content. And the particular technique that allowed its implementation is thematic content analysis. This offers the advantage of revealing the content of the participant's expression in relation to the undergone reality that they disclose. It is conducted on the basis of the following three previously defined analysis units:

- The unity of the context is constituted by the paragraph;
- The unit of content is the sentence or paragraph;
- The unit of information is the word or phrase conveying a specific idea in each sentence.

In this way, instructive insights were gained into the mourning strategies adopted by the widows interviewed in front of their tragedy. These are discussed in the analysis of the results.

ANALYSIS OF THE RESULTS

The initially stated work objectives (cf. p7) command the analysis of the results obtained following the field survey. They concern the mourning process in relation to the type of symptoms of post-traumatic stress disorder. In this respect, this research indicates that the mourning process is not easy for the widows surveyed. This is evidenced by the thematic content analysis of the discourses of each of the three cases studied and the results summarized.

Case study

The discourse produced by each of the three cases examined in this research was submitted to a thematic content analysis. This allowed us to extract the essence of the message it conveys.

a) C.A.N. case

A detailed analysis of C.A.N. speech reveals the following characteristic clinical facts:

- Blocking the mourning process;
- Blocking factors in the mourning process: psychotraumatic syndrome, type of trauma experienced and insecurity of bonds with the deceased;
- Existence of a disinvestment or withdrawal of bonds with the missing husbands;
- Dependent ambivalent insecure attachment;
- Inhibition of mourning with the deceased due to insecure attachment:
- Severity of post-traumatic stress disorder;
- Prevalence of revival and hyper activation symptoms;
- Destruction of cognitive schema underlying the symptom of revival, hyper activation;
- Existence of death and loss anxiety.

b) R.O.M. case

The verbal production of R.O.M. is also exploited using thematic content analysis. This allows the following prominent (salient) clinical aspects to be identified:

- Blocking of mourning process due to psycho-traumatic syndrome;
- Characteristics of hindrance to mourning: memories, avoidance and insecurity of attachment with the deceased;
- Widow difficulties in adjusting to the reality principle;
- Deep reasons for the failure of the mourning process: collapse of cognitive system and type of insecure attachment;
- Psychic fixation on the traumatic scene and on the deceased, making mourning difficult;
- Explanation of psychic fixation: breaking of the person's internal life and anxiety felt.

c) A.F. case

A.F. statements contain significant information. Their content analysis reveals a number of central clinical elements which can be summarized as follows:

- Ambivalent insecure attachment type;
- Blockage in the inner transformation through the modification of the relationship with the deceased related

- to the impossibility of disinvestment regarding the deceased;
- Consequence of negative psychological state: persistence of post-traumatic depression characterized by moral pain and a negative mood expressed by anger and sadness;
- Aggravation of hindrance to the mourning by the repetition of traumatic experiences;
- Factors that perpetuate depression: abruptness of the deceased death and the traumatic substitution of the deceased through the return of the new birth (new-born child from the widow after the death of the husband).

Summary of results

The mourning process of the widows considered in this research is hindered. Indeed, the extent or severity of the post-traumatic stress disorder prevents the mourning process from being conducted because of these symptoms of revival and hyper activation since it "condemns":

- a) The person to recall the initial critical scene over and over again. These revivals encourage the person to fixate on the trauma experienced. The disorganizing effect of the trauma induces a cognitive sideration that is not compatible with individual resilience:
- b) The worsening of the subject's psychological state, linked to the symptoms of hyperventilation, increases the subject's psychological suffering.

This results in an emotional state dominated by anger and a negative mood which can only make toxic the relationship with the loss of the beloved one. The mourning process is also undermined by the repetition of potentially traumatic events such as threats of violence and terrorist attacks as well as traumatic experiences prior to the loss of the husband:

- a) The people interviewed experience a type II trauma. This type of trauma does not make mourning possible because of its retraumatizing and disorganizing effect on the victim. In addition, the death anxiety and the anxiety of loss of attachment links inherent in this type of post-traumatic stress disorder complicate the mourning of a close person such as the husband;
- b) Similarly, the widow does not easily elaborate the lost person because of the fragility of attachment links with the deceased. The result is a specifically ambivalent and anxious-dependent insecure attachment that blocks the mourning process, given the impossibility of an affective disinvestment from the deceased. As a result, the widow remains 'attached' to the lost person.

Besides, peripheral elements do not facilitate the mourning process. For example, the circumstances of the death, combined with the attachment insecurity, make mourning difficult because of the sudden nature of the death. Finally, other factors hindering the mourning process are the multiple losses in traumatic contexts, together with the persistent depression. By referring to Bowl's attachment theory (see p6) to interpret the results for the three cases studied, we can easily understand how the dynamics of post-traumatic stress disorder symptom is likely to make adjustment to mourning difficult. Indeed, the death of the husband gives rise to an insecurity of ties in the widow, characterized by an ambivalent-dependent attachment to him. This attachment makes it difficult, if not

sometimes impossible, to disinvest from the deceased. It generates symptoms that refer to behaviors of attachment activation and loss protest, leading to an oscillation that prevents to elaborate the mourning of the loss. Mourning a loss implies the existence of links with the lost object. Therefore, the attachment modality is crucial in the reaction to the stress and in the adjustment to the loss object mourning. Our views on the case study are also supported by Janoff-Bulman theory of shattered core beliefs (see p6). We can argue that all of the widows' fundamental conceptions are shattered by the critical incidents they have just experienced with the unexpected death of their husband. In other words, victimization leads to a questioning of their world conceptions, their ways of experiencing reality and their relationship with others. The persistence of the shock of their husband's death results in a recurrent experience of the deceased memories. The high intensity of their trauma exceeds their capacity for cognitive processing of the events. In total, we can consider that the traumatic experience caused the collapse of the internal world of the widows interviewed, which consisted of ideas, beliefs and representations about themselves and the people around them. It disrupted the psychic balance through the disruption of the inner world and the relationship with the environment, making it impossible for cognitive information treatment.

DISCUSSION

Our study shows that the adjustment to mourning the loss of a spouse is made difficult, if not thwarted, by the symptoms of post-traumatic stress disorder, particularly those of revival and hyper activation. Avoidance symptoms disrupt the mourning process because they prevent the awareness of the missing object that is necessary for the elaboration of the loss. This is corroborated by Thériault et al. (2011) about women whose husbands have died as a result of suicide or illness. The authors emphasize the simultaneous presence of a mourning and a trauma, making the mourning process more durable over time and more important in terms of the effort required. Our conclusions also agree with Bacqué (2006) view that the mourning process is complicated by a psycho-traumatic syndrome if the death of the beloved one is brutal and violent. This is the point of view expressed by Chahraoui (2014) who writes that psycho-trauma conceals and interrupts the elaboration of mourning through its effects of sideration and stupor of the psychic apparatus. Thériault et al. (2011) do not report a contrary observation when they state that the unpredictable nature of the death associated with the experience of their own death risk in the same circumstances as the husband, complicates the mourning process that widows conduct. Therefore, we can consider that the severity of posttraumatic stress disorder is a major obstacle to the successful mourning of the beloved one. This is exactly what Thériault et al (2011) point out when they state that it is easy to predict how mourning develops from the insecure attachment style and the intensity of the traumatic reactions. For us, the persistence of post-traumatic symptoms constitutes a significant impediment to the person's effect in the aftermath of mourning. Besides, our conclusions that insecurity of attachment bonds is a handicap to mourning process are confirmed by various authors such as Bowlby (1961), Parkes (2001), Thériault et al. (2011), Yougbaré (2017). Thus, the ambivalent or anxiety-dependent type of attachment does little to promote the mourning process because it is unable to disinvest in mourning. In the same vein, Parkes (2001) sheds light on the link between attachment style and mourning. The

author states that ambivalent persons are prone to chronic mourning, whereas disorganized persons are prone to depression and social withdrawal, which complicate the mourning process. This shows the close relationship between attachment style and the mourning process that Bowlby (1961) insists on. The latter reveals that personality traits predispose to complications in the mourning process. Specifically, he establishes that individuals who develop an anxious and ambivalent attachment style in front of the threat of parental abandonment, experience difficulties in adjusting to mourning associated with loss of an attachment person. One of our results, confirmed by the scientific literature, is that type II trauma does not facilitate the effort to adjust to mourning because of its retraumatizing and disorganizing effect on the bereaved. The fact is that it confines the subject to the experience of reproduction or threats of reiteration of potentially traumatic events such as terrorist attacks or intercommunity antagonisms. It has another disadvantage. It triggers death anxiety and anxiety about the loss of attachments that are incompatible with the mourning process. In total, the psychological mechanisms hindering the adjustment to mourning are complex. They are numerous and diverse, with a mess of their negative effects that does not make easy the task of subjects mourning the loss of a beloved one. The nature and extent of the psycho-affective and cognitive operations to be conducted in order to bring the subjects out of their inner drama depend on their elucidation.

Conclusion

In engaging in this work, we propose to examine how the dynamics of post-traumatic stress disorder symptom may affect the mourning process among the wives of male victims of terrorist attacks and/or intercommunity conflicts in Burkina Faso. To this end, we conducted a case study of three widows selected from among the internally displaced women of Barsalogho site in the Center North part of the country. We performed a semi-directive clinical interview on these participants. The information collected was analyzed by means of thematic content analysis. This revealed various psychological factors that hindered the ongoing mourning process of the widows concerned. To say the least, it is not easy for these women to escape the suffering imposed on them by the violent and sudden death of their husband. It is as if the mourning of their spouse loss leads to a second level of suffering, the difficulty of successfully adjusting to mourning. The reactions of revivals, hyper activation and avoidance complicate this morning. However, the qualitative approach used here limits the interest of this study. It is essentially exploratory and comprehensive, even if it provides some understanding of the psychological obstacles to the mourning aftermath. It does not allow for any extrapolation of the results and, as such, does not indicate whether the fact that it establishes is common or not. Further research is therefore needed to better test the relationship between the psychotraumatic manifestations of the loss of a loved one and the mourning process. It could concern the link between the extent of these manifestations and the adjustment of the mourning, and the differentiated effect of the symptoms of revival and hyper activation on this mourning process.

Besides, this study makes it possible to identify some proposals and recommendations likely to help widows better cope with the final separation from their husbands. Here, several levels of intervention can be identified. On the other hand, a more in-depth clinical examination of widows whose mourning process is blocked can be envisaged on a case-by-case basis to better consider the specific difficulties of each of them in their arduous effort to adjust to mourning. In other words, the institution of integrated psychological monitoring or support at neighborhood health structures or sites hosting IDPs from terrorist attacks and inter-communal conflicts would be a valuable service to vulnerable people.

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