

SUPPORTING COMBATANTS

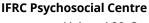
Wounded demobilized or former combatants need psychological and social support in addition to their medical treatment and rehabilitation. They may have reactions because of their physical and psychological trauma or medical procedures and changes in their bodies. They may also be overwhelmed, confused, and emotionally pained when considering the possible changes to their future lives.

Feelings of shock, confusion and anxiety after highly stressful incidents are natural reactions to the events. Some demobilized or former combatants have suffered devastating losses such as loss of fellow combatants, home, limbs, bodily functions, or military profession. Experiencing stress and living with uncertainties for a long period is challenging as it requires mental energy to adapt to changed life circumstances. It can also take time to adjust to the losses as for example learning how to walk again with or without aid.

For combatants, talking with a supportive staff member or volunteer who listens attentively and understands traumatic events and their impact on mental health can support the recovery process. Opening conversations in a safe and respectful manner where reactions are acknowledged can be a first restorative step. The following points can enhance the health, psychological, and social support offered to combatants and family members within clinics and hospitals. This guidance provides practical tips for staff and volunteers; it is not comprehensive.

A SAFE ENVIRONMENT

A calm and caring presence may help demobilized or former combatants to feel safe enough to open about how they are doing. Create an inviting physical and mental space by taking time to sit quietly with them. Time and a calm presence are often needed for trust to develop so they can share how they feel and what worries them. Begin by asking: *Can I sit with you for a moment?* If this is accepted, after some time of sharing the silence or after daily small talk, ask: *How are you doing?* If the person begins to share thoughts, feelings or memories ensure confidentiality: *What you and I will talk about will stay between us.* Always keep confidentiality unless it is necessary to break it in the cases of disclosures of plans to self-harm, harming others or being harmed by others. Take care not to



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expose anyone where others can overhear what is being said. If possible, check in regularly to build a relationship. If is an option, establish a prayer and quiet space that can function as a safe space with time for quiet reflections. Make paper and pens available to note what comes to mind.

TALKING ABOUT DIFFICULT EXPERIENCES

Some may find it difficult to talk about their experiences. Be mindful not to say: *I can understand how you feel* if you don't have the same type of experiences. Do not give false hope or say things like: *It will be all right* as this could be untrue or felt as a rejection of the reality. For some it may be easier to talk to a fellow combatant who has similar experiences. It could also be a faith leader they would like to approach. If this is the case say: *Is there anyone here or elsewhere you would feel comfortable talking to?* Always accept if someone does not want to talk or if they change the subject as a way of handling the situation. Do not push anyone to talk unless it is needed for medical procedures. Whereas some may not want to open, others will share freely and may need to be asked to slow down when talking about their experiences, so they don't share the most disturbing memories until they can regulate their emotions.

CALMING SOMEONE IN DISTRESS

Wounded demobilized or former combatants should not share more than they can handle at a time. This means that they can bring themselves back to the present time and place and not be in a state of high excitation for a long time. Encourage them to share bits at a time, ask them to notice how they feel when talking about their experiences and ensure they take regular pauses. Memories of traumatic events are deeply embedded in the body and nervous system and can surface at unexpected times. They may be triggered by thoughts or sensorial experiences as a sound or a smell. Knowing how to calm someone who is remembering something extremely distressful is important. The *Well-being Guide* from IFRC PS Centre provides tools to calm and ground someone in the present moment. Keeping calm as a listener can also help regulate the emotions of a wounded person.

The body can remember traumatic events as if they are happening now. If a wounded or former combatants seems to be experiencing such a situation, their brain is responding as if the event is still occuring. If this seems to be the case, ask: When did you realize that you were safe/relatively safe? or say: You are safe now. You can also say: Let's take a pause /moment to breathe before you go on talking about this memory. It can be experienced as shameful to react in the grip of a traumatic memory and can be good to know that this is a natural phenomenon.

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LISTEN ACTIVELY

Listen to what is being said and nod and use nonverbal feedback to let the person know you are paying attention. Paraphrase what is being said to ensure you understand correctly. Be aware that after extremely stressful events, the memories can become mixed and there seems to be no clear timeline. Listen actively to seek to understand the other person and hold your own advice and opinions back. Be aware, that the accounts of events may be confusing as humans usually remember episodes with a beginning, middle and end. After shocking events the memories often get mixed up and may leave a person without the full picture and overview of what happened. Listen with patience to see if episodes and timeline become clearer with time. Once the overview of events is understood, reflect the timeline back and check your understanding. When listening actively, the person talking will feel heard, seen, understood, and taken seriously, which is healing in itself.

ACKNOWLEDGE AND HANDLE REACTIONS

Feelings are expressed differently in cultures and subcultures and in armed forces showing certain feelings such as anxiety, self-doubt or low self-esteem could be considered a sign of weakness. It can be soothing to know that it is natural to experience shock, intense sadness, anger, remorse and guilt during and after combat. Accepting and acknowledging feelings can be done by saying: *Others we have talked to here say that they are angry and sad because of what happened.* Some find that they have changed and have trouble handling their reactions and now cry or are angered easily. If so, ask: *What used to help when you were upset and wanted to calm down? Do you have other ideas of what could be helpful for you?* Emotional management and emotional regulation can include taking deep breaths, using a sentence such as *I can handle it* and if angry, open the palms by the side of the body. Explain, that in the future they could also be overwhelmed at times. Knowing that this may happen, can diminish the pain and guilt about such episodes. Discuss, the ways they can – with time - find to regain composure before, during and after the episodes.

EMPOWER

It is empowering to be active and to use personal resources as much as possible. Focus on everything they can do themselves. It can be the small things like moving an item or a body part themselves instead of doing it for them. This can inspire hope to become an active person again. Give as many choices as possible: *Do you want to do this now or later?* as a way of gaining control over situations and making decisions. Acknowledge that exposure to combat has given different experiences and maybe a new outlook on life and its priorities. Also activate the social network of peers, family and friends if in at all possible. Ask: *How would you like to involve your close ones?*



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TAKING TIME TO ADJUST TO A CHANGED LIFE

It is helpful for the demobilized, former combatants and their families to know that it will take time for everyone in the family to adjust to the changed life circumstances. It may also demand mental energy and at times seem like a big task to adjust as individuals, family and circle of friends. Belonging to a group of people in similar situations who are available to listen and support is very helpful in the adjustment period and beyond.

TAKE CARE OF YOURSELF

Supporting others who live through major crises is challenging, emotionally draining and at the same time meaningful. It is only natural to be affected when listening to extreme hardship, and when this happens, think and say to yourself: *It is not my story* to be able to focus on those you are supporting.

Talk to your peers about the emotional impact of the work and how to take care of yourself and each other. Create a work environment where you can ask for help and support from your peers. Think about how to use your own inner and outer resources. Map what you like to do, and what brings joy and fulfilment and do things that give you pleasure and meaning at and outside of work, relevant to your context. This will help you recharge and to find the courage to go on working for others.

SUICIDE AND REFERRALS

Should thoughts of suicide come up during a talk with a demobilized or former combatant, consult the guidelines in <u>Suicide prevention</u> and <u>Supportive Voices</u>. Both are to be found at pscentre.org. Some combatants may need to be referred to specialized services if they have severe reactions or signs of mental distress. Examples could be that a combatant is now a substance user, has persistent suicidal thoughts or is severely depressed. Always consult a manager in such cases and follow the national or international referral guidelines.