SECTION 15.
PSYCHOLOGY AND PSYCHIATRY

Larysa Kupriianova
PhD in Medicine
Visitor Professor
*Humanitas University, Milan, Italy*

Scholar in the frame of
the International Visegrad Fund Research Grant Programme
*University of Wroclaw, Wroclaw, Poland*

Daryna Kupriianova
Lawyer
Head of the Board of DAR for Peace and Equality
*Milan, Italy*

HEALING AMNESIA AS A PREREQUISITE OF DISRUPTION OF DAILY LIFE ACTIVITIES IN REFUGEES AND FORCIBLY DISPLACED PERSONS: TRIGGERS AND REMEDIES

Abstract: Healing amnesia as a typical phenomenon for refugees/forcibly displaced persons constitutes a crucial mechanism of “erasing” painful memories on experiences, knowledge, suffering, challenges of the past, which may negatively affect future person’s existence and functioning. However, because of being not exclusively retrospective, but also prospective phenomenon, healing amnesia may significantly influence process of integration, social inclusion, as well as even may aggravate successful completion of daily life activities by primary refugees/forcibly displaced persons. What is more, despite general expectation of healing amnesia to be tightly connected with acute distress pattern in refugees/forcibly displaced persons, in most of cases this phenomenon is being recognized/self-declared in case of individuals postulating eustress pattern after painful experience. Moreover, healing amnesia with all aforementioned consequences, according to our research findings, may be provoked and aggravated by xenophobic tendencies, prejudices, biases, limitations and fears, which dominate in accepting society against newcomers. Therefore, the building of sustainable society, tolerant, open-minded attitude towards people with various backgrounds, may not just let newcomers avoid development of healing amnesia in all cases, where they could not experience it; but will also lead to successful integration and social inclusion of human, physical, psychological, mental and economical resources into accepting society, what will definitely be a trigger of development for any single accepting community of nowadays.

Research results and its discussion. In the frame of our former research we have emphasized numerous that the human’s mind is able to “erase” painful memories about bombing of one’s home cities, killing of dearest people, relatives, children, devastation of the cities as a result of war, armed conflict; fears related to political and/or economical insecurities etc [16]. This type of protective mechanism enables human’s subconscious mind to survive through life’s
challenges and difficulties, which every individual may face on the basis of social, economical, political and military instabilities that may force this person to flee from his/her country of origin, and seek for a temporary/permanent refuge abroad. The aforementioned of fleeing from homeland in the aim of seeking a “safe harbor”, often saving one’s life and life of one’s children, possess a main scientific ability to distinguish phenomenon of migrants, on one hand, and refugees, on the other one. Thus, the migrants, who do usually plan their relocation “in the aim of building a better life” possess a necessary source of time to prepare themselves to possible future struggles of adaptation, integration and social inclusion. Better financial, professional, linguistic opportunities as well as a crucial knowledge about local traditions, culture and special social and societal features of the community they relocate to, enable them to reduce significantly their “after-relocation” stress. Therefore, as it was clearly disclosed in the frame of our research, which we have already mentioned, migrants (i.e. non-forcibly displaced persons, but ones, who were relocated according to their free will) do not appear to be suffering from healing amnesia. Although the aforementioned phenomena may appear in this group of newcomers, it still does not constitute a predominant characteristic feature. Moreover, it may rather appear in transitional generation than in one of newcomers [21]. Thus, the generation of newcomers ordinarily possess a high level of “free will” to relocate abroad in the aim of finding a better place for living. The rational decision to relocate, and lack of life/health threat (which appears to be a trigger to action in case of refugees/forcibly displaced persons) make the representatives of newcomers’ generation “free deciders” on their own fate and life. At the same time, their children (regardless place of their birth, either on the territory of the homeland or abroad) may suffer from healing amnesia as a result of their parents’ relocation. Oppositely to newcomers’ generation, the transitional generation may face the same suffering on the basis of lack of free will deciding, as it appears to be in case of representatives of refugees/forcibly displaced persons community.

Every individual who was forcibly displaced abroad or had to flee to the territory of another country in the aim of seeking for a refuge, usually is being relocated as a result of life/health danger against him-/herself or his/her children/parents/relatives. The relocation/displacement takes place on the basis of wars, armed conflicts, economical and political instabilities, exactly as it was already mentioned by us. Here we mentioned two crucial points, which may subsequently constitute a main trigger for “healing amnesia” phenomenon: lack of free will towards relocation/displacement as well as brutal painful fear of sudden challenges, which this individual has faced as a result of aforementioned obstacles.

As we have already noticed in our former research [16], exactly because of these reasons refugees and forcibly displaced persons may face difficulties in the process of integration and social inclusion after arrival to the accepting country in more than 70%.

In the frame of our current research, we have clearly disclosed a direct correlation between healing amnesia influence and interferences of daily life activities of social groups, which we are analyzing on the basis of this research. Thus, after processing data of 130 anonymous survey, which were led among refugees, forcibly displaced persons of different generations (newcomers, transitional generation) and in different age 18-64, men and women, who had to flee from their home countries as a result of war, armed conflicts and political instabilities; we came to the following conclusion (Diagram 1).

Thus, on the basis of Diagram 1, we can see, that predominant number of persons suffering from healing amnesia manifested in complicated adaptation, integration and social inclusion, suffer simultaneously from the complications of main daily life’s activities. At the same time, there is a significant additional index of persons, who suffer exclusively from complicated daily life’s activities on the background of healing amnesia. In addition, there is 14% of individuals, who do not declare any significant struggles in completing daily life activities in comparison to ordinary people.
Refugees, forcibly displaced persons suffering from healing amnesia, which interfere their daily life's activities

Refugees/forcibly displaced persons, wo suffer from healing amnesia manifested in a different way, or who do not suffer at all

Diagram 1: the correlation between number of respondents with refuge/forcible displacement background against an index of persons, suffering from healing amnesia as a factor of interference of their daily lives’ activities

On the current stage of our research we shall identify the postulate of “daily life activities”, which may be interfered as a result of influence of healing amnesia on analyzed personalities of individuals possessing refuge/forcible displacement backgrounds. Thus, we distinguish:

1) Forgetting people, faces, names, surnames, level of relationship regardless the duration of those relationships;
2) Visual and hearing impairment;
3) Impossibility to memorize maps, directions, addresses, postal codes (in case, if it did not constitute any kind of trouble before displacement/relocation);
4) Impossibility to memorize qualitatively plans of everyday activity (even in the frame of one single day) - e.g. to wash the dishes, to meet children after school, to eat, to drink enough water, to take medicines etc.;
5) Feeling lost in places, cities, regions, which were well-known before, or where the individual resides during a longer period of time. Here we can admit a feeling of lost both in cities, town, regions which became a temporary/permanent refuge for such an individual, and where he/she resides at least for 1-2 years and still suffers from difficulties of orientation in everyday places; as well as towards places, cities, towns in one’s country of origin - in case the individual decides to turn back (even for a shorter period of time) to his/her homeland and notices an inability to recall basic routes of relocation/transportation within borders of his/her own city/town/region.

Under the perspective of interfered activities of everyday life, the catalogue cannot be recognized as an exclusive one. At the same time, we notice exactly that besides general social connections and successful integration, which are being disrupted as a result of healing amnesia processing prospectively, the persons finds himself in the situation of struggling from complicated everyday activities, which may significantly reduce a level of life and well-being of every individual. In addition, there is a one-sided direct correlation between success of integration and social inclusion on one hand, and general well-being on the other one. It is manifested in the following way: the individual, who suffers exclusively from healing amnesia manifested as a difficulty in the process of integration and social inclusion (the phenomenon, which was called by us “social detachment”, “negation of integration”), does not necessarily suffer from interfered daily life’s activities. However, in case of healing amnesia manifested by complicated daily life’s
activities, the person will definitely suffer from complicated social inclusion and integration, as a consequence, of a basic phenomenon’s manifestation.

On the current stage of our research discussion we shall underline that “healing amnesia” as a phenomenon of “erasing painful memories about suffering and challenges, which this or that individual may faced before” has not just retrospective action, but also prospective one. It explains therefore the ability of aforementioned phenomenon to “erase” not just brutal events of the past to protect one’s subconscious well-being, but also “erase” future ability to study, learn, apprehend, socialize, integrate, include oneself and function in absolutely new circumstances, which do not constitute dangerous features.

The crucial novelty, which have to emphasize on the basis of our current research is the fact that primarily we could consider a phenomenon of healing amnesia as a subsequent affect of distress, which appears to be a typical feature in refugees, forcibly displaced persons and other people, who may suffer from force majeure obstacles, which have significantly decreased level of psychological, physical, social and financial wellbeing of any single individual. Thus, the National Cancer Institute of the United States defines “distress” as follows: “Emotional, social, spiritual, or physical pain or suffering that may cause a person to feel sad, afraid, depressed, anxious, or lonely. People in distress may also feel that they are not able to manage or cope with changes caused by normal life activities....” [22]. Therefore, if is was a typical and singular pattern of healing amnesia, the phenomenon which we are precisely talking about could be treated as a “normal” or “expected” consequence of acute distress, which requires a qualitative First Psychological Aid. However, oppositely to our scientific expectations, a predominant number of our respondents declare experiencing the “eustress” stadium after facing analyzed life-changing difficulties. There, the “eustress” refers to stress that leads to a positive response. It is the opposite of distress and can refer to any type of beneficial stress, whether physical or psychological. It tends to be short-term and often feels exciting. People perceive this type of stress as manageable and even motivating [23]. In the meanwhile, the statistic data collected by us looks as follows: (Diagram 2).

![Diagram 2: the correlation between people experiencing healing amnesia with analyzed consequences on the basis of eustress vs individuals suffering from healing amnesia with all declared manifestations on the basis of distress](attachment:image.png)

- People suffering from healing amnesia on the basis of eustress
- People suffering from healing amnesia on the basis of distress

24%

76%
Thus, the basic predispositions to overcome successfully past-stress disorders does not depend exclusively on the individual him/herself. Moreover, the high level of progression of healing amnesia on the basis of general eustress is an absolutely predictable phenomenon. According to medical and psychological protocol accordingly, the individuals encountering post-stress period under the condition of eustress, once being identified, are usually being released as “autonomous individuals, who are able to cope with post-stress consequences without any professional help”. And, as a result, in the aim of supporting people suffering from distress and dysfunction, individuals preserving a basic eustress condition simultaneously preserve a belief that their “general condition no matter how will be subsequently changed does not constitute any prescription for professional assistance”. However, the basic eustress does not objectively guarantee that any obstacle will appear, which may become a trigger of development healing amnesia in refugees, forcibly displaced persons and other persons, who could basically avoid experiencing the aforementioned phenomenon.

As the most important triggers of “revoking” stress of the past and, as a result, provoking healing amnesia in its numerous manifestations may be tendencies and attitudes of accepting societies, which not always appear to be favorable towards newcomers, especially, those ones who manifest refuge/forcible displacement background. Significant prejudices, biases, limitations, expectations, fears, xenophobic attitudes may aggravate process of integration and social inclusion on all stages of integration of newcomers and once the “basic after-stress positivity” losses its influence on an individual, this person may develop exactly the same symptoms of past-stress disorders, including healing amnesia with complicated integration, social inclusion and interfered daily life’s activities, but which will be provoked not directly by the painful circumstances themselves, but by the disrupted period of social acceptance on the background of general eustress, as well as avoiding seeking for appropriate professional support on this matter.

Moreover, the level of provoking healing amnesia with all possible consequences as a result of social non-acceptance has a direct correlation with a level of aforementioned social non-acceptance.

The general social non-acceptance, therefore, may depend on just on a basic xenophobic or close-minded tendencies of any single society, but also on specific biased attitude towards any single nationality, religion, race, skin color, gender, orientation etc. Exactly this kind of correlation confirms all significant research results of ours [Figure 3].

![Graph showing probability of development healing amnesia on the basis of eustress pattern and society's ability to integrate refugees/forcibly displaced persons with various backgrounds](image-url)

Fig. 3. The correlation disclosing mutual dependence between society’s ability to integrate newcomers with various national, religious, skin color, gender, financial, political backgrounds vs probability of development of healing amnesia in persons with an eustress pattern
Thus, the biggest risk group of possible healing amnesia development on the basis of even eustress pattern constitute persons, who are significantly different (on the basis of religion, nationality, skin color, orientation, political opinions etc) relatively to the society, which is not able/read to accept such drastic social alterations.

Therefore, the most appropriate way of treating and preventing development of healing amnesia remains still a building an open-minded attitude towards refugees, forcibly displaced persons, especially if they constitute a totally different national, religious, political or sexual orientation group. It will improve social and societal pattern, will make accepting community more flexible towards modern global changes as well as will lead to significant economical development of receiving country due to the fact of involving human and professional potential of newcomers.

Conclusions:
1) Healing amnesia, as we have numerous times postulated in our former research, constitute a typical pattern of post-stress integration and social inclusion of almost every refugee/forcibly displaced person.
2) The mechanism of “erasing” painful experiences and challenges of the past is a protective measure of the individual’s subconscious mind, which enables a suffering person forgetting about traumatic situations, which could potentially lead to unexpected mental consequences.
3) As we can find out on the basis of our research, healing amnesia possesses a tendency to “erase” not just retrospectively, but also prospectively a numerous amount of knowledge, experiences, skills and abilities.
4) Under the prism of basic psychological pattern, healing amnesia was supposed to correspond exactly with a distress stage of post-stress disorder. However, as we have clearly emphasized, the individuals with refuge/forcible displacement background declaring eustress personal pattern after arrival to accepting country will predominantly be under risk of development the healing amnesia will all possible mental consequences. Moreover, the tendency to develop healing amnesia in a one’s personality depends not exclusively on one’s proper “eustress/distress diagnosing”, but on ability/desire of accepting society to “actually accept” the analyzed groups of newcomers.
5) Building of sustainable, open-minded, tolerant society is a crucial step in avoiding healing amnesia in persons, who basically declare eustress pattern, as a well as in successful applying human, physical and mental potential of newcomers into economical development of accepting country.

References:
2. DAR MULTILINGUA as a prerequisite of social and cultural inclusion, integration and self-realization of migrants, refugees and forcibly displaced persons//SCIENTIA//The V International Scientific and Theoretical Conference “Current issues of science, prospects and challenges”//November 17th, 2023//Sydney, Australia
3. 3. The problematic of foreign accent under the prism of the DAR MULTILINGUA-MULTIPERSONALIA: Learning through healing as a way to full cultural immersion and successful societal integration/LOGOS//The III International Scientific and Practical Conference: “Theoretical and Practical Aspects of Modern Scientific Research”//November 24th, 2023//Seoul, Republic of Korea
6. OCHA Guiding Principles on Internal Displacement//
7. Internal Displacement Monitoring Center //https://www.internal-displacement.org/internal-displacement#:~:text=Internally%20displaced%20persons%20(IDPs)%20are,violations%20of%20human%20rights%20or


10. The phenomenon of “the wealthy refugee” in the frame of the doctrine of utilitarianism of Jeremy Bentham// II International Scientific and Theoretical Conference «Modern vision of implementing innovations in scientific studies»//October 20, 2023; Sofia, Bulgaria/


12. Specific features that complicate process of integration and social inclusion of migrants, forcibly displaced persons and refugees: sources of social prejudices, which constitute a basis of general preciousness// V International Scientific and Theoretical Conference «Science of XXI century: development, main theories and achievements»//SCIENTIA//January 26, 2024; Helsinki, Finland


14. Migritional nomadism: origins, prejudices, remedies/VII International Scientific and Practical Conference “Scientific Community: Interdisciplinary research”//InterConf+//February 6-8, 2024//Hamburg, Germany//0,4 ECTS Credits


16. “Healing amnesia” in persons who are forcibly displaced by war: DAR Multilingual as a tool for optimization the memorization process in the frame of integration and social inclusion//The II International Scientific and Theoretical Conference “Modern tools and methods of scientific investigations”//SCIENTIA//December 8th, 2023//Antwerp, Kingdom of Belgium//0,1 ECTS Credits

17. Antisocial personality disorder in refugees and forcibly displaced persons from Ukraine, reasons and remedies//VI International Scientific and Practical Conference “Theoretical and empirical scientific research: concept and trends”//LOGOS//February 2, 2024//Oxford, UK//0,2 ECTS Credits


20. The Phenomenon of Positive Discrimination as a Prerequisite for Failures in the Integration and Social Inclusion Policies of Forcibly Displaced Persons/The III International Scientific and Practical Conference “Science: Development and Factors of its Influence”//InterConf +//December 16-18//Amsterdam, the Netherlands//0,4 ECTS Credits

21. Migrational vacuum, challenges of integration and social inclusion in transitional generation//V International Scientific and Theoretical Conference “Advanced discoveries of modern science: experience, approaches and innovations”//SCIENTIA//February 23, 2024//Amsterdam, the Netherlands//0,1 ECTS Credit
