

Trauma awareness, healing, and group counselling in secondary schools

Judith Olij

Ten years after war and genocide in Rwanda took almost a million lives; trauma still exists on a large scale. This is especially true amongst adolescents where it hampers the process of reconciliation. As a result, crisis outbreaks frequently occur at secondary schools. In this article, an intervention for secondary schools is described that promotes trauma awareness and healing within a school environment. This intervention appears to succeed in preventing trauma crisis: in the four schools covered by the project, no crisis took place. It also accelerated the process of reconciliation amongst the students from different ethnic groups: they were able to commemorate and mourn together with dignity.

Keywords: counselling, psycho education, reconciliation, sensitisation, training, trauma, and youth clubs.

Trauma in Rwanda

A considerable proportion of the Rwandan population has been traumatised to a greater or lesser extent, due to decades of intermittent inter-group violence. This culminated in war, genocide, and the massacres of 1994. In less than a hundred days, more than 800.000 people were slaughtered. Hundreds of thousands of children lost either one, or both parents, or the family was separated. Almost all children witnessed brutal killings, sometimes

of their own family, and sometimes by their own parents.

The Rwandan family-structure used to offer emotional support to members of the family. Women went to their mothers, aunts, or grandmothers. Men would go to their fathers, uncles, and grandfathers. In Rwanda, many children and adults not only lost their immediate family, but also a great deal of their extended family, and therefore their social network. This has left few opportunities for emotional support.

The African Centre for Rehabilitation of Torture victims (ARCT-RUHUKA), a local association of trauma counsellors¹, selected adolescents as one of its priority target groups. If adolescents do not manage to cope with their personal traumas and to understand the traumas of others, this not only hampers their individual development, but also the process of reconciliation as a whole.

Therefore, in 1999 ARCT-RUHUKA initiated and implemented a pilot trauma project at a secondary school in Kigali with the objective of reducing the psychological consequences of trauma, and to prevent ethnic crisis in schools. Counsellors gave training to the staff and provided psycho education and counselling services to the students. After impact was shown, ARCT-RUHUKA decided to develop a specific project: 'Trauma

Awareness, Healing and Group Counselling¹ for four severely affected schools², which were proposed by the Provincial Directors for Education due to severe problems manifesting in those schools.

Before the project

In the period before the implementation of the project, all schools faced daily basic challenges and disturbance of lessons by: screaming, crying, aggressive or apparently undisciplined behaviour by students. Often it was not possible to provide lessons as planned. Staff members were annoyed by the conduct of the students, felt frustrated and powerless, and were often impatient towards students³, because they assumed it was simply undisciplined behaviour. Students, on the other hand, did not find it easy to find guidance and support when they felt desperate, or depressed.

Many students felt lonely and isolated, could not concentrate on their studies, were suffering from Post Traumatic Stress Disorder (PTSD), depression, fear and/or grief, which often manifested in symptoms such as nightmares and flashbacks. Some of the students were unable to speak. Sadly, these manifestations were not recognised as symptoms of trauma. Staff and fellow students considered these students as 'mad' and ignored them as much as possible⁴.

Each week, students were referred to hospitals, where they were admitted and usually sedated through drugs. At one of the schools, the average number of students referred to hospitals because of 'strange' behaviour was estimated at 20 per week. Another school reported a minimum of 10 referrals each month⁵.

After hospitalisation students returned to school, were sent away, either for good or for a period of time, but in all options problems started as soon as the students returned to

their respective schools. Students with 'deviant' behaviour were punished by staff, often ignored, or teased by others. Outbreaks of rage and other crisis manifestations involved large numbers of students which created an environment where it was impossible to continue lessons.

This not only negatively affected the general atmosphere of the schools, but also hampered the performance of the students, and the work-satisfaction of staff⁶.

The project

The project started in February 2001 at two schools and lasted until October 2004. It was implemented by four fully qualified trauma counsellors, two at each school. In the second year of the project, two other schools were selected and two more counsellors were employed, and two counsellors were moved from the first two schools to the new schools. One trainer/supervisor was appointed as a Project leader. This official was responsible for the organisation and implementation of the project. She supervised the counsellors, kept in touch with the directors and staff of the schools, and was responsible for monitoring and reporting. Three of the schools were located in, or near towns, one was deep in a rural area. Total students for all schools was 2809. Many of them were orphans, some, but not all, were survivors of the genocide. Some students were separated from their parents, due to disappearance or imprisonment if they were suspected of participating in the genocide.

Training the staff. In all cases, ARCT-RUHUKA's trainer/counsellors started with providing training of 'Helpful Active Listening' to all staff of schools, including management and supporting staff (210 participants). This is a six day training with a one day follow-up, with the objectives:

- to develop trauma awareness, to learn to recognise symptoms of trauma,

- to develop basic counselling skills,
- to prevent crisis by referring clients to professional trauma counsellors before crisis occurs.

Later, the counsellors also trained all newly reported staff at the schools in 'Helpful Active Listening'.

Sensitisation. Training of the staff was followed by psycho education (sensitisation) sessions for students. All classes were sensitised on the existence, causes, and symptoms of trauma. In a later phase, the project also dealt with other themes, such as rape, HIV/AIDS and general problems in respect to adolescents. Several schools in the neighbourhood, as well local authorities, were also sensitised on trauma through specific workshops. These workshops aimed to sensitise responsible authorities on trauma and its consequences, and to discuss the need for future interventions.

The counsellors continued to sensitise staff and students on trauma and related issues, during the duration of the project. In total 530 sensitisation sessions were offered, which reached an estimated 4000 people.

Counselling. The counsellors, who were located at the respective schools, offered almost daily consultation hours for students, staff, parents/guardians, and others, who were in need of advice for problems related to trauma. The consultation hours were frequently used, and functioned often as the beginning of a working relationship between counsellor and client, especially those that required more intensive therapy.

Individual as well as group counselling was offered to students, who requested it themselves, or were referred to counsellors by others. Several members of staff also benefited from individual counselling services. Counselling services included:

- advice to clients, visiting once or more (1770 clients),
- individual counselling (900 clients),

- group counselling (700 clients).

A limited number of counselling groups were also formed for neighbouring schools.

Often children started with individual counselling sessions, but when the counsellor thought they were ready, they were encouraged to participate in group counselling. At all schools, the counselling groups were mixed, with children suffering from different traumatic events. Sometimes children who had lost their family during the genocide were in the same group as children whose parents were in prison accused of participating in the genocide. Children discussed that it was not their fault, what their parents did, but that they were responsible to ensure such things do not happen again.

Youth clubs. After a mid-term evaluation, ARCTRUHUKA added extra activities not planned in the original project. With the aim of sustaining the impact of the project, the counsellors proposed to set up so-called anti-trauma-clubs (Club's RUHUKA) at the four schools. In the clubs, which have at present between 50 and 100 student members, a limited number of staff members participate and/or advise the students. Counsellors trained the members in Helpful Active Listening. The clubs sensitise other students on symptoms of trauma through: psychodrama, poems, dancing, counselling and support of fellow students. The cultural events, including the drama, as well as sport-activities, are all meant as therapy. Club members also received training in Helpful Active Listening. Large parts of the membership in the clubs were traumatised and therefore use their own experiences in the activities.

The present situation

In our evaluations,⁷ we observed that all (interviewed) directors, staff, and students are aware of trauma, its symptoms, and its con-

sequences. They recognise symptoms of trauma and are aware of the need to listen, to support and counsel the victims of trauma. They were also convinced of the need to cope with the pain of the past in order to create an appropriate educational and social environment, where students can develop themselves and support others. They recognised and felt the importance of dealing with trauma, as a condition for individual and national rehabilitation, and reconciliation.

Since the beginning of the project, a number of crisis outbreaks occurred, but all on a limited scale, and all handled within the school. No students have been referred to hospitals

or had to be sent away. Most of the crisis appeared under stimulus such as the eruption of the volcano, followed by earthquakes, increased insecurity, and periods of mourning.

Students who showed symptoms of trauma were counselled by staff or fellow students and/or were referred to the trauma counsellor. In this way, a crisis could be prevented and the negative impact on groups or classes was limited. Even during the period of mourning between April and July 2004 no crisis outbreaks were observed. This is a major achievement, especially because at many other schools in the country, this has

Box 1 Students' comments on the project

'Before counselling I suffered. I was lonely and angry. Sometimes I was aggressive and I did not have any friends. Now I understand what caused this sadness in my heart. If I feel sadness now, I talk to my friend or I try to do the exercises, the counsellor has taught us.'

'Before the project started I was afraid to talk to other people, I did not want to see their faces. I did not want to sleep, because then I could have nightmares, which made me very frightened. I felt isolated and had no one. No one liked me. Now I have my friends here. Sometimes I still feel frightened, but now I understand why, and so do my friends and they comfort me.'

'Before ARCT came I could not talk, not even whisper. I still remember it, but now I can talk! Also, I was always angry and I beat other students, and even teachers. Now that is over and people are starting to like me.'

'I could not cry and yet I always felt like crying. My heart felt so heavy and I always suffered from pain in my stomach. Now I can cry and people do not laugh.'

'I did not like to study, because I always felt sick and I wanted (whispering) to kill myself. Now I can even help others, because I understand. I want to study to become a good counsellor.'

'Before the project I pretended that I was an orphan and that my father was dead. That is what I told others. Now I tell them my father is in prison and yet I feel relieved.'

'We are both very sad what happened (a survivor of the genocide, pointing at the one whose father is in prison). So, we comfort and counsel each other and want to sensitise others on trauma and in the club, so that these things cannot happen again.'

been a dramatic period with huge outbreaks of crisis, often followed by referrals to hospitals, students sent away, or schools closed completely.

The general atmosphere at the schools has dramatically improved, as has the performance of students.⁸

Although there is a difference between individuals, and between the respective schools, most staff members are motivated and capable of recognising the difference between undisciplined behaviour and symptoms of trauma in students. They feel less impatient and invite students to tell them about their problems. They provide basic counselling, and when problems are too complicated, they advise the students to see a counsellor. However, working schedules do not allow them to spend the required time to give full emotional support to the students⁹.

At all schools visited the children were very clear on the impact of the project for the school and for them as individuals. They said that teachers were much nicer and that they listen to their problems. However, they sometimes hesitate to approach staff, because they seem too busy. They talk often with fellow students about their problems and feelings, and do not feel as isolated and neglected as before. They now feel accepted by others, and understand their own feelings and behaviour better. The words; 'being accepted', 'not isolated' and 'understanding' all came up in each group interviews with students.

The students do not blame each other, but do accept and respect the different causes of pain. This is a very important contribution to reconciliation.

Conclusions

The project contributed not only to the reduction of trauma symptoms amongst students and to the prevention of crisis out-

breaks at the schools. It also resulted in a general improvement of the educational environment and the performance of students. The project stimulated a climate of mutual acceptance, where experiences and pain could be shared, and where emotional support amongst different groups and individuals is offered. In this way, the project provides a crucial condition for reconciliation.

No crisis outbreaks occurred since the start of the project and no children had to be referred to hospitals, due to trauma related behaviour. Students feel more comfortable with each other, and with the staff. Staff members feel less powerless in dealing with the problems of students, because they understand the causes of their behaviour. They are also able to recognise the symptoms of trauma and are capable of offering emotional support. However, it is a general complaint that staff has not enough time to offer these services within their tight work schedule.

Professional trauma counsellors, therefore, remain needed, to provide individual or group counselling to the most affected students. The Club's RUHUKA will contribute to further increase trauma awareness and will guarantee that trauma issues remain on the agenda of the schools. They also offer emotional support to fellow students, but need encouragement and support to avoid burnout amongst the members.

¹ ARCT-RUHUKA is a national non-governmental organisation and has a training and counselling program. Since its establishment in 1996, more than 120 nurses and social workers have been trained by ARCT/RUHUKA to become professional trauma counsellors. This training takes one year: 12 weeks of theory and 250 hours practice with supervision, and is recognized by the Ministry of Education. Graduated counsellors become a member of the association

after graduation and some of them are also employed by ARCT-RUHUKA. Senior counsellors have been trained as trainer/supervisors for the Counsellors (professional counselling), as trainer/supervisors for Helpful Active Listening Training (basic counselling) or as trainer/supervisors for HIV/AIDS counsellors.

² In addition, a project called Helpful Active Listening was implemented. This project targeted all other secondary schools in Rwanda, but was more limited and focussed mainly on training for Directors and staffs in recognizing symptoms of trauma, basic counselling skills and referring students to a trauma counsellor, *before* crisis occurs.

³ Information gleaned through staff interviews, confirmed by students.

⁴ Information gleaned through interviews with client-students and staff.

⁵ Information acquired through Directors.

⁶ Information acquired through students, Directors and staff of the schools.

⁷ The following methods were used to assess the project: reading relevant project documents and reports; interviews with management and counsellors of ARCT-RUHUKA; interviews with Directors and staff members of the schools involved; interviews with representatives of provinces, in charge of youth and education; interviews with students, who were individually counselled and/or participated in counselling groups (clients); meetings with members of the anti-trauma clubs (Club RUHUKA); observing inaugurations and drama presentations by Club's RUHUKA. Three of the four schools involved were visited by the author.

⁸ Information offered by Directors and staff.

⁹ Information offered by staff, confirmed by students who feel that staff members were often too busy to be bothered by their problems.

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