Chapter 9
Identity and Psychological Health

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Groups are central to the business of war and political violence. An analysis of the children who are most likely to experience war is instructive. Many of those most severely affected by war and political violence are resident in the poorest regions of the world. In the year 2000, 300,000 people died as a direct result of conflicts (WHO, 2002). Worldwide, the rate of mortality associated with political violence varied from 1 per 100,000 population in high-income countries to 6.2 per 100,000 population in low- and middle-income countries (WHO, 2002). Further, the highest rates of fatalities due to war were in African countries, with approximately 32 fatalities per 100,000 of the population (WHO, 2002). Besides the many thousands who are killed each year, huge numbers are injured, including some who are permanently disabled. Others are raped or tortured, or suffer disease and famine. Again, available evidence suggests that those at highest risk of these experiences are those living in the least affluent nations (Cairns, 1996; WHO, 2002).

At the most fundamental level then, exposure to political violence and war is related to the affluence of the nation to which you belong. Not only then does your national group membership shape the experiences you have, but the relative affluence of your nation is central to the likelihood of being exposed to war. And your experiences during wartime will be shaped, sometimes very profoundly, by your

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gender group. For example, sex crimes during times of war. have been widely reported, and those victimised are disproportionately female, again a group-level variable (Swiss & Giller, 1993). The use of rape as a weapon during war often has long-term consequences for girls and women as a consequence of the trauma experienced but also because of their subordinate group and/or associated religious group memberships (Kellezi, Reicher, & Cassidy, 2009). On the other hand, the business of war and political violence has been constructed as a masculine pursuit (McWilliams, 1997), placing young men at particular risk of being represented within fatalities and casualties of war (Cairns, 1996).

Equally, war experiences themselves are not evenly distributed within a nation or population affected by the same conflict (Barber, 2009; Cairns, 1996). Take for example, Northern Ireland, which is a relatively affluent area globally (though one of the most disadvantaged in the UK and EU) but where there is considerable evidence that violent experiences have been, and continue to be, distributed unevenly across the population. Young people from deprived backgrounds in Northern Ireland generally report greater experience of political violence than their middle class counterparts, males more experience than females, and ethnic minority group members (Catholics) more than those from the majority group (Protestants) (Muldoon & Trew, 2000; Smyth, 1998). Comparable differences associated with affluence, gender and minority and majority group status have been reported in other regions affected by conflict (Bryce, Walker, Ghorayeb, & Kanj, 1989; Simpson, 1993; Slone, Kaminer, & Durrheim, 2000; Slone & Shechner, 2009).

Any analysis of the impact of political violence, then, needs to acknowledge the role of social structures, group divisions and power. Sociologists and social psychologists have grappled with this issue in relation to both intergroup relations and political violence. For example, both critical analysts and social dominance theorists have gained insights into victimisation by violence and oppression by dominant groups against subordinate groups (Jochnick & Normand, 1994; Sidanius & Pratto, 2001). Scholars both within and outside psychology, addressing the legacies of colonisation, have considered how subordinate group members can be seen as both victims and perpetrators of violence as a consequence of their social position (Bulhan, 1985). Such findings have resulted in the foregrounding of structural divisions in sociological explanations of war and political violence (Bobo, 1999; Mills, 2000). To date, psychologists have been slower to use these group-level factors to enhance our understanding of how children negotiate and adapt to challenging circumstances of war and political violence.

Groups, Identity and Health Risks

The relationship between exposure to political violence and subsequent psychological distress is also complicated by group membership. Equivalent experiences are not appraised in the same way by all who experience them and these differences in subjective appraisal of violent events are often linked to group memberships and identity

positions relative to the conflict. This is most clearly illustrated and evidenced in relation to Post-Traumatic Stress Disorder (Muldoon & Lowe, 2012). Diagnosis of PTSD hinges on experience of an extreme traumatic incident (Criterion A1). De Jong et al. (2001) report extensive experience of extreme traumatic events amongst their sample from Algeria: 84 % had been exposed to crossfire, 83 % to bombings and that 41 % witnessed the death of their loved ones. The amount of conflict related trauma reported through the war in Croatia by a sample of schoolgoing children was also considerable (Kuterovac, Dyregrov, & Stuvland, 1994) and in Northern Ireland Muldoon and Trew (2000) reported a substantial number of children reported having been caught in a riot (23 %), witnessed guns being fired (24 %) and/or experienced a bomb scare (60 %). Similarly, Summerfield (2001) points to evidence indicating that 99 % of a sample from Sierra Leone met the experiential and symptomatic criteria for PTSD. These authors suggest that these findings reflect the severity of experiences to which these samples have been exposed, yet the rates of PTSD, even in these contexts, tend to be between 10 and 15 % of the total population (Muldoon & Downes, 2007). And these figures suggest that the notion that these events are "unusual" or "extreme" does not capture the reality of life in many regions of the world, where such events are appraised as unexceptional or at least part of the backdrop of everyday life.

The current inclusive definition of traumatic events which qualify as a criterion A1 stressor has resulted in a 59.2 % increase in total population life experiences which could be used to diagnose PTSD (Breslau & Kessler, 2001). The crucial feature of the DSM-IV's expanded stressor criterion is that there is now an important emphasis placed on a newly defined criterion A2 which requires that the individual's response to their traumatic event was one of "intense fear, helplessness or horror" (APA, 2000, p. 439). The development of the disorder therefore depends not only on the event itself, but on a variety of other crucial factors, not the least of which is the individual's subjective appraisal of the event, which may be linked to a host of social and personal variables as well as previous traumatic exposure. Therefore the important factor is not only exposure to a traumatic event, but also the manner in which a person appraises that event.

Lazarus and Folkman (1984) argue that stress is the outcome of a two-phase process of appraisal. Primary appraisal involves the perceiver assessing the degree to which a particular stressor poses a threat, and secondary appraisal involves the perceiver's assessment of their ability to cope with the threat. While much of this research on stress accepts that social context, Haslam, O'Brien, Jetten, Vormedal, and Penna's (2005) integrated social identity model of stress is the first to place groups, and their associated social identities at the heart of the stress process. They suggest a more complex model of stress in which appraisal processes and stress outcomes are structured by group membership. Empirical support for the model is also available. Haslam, O'Brien and colleagues (2005) provide a simple illustration of how group membership mediates the experience of stress. They asked two groups of participants to rate the levels of anticipated stress in both their own and another occupational group. Both groups rated their own occupations as less stressful than the other group's occupation despite the fact that one group was comprised of bomb

disposal officers, the second group being bar workers. Indeed, one of the bomb disposal officers describes his occupations as "not something out of the ordinary" despite the very real risks he routinely faced (Haslam et al., 2005, p. 365).

Muldoon and Lowe (2012) argue that the appraisal of stressful and traumatic events is fundamentally related to group memberships and identity and that this is particularly the case relative to the stress and trauma associated with political violence where group memberships and identity are central to the conflict itself. In situations of intractable political conflicts, such as the Israeli–Palestinian conflict, the conflict in the Basque region and that in Northern Ireland, social identification is of pivotal importance in meaningful and everyday ways (Bar-Tal, 2007; Kelman, 1999; Lowe & Muldoon, 2014). Available evidence certainly suggests that social identities mediate the experience of potentially traumatising events (Muldoon, Schmid, & Downes, 2009). Where such events can be explained as being consonant with social identities, this attribution of meaning appears to lower the traumatic response. For example, Basoglu et al. (1997) showed that in a comparison of political and non-political prisoners in Turkey who experienced torture, political prisoners showed lower Post-Traumatic Stress (PTS) than non-political prisoners, despite often experiencing greater levels of violence over a longer duration. Again this suggests the physical parameters of events are not alone responsible for experienced trauma, but rather identities can buffer mental health even in the face of torture.

In effect, it would appear that social identities can provide a framework for making sense of adversity. However, this meaning-making will only assist positive reinterpretation where there is a good fit between the identity and the traumatic experience (Muldoon et al., 2009). Ankri, Bachar, and Shalev's (2010) study of reactions to bus bombings in Israel exemplifies the importance of this fit. They found that ultra-orthodox Jews, a highly identified group, reported significantly higher levels of distress than the non-ultra-orthodox survivors of such attacks. Within the ultra-orthodox faith, victimisation is perceived as just retribution for previous wrong doings. Thus the meaning attributed to the attacks by ultra-orthodox Jews, as a consequence of their valued social identity magnified the impact of the events. Thus, whether social identities are a resource or an obstacle to individual resilience in the face of traumatic experiences depends on the content of those identities and how this shapes processes of meaning-making.

Identity as "Coping"

A recent line of research within social and political psychology has examined the role of social identification as a consequence of negative experiences associated withholding membership in a given group. This has been specifically concerned with the extent to which social identity related stressors can impact upon self-esteem and psychological well-being, including the extent to which social identification positively or negatively influences well-being, by mediating the relationship between identity related stressors and psychological effects. Considerable research

evidence has now been accrued that suggests members of disadvantaged groups cope with adversity by increasing identification with their disadvantaged group (Schmitt & Branscombe, 2002; Schmitt, Branscombe, Postmes, & Garcia, 2014).

These findings have been articulated in Branscombe, Schmitt, and Harvey's (1999) rejection-identification model (RIM), which predicts negative direct effects of adversity and discrimination on well-being, and also positive indirect effects on well-being, via increased social identification. The RIM thus reconciles a mixed body of research that has found, on the one hand, that perceiving discrimination due to one's group membership can lead to a range of adverse psychological health consequences, including greater psychological stress (Liebkind & Jasinskaja-Lahti, 2000), lower self-esteem (e.g. Verkuyten, 1998), depression (Contrada et al., 2001; Finch, Kolody, & Vega, 2000) and even poorer physical health (e.g. Williams, Spencer, & Jackson, 1999). On the other hand, groups typically subjected to discrimination such as minority ethnic groups do not necessarily hold poorer psychological health and well-being than other groups (e.g. see Major, McCoy, Kaiser, & Quinton, 2003; Verkuyten, 2001 for a review). Specifically, the RIM describes that perceiving rejection or discrimination due to one's group membership may lead individuals to identify more strongly with their in-group, which then has a positive impact on psychological health, effectively reducing the potential adverse direct consequences of perceived discrimination (see e.g. Giamo, Schmitt, & Outten, 2012; Ramos, Cassidy, Reicher, & Haslam, 2012; Schmitt, Spears, & Branscombe, 2003).

Once we begin to think about war and political violence, we move towards thinking about direct acts of aggression and violence rather than adversity and discrimination. And in times of war, distinguishing between victims and perpetrators is never straightforward. Indeed, the concept of victimhood itself can be central in shaping and consolidating social identities. Groups often develop a collective narrative and memory of the conflict that indicates that the rival group continuously inflicted unjust and immoral harm upon them throughout the conflict. In this way, many groups present themselves as the disadvantaged group during hostilities. This collective sense of victimhood has important effects on the way individuals and societies manage the course of the conflict, and adjust to their experiences during war and peace time (Bar-Tal, Chernyak-Hai, Schori, & Gundar, 2009; Ferguson, Burgess, & Hollywood, 2010). And it is probably universally the case that even in very violent or asymmetric intergroup conflicts, at least one and very often both sides believe themselves to be *the* victim in that conflict (Bar-Tal et al., 2009).

Schmitt and Branscombe (2002) argue that the subjective meaning and consequences of perceived discrimination against an out-group depend on the position of one's group in the social structure. The context in situations of intractable conflict is often one that is built on the negative interdependence (Kelman, 1999) of identities implicated in the conflict, where each group perceives the other group as threatening to its own group identity. As such, the mere existence of the out-group together with their expression of identity can be perceived as threatening, over and above the more direct or immediate threats associated with political violence (Kelman, 1987, 1999). Until recently, the majority of research in this area had primarily been carried out among groups holding minority status or devalued group memberships. Increasingly, however, it is apparent that issues of threat and threat perception are central to the

support for violence and intergroup hostility amongst both majority and minority group members.

We have recently proposed a threat-identification model (TIM; Schmid & Muldoon, 2015), which is a dual-pathway model for how perceived intergroup threat may affect psychological well-being. It is loosely based upon Branscombe et al.'s (1999) RIM, and extends these predictions to the consequences of perceived intergroup threat on health. The TIM argues that although perceived intergroup threat, a negative identity-based stressor, may have a direct adverse effect on psychological well-being, it can also lead to increased social identification, and thereby indirectly protect psychological well-being. Thus the threat-identification hypothesis suggests threat positively affects social identification, and social identification co-varies positively with psychological well-being, thus mediating the relationship between perceived intergroup threat and well-being. These predictions are based on two premises. First, perceiving a threat to one's in-group prompts an increase in social identification, as has been proposed (Turner, Hogg, Turner, & Smith, 1984) and evidenced by social identity research (e.g. Branscombe et al., 1999; Ethier & Deaux, 1994). Second, identification is an important resource for coping with elevated intergroup threat perceptions, having as it does positive implications for psychological well-being and health (see e.g. Crabtree, Haslam, Postmes, & Haslam, 2010; Cronin, Levin, Branscombe, van Laar, & Tropp, 2012; Haslam & Reicher, 2006; Muldoon & Lowe, 2012; see also Jetten, Haslam, Haslam, & Alexander, 2012 for a recent edited volume on the link between social identity and psychological health).

An additional key element to consider in the threat-identification process is that threat, particularly in the context of intergroup conflict, can be perceived by both dominant and subordinate groups. Rejection-identification processes, understood to arise as a consequence of the experience of perceived discrimination, have largely been documented and associated (though not exclusively) with minority or subordinate group membership. However in situations of intergroup conflict, perceptions of threat are evident in both dominant and subordinate groups. Indeed in some instances it is the ostensibly more powerful group in the conflict that perceives the higher level of threat (Canetti, Halperin, Hobfoll, Shapira, & Hirsch-Hoefler, 2009; Mac Ginty & Du Toit, 2007), not least because the conflict represents a very real threat to the status of the group. Group position is also centrally important to the perceptions of the conflict by groups (Muldoon, 2013) involved as well as to the wider community of witnesses (Mac Ginty, Muldoon, & Ferguson, 2007).

Those engaged in conflict from a position of power (a majority or dominant group) are often seen as morally questionable; whilst there is generally moral kudos attached to the minority group position by the wider international community (Mac Ginty et al., 2007). So for minority group members, this attribution of illegitimacy to the majority group behaviour can fuel identification (Livingstone, Spears, Manstead, & Bruder, 2009) and may be used to justify even violent collective action (Van Zomeren, Postmes, & Spears, 2008). On the other hand, for majority group members, because of their tendency to orient to concerns about morality and moral behaviour (Leach, Ellemers, & Barreto, 2007), questions about legitimacy of their actions can act to undermine identification and perceived collective worth of the group. As such, in conflict situations, the role of perceived threat on identification

and well-being may have very different consequences for majority and minority group members. Available empirical data confirm differential effects for majority and minority group members. A cross-lagged analysis found that when controlling for perceptions of threat and identity at time 1, perceived threat was seen to predict strength of identity for majority and minority group members at time 2 (Schmid, Muldoon, & Loowe, under review). However, this increased identification across time was found to be predictive of better psychological health in minority group members only, leading the authors to conclude that minority group members are more effective at harnessing collective identity in support of psychological health.

Conclusion

The social identity approach is one that grew from an interest in understanding the psychological basis of prejudice and discrimination in the aftermath of the Second World War. Subsequently, the approach has been applied to a range of settings to understand group loyalties during conflict and how they act to maintain support warring factions. For example, in Northern Ireland it has been empirically demonstrated that experience of violence is related to support and sympathy for political violence (Hayes & McAllister, 2001). Similarly, Muldoon et al. (2009) found that reported experience of violence in a large-scale survey was significantly related to strength of identification irrespective of preferred nationality. Generally, then it can be said that conflicts have been shown to polarise identities and as a consequence contribute to poor relation between groups, effectively embedding the conflict further.

Where perceptions of threat emanating from the out-group are amplified by contexts that construct the conflict as a win–lose scenario (also known as a zero-sum game), the difficult relations between groups are exacerbated. For example, Schmid and Muldoon (2015) found higher perceptions of realistic and symbolic threat were associated with higher levels of ethno-religious identification. These resultant strong social identities can then serve to embed the identities of the conflict further.

For this reason, social identities have been viewed as the psychological basis of political conflict. Furthermore, social identities and, more particularly, strong social identities have often been viewed by psychologists and non-psychologists alike as dysfunctional and even pathological. However, the perspective offered in this chapter is one that considers social identities as normal and indeed the psychological reification of socially divided societies. These identities offer us a way of interpreting the social divisions that surround us and further provide resources to bolster psychological health. In short, we argue that social identities and heightened perceptions of intergroup threat associated with conflict are not only group-level but also individual-level outcomes, since conflict constitutes, at its core, inherently stressful experiences. Thus although identities and intergroup threats hold a distinct group-level component, with the potential to challenge the well-being of the group per se, they also hold the potential to challenge individual psychological well-being (Muldoon & Lowe, 2012). In this way, identities can be seen as important resources for those negotiating the stressful environments affected by political violence, yet paradoxically they are also

the mindsets that can serve to impede progress to peace and reconciliation. Policy and practice in this area must work to respect identities in post-conflict societies in order to protect those made most vulnerable by their experiences.

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