
Human Trafficking and Trauma in the Digital Era: The Ongoing Tragedy of the Trade in Refugees from Eritrea

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Collective Trauma from Sinai Trafficking: A Blow to the Fabric of Eritrean Society

Selam Kidane & Mirjam Van Reisen

I know my son is no longer there [in the Sinai torture camps], but the memory of those phone calls will never leave me.

(Interview, Selam Kidane with the mother of EL, face-to-face, 5 April 2016)

You see many families begging for money on the streets with pictures of their children and you wonder how long it will take to collect the ransom [...] but what else can a mother do? People try to help, but it is getting too much for everyone. There are collections everywhere: at churches, at work, at village gatherings, on the streets, everywhere. I pray for an end to all this, but what is a good end?

(Interview, Selam Kidane with the mother of EL, face-to-face, 5 April 2016)

Introduction

The impact of human trafficking in the Sinai on individual victims is catastrophic and particularly worrying given the limited opportunities for therapeutic intervention to allow victims to heal from their experiences (see Chapter 7 of this book). This chapter identifies the collective expression of the trauma that results from human trafficking for ransom. It is argued that such events do not just affect individuals and their respective families, but whole communities, Eritrean society (including Eritreans in the diaspora), and even Eritrean culture.

The basis of this chapter is formed by interviews conducted by the authors in Kampala (Uganda), Asmara (Eritrea), Tigray (Ethiopia) and Tel Aviv (Israel). The main results of this research conducted with Sinai trafficking victims in Ethiopia and Israel were presented in Chapter 7. This chapter presents the results of this research in Uganda and Eritrea to assess the impact of human trafficking in the Sinai on Eritreans who were not direct victims of Sinai trafficking, but who were affected as family members, friends or general witnesses through social and traditional media. In this research, among other things, IES-R tests were administered in order to compare the levels of primary and secondary trauma. In addition, the authors conducted a literature review on Sinai trafficking for ransom, secondary and collective trauma, in order to provide the theoretical foundation of this chapter. The chapter also draws on an ICT study conducted by Selam Kidane in 2016 to determine the potential use of mobile phones and other information and communication technologies (ICTs) to support communication among youth refugees.

Trauma can be perceived as ‘collective’ or ‘cultural’ when people who have a sense of belonging to one another feel that they have been subjected to fearful and painful events that have left a mark on their collective consciousness and memory. Cultural trauma is a social construct with an impact not only on the past and present identity of subjects, but also on their future identity (Pastor, 2004).

Studies around the world on trauma from major disasters indicate that interventions and support at the individual level are not sufficient to address the impact of such trauma. Understanding and addressing the problem at the community level is key to supporting traumatised individuals in the event of wide-scale trauma. In addition, after disasters resulting in traumatic stress, the functioning of families and the wider community has to be restored for social, economic, and political rehabilitation (WHO, 2003).

Collective trauma is a devastating blow to the basic fabric of life; it damages the bond between people and impairs their sense of

community (Erikson, 1994). Erikson (1976) distinguishes between individual and collective trauma as follows:

By individual trauma I mean a blow to the psyche that breaks through one's defences so suddenly and with such brutal forces that one cannot react to it effectively. Collective trauma on the other hand is a blow to the basic tissue of societal life that damages the bonds attaching people together and impairs the prevailing sense of communality. (Erikson, 1976, pp 153–154)

Collective trauma works insidiously as a form of shock, with the gradual realisation that the community no longer exists as an effective source of support and that an important part of the self has also disappeared. While people suffering from individual trauma usually have difficulty recovering if the community remains shattered (Erikson, 1976), collective trauma may occur even in the absence of individual symptoms (Scheinberg & Fraenkel, 2001).

This chapter looks at the devastating impact of human trafficking in the Sinai on Eritrean families, communities and the society as a whole. It examines the deliberate traumatisation of victims' families and friends for the purpose of extorting ransom and the secondary trauma inflicted on family, friends and communities. It also looks at the pain caused by multiple losses, being ignored by the Eritrean government and the international community, and the feeling of injustice that ensues – all of which are impacting negatively on the narratives of Eritreans and their sense of identity. Finally, it looks at the impacts of collective trauma, an understanding of which is vital for the collective reflection and narration required for Eritreans to arrive at collective healing.

Deliberate traumatisation of friends and family networks

Torture in the context of human trafficking in the Sinai was orchestrated almost exclusively for the purpose of extortion, with the whole process being transmitted to family and friends via mobile phones to convey the excruciating pain, helplessness and humiliation

of their loved ones for money (Van Reisen, Estefanos & Rijken, 2012). Technology enabled the traffickers to traumatise the victim's entire network of family and friends, transcending space and even time, as some of the calls from the torture camps were played on social media and through satellite radio broadcasts from the diaspora, impacting on almost every Eritrean. This created a situation of mass trauma and enabled the extortion of unimaginable sums of ransom money (Van Reisen, *et al.*, 2017).

Mass trauma is defined as an event involving multiple persons, who simultaneously experience, witness or are confronted with actual death or threat thereof (Landau, Mittal & Wieling, 2008). The deliberate act of torturing thousands of Eritreans, many coming from the same region and even the same village (as groups of people who know and trust each other often flee together) has led to a classic situation of collective trauma, with enough impact to become a keystone in the group's narrative, set of beliefs and identity, both for the current generation and across generations. Many Eritrean families and communities, and the nation itself, have been blighted by the trauma ensuing from human trafficking in the Sinai.

Secondary trauma

In addition to being primary or direct victims of trauma, many Eritreans are also secondary victims of human trafficking in the Sinai and, hence, may be suffering from secondary traumatic stress. Primary victims included those trafficked and their family and friends who witnessed their torture by phone. Secondary trauma is trauma that occurs indirectly and is defined as: 'Learning about unexpected or violent death, serious harm, or threat of death or injury experienced by a family member or other close associate' (American Psychiatric Association, 2000).

In the Diagnostic and Statistical Manual of Mental Disorders, 4th Edition (DSM IV), classifications of what constitutes a traumatic event also suggests that knowledge of a traumatic event can be traumatising (American Psychiatric Association, 2000). Over the

years, researchers have started to elaborate on this and have identified that individuals can be traumatised without actually being physically harmed or threatened – by learning about the traumatic event (Figley, 1995; Steed & Bicknell, 2001). Some even argue that those indirectly exposed to trauma retain the same set of symptoms as direct victims (Figley, 1995). Secondary traumatic stress is defined as natural, consequent behaviour and emotions that results from knowledge about a traumatising event, including symptoms produced in response to exposure to details of traumatic events experienced by a significant other (Hensel, Ruiz, & Finney *et al.*, 2015).

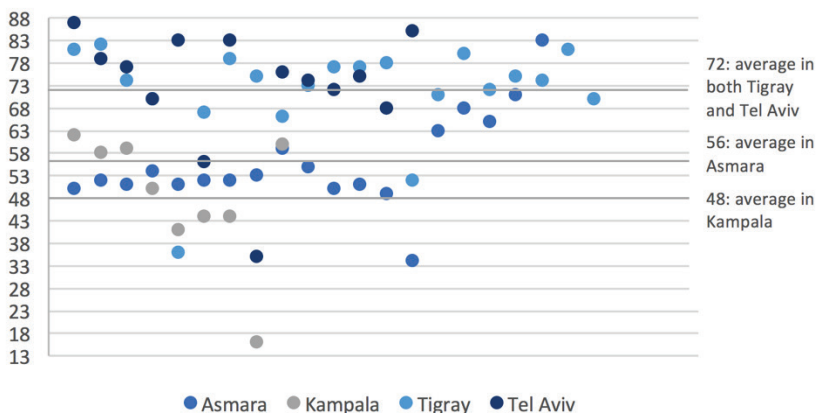
Desperate to raise the impossibly-high ransom demanded by the traffickers, friends and families of victims, and equally desperate activists trying to raise awareness using community radio and social media, have widened the number of those who were traumatised by the torture of the primary victims. The narrative of Eritreans as people who beat many odds to establish their nation through a bitter independence struggle has suffered great damage as a result of the collective trauma resulting from Sinai trafficking. An entire generation of Eritreans born and raised after Eritrea's independence has come to only ever see and hear of themselves as victims of atrocities and as unwanted refugees (Van Reisen *et al.*, 2016).

In the summer of 2015, a short survey was carried out, by the authors of this chapter, in Kampala (Uganda) and Asmara (Eritrea) asking people about the impact of human trafficking in the Sinai. Some of those interviewed had close friends and family members who had spent time in the Sinai as victims of human trafficking. The rest had followed events closely through social and traditional media.

Also taking part in survey were 35 Eritrean victims of Sinai trafficking, who are now refugees in Tel Aviv (14) and in refugee camps in Tigray Ethiopia (21) (see Chapter 7). The survey was carried out using a Tigrinya translation of the Impact of Event Scale-Revised (IES-R) (Horowitz, Wilner & Alvarez, 1979), designed to assess the magnitude of symptomatic responses to a specific traumatic life event (Weiss, 2007). On the scale, a total IES-R score of 33 or over

(from a theoretical maximum of 88) signifies the likely presence of post-traumatic stress disorder (PTSD).

Of the 30 participants (in the Kampala and Asmara groups), only 1 participant in Kampala scored below the ‘cut-off’ point for PTSD (see Graph 8.1). Although these figures are lower than the scores obtained using the same scale from Sinai victims in Tel Aviv and refugee camps in Ethiopia (see Graph 8.1), they constitute levels of trauma consistent with PTSD, with some indicating severe impact with long-term impairment of functioning (Reed, 2007). These scores signify the fact that the traumatic impact of Sinai human trafficking is far wider spread than the primary victims who underwent the physical and psychological torment at the hands of traffickers and via the phone.



Graph 8.1. IES-R scores in Asmara, Kampala, Tigray and Tel Aviv

In the Asmara group, the person who scored the highest was the mother of a victim who took part in the survey from his home in a refugee camp in Ethiopia. EL was one of the many victims whose fellow victims thought he would not survive the ordeal. He was brutally beaten and severely malnourished when he arrived at the refugee camp in Ethiopia. His ordeal, which lasted many months, only ended when his family sold their home and begged and borrowed the remaining amount to rescue him. Unfortunately, EL

was not able to make it to Israel or Europe as planned and now lives in Ethiopia with little prospect of resettlement elsewhere or of moving outside the camp. The researchers had an opportunity to do an extended interview with EL's mother and below is an excerpt from that interview:

My son left Eritrea fleeing national service. He was a bright boy and is the eldest of the six children we have. We are not a rich family, although we were relatively better off than most families in Eritrea. His intention was to get a good education and have a better life than he could have in Eritrea. To be honest, we were not party to his plan, but it was becoming normal for boys his age to leave the country. He called us from Sudan and then sometime later he called from the Sinai. At first we didn't understand, then we couldn't believe what was going on. He is our eldest, we had no other children who could help us out; we had no one we could ask.

I really find it difficult to describe what it is like to get those phone calls, everyone in the house including his small brothers and sisters used to get extremely anxious every time the phone rang. They still do, we all get startled and very agitated if the phone rings, even now. I was beside myself with worry, as was his father. I know my son is no longer there [in the Sinai torture camps], but the memory of those phone calls will never leave me.

We sold our house and borrowed more money and I sold my jewellery and most of the furniture from our house too. Now we live in two small rented rooms. His sister has also left the country and is in Sudan. She works there and sends us some money sometimes. I am always grateful that my son is alive and that keeps me going.

I never talk about it, not even with my husband or other family members, but I can't sleep at night. I stay awake until it is reasonable enough to get up and leave the house. I go to church and sit outside silently. There are others like me whose children are lost. Some don't even know what happened to them. We all know this about each other, but we never actually talk about any of it. This is partly because we find it very difficult to talk about, at least I find it difficult to talk about. It is also because I worry about such information getting into the wrong hands. My husband still works and I have the younger children to worry about.

We are not the only family that this has happened to. You see many families begging for money on the streets with pictures of their children and you wonder how long it will take to collect the ransom by collecting 10 and 20 nakfas [ERN] from passers-by, but what else can a mother do? People try to help, but it is getting too much for everyone. There are collections everywhere: at churches, at work, at village gatherings, on the streets, everywhere. I pray for an end to all this but what is a good end? One son in a camp in Ethiopia and a daughter in Sudan and the young ones missing their siblings desperately and always worrying about what will happen to us all next. The life we wanted for our children is lost, this wasn't what we wanted and worked for [...]. (Interview, Kidane, face-to-face, 5 April 2016)

The above example and the experiences of many other victims demonstrate the impact of trauma on the wider community and at the societal level. These impacts often lead victims to question their fundamental assumptions about themselves and their world. The world becomes an insecure place (Janoff-Bulman, 1989) and their trust in people around them can suffer greatly leading to alienation from former friends and neighbours.

From the above it can be concluded that Sinai trafficking, against the background of all the other violations occurring in Eritrea, has become a cause not just of trauma and PTSD at the individual level, but of collective trauma – an experience that could become a keystone in the narrative of Eritreans, affecting their set of beliefs and identity, for both current and future generations. Unlike individual trauma, which can be experienced by a small percentage of people with most recovering within a given period of time, collective trauma does not refer to symptoms of traumatic stress, but is an outcome that includes the response to the traumatic event, as well as the way it is constructed into the beliefs, decisions, behaviours and, ultimately, the narratives of the collective (Shami, 2015). Collective trauma has multiple implications for communities and society. This explains why some situations are constructed as collective trauma and others are not (Pastor, 2015). It is important to do a detailed assessment of the circumstances surrounding Sinai trafficking to fully

understand the impact and potential consequences for Eritreans now and in the future.

Pain of multiple losses

The nature of the pain caused by human trafficking in the Sinai is a central element to our assessment of the collective trauma caused. This relates to the type of loss resulting from the traumatic event. Many Eritreans have lost family members and loved ones, as well as unimaginable financial resources, to human trafficking in the Sinai. This loss is felt by whole communities due to the number of young people involved, as well as the need to mobilise resources right across the community to rescue victims.

According to the Conservation Resource Theory, the quality and quantity of resources lost in a traumatic event determine the ability to cope (or not) (Hobfoll, 2001). People strive to obtain, retain and protect that which they value and, hence, stress occurs when they lose their resources or when they are threatened with resource loss, particularly when they know they are unable to develop or enhance such resources again. Many victims said that they had to sell livestock, real estate, and jewellery and then borrow (including from loan sharks) to amass the ransom amount demanded. These ventures often involved mobilising whole communities to raise resources for ransom payments. This loss adversely impacts on wellbeing, creating a loss cycle, which often follows such a massive blow. Those with fewer resources to start off with are more deeply impacted, falling into a rapid and turbulent spiral of loss triggered by the massive loss of resources, resulting in anxiety, reduced social involvement, diminished interest in life, and feelings of isolation and social exclusion. Without reversing the vicious loss cycle – by interrupting it and introducing a resource gain cycle – it becomes impossible for communities to recover (Saul, 2014).

In addition to resources, many lives have been tragically lost in the Sinai (some families paid the ransom in full, but never got their children back). Van Reisen *et al.* (2013) estimate that 25,000–30,000

people passed through the Sinai as victims of human trafficking between 2009 and 2013, and that 20–33% of these people died as a result of the trafficking (Van Reisen, Estefanos & Rijken, 2014). Those who died simply vanished into the desert, with no closure for their loved ones. The families left behind often do not even have confirmation of their death. Eritrean social media outlets are replete with posters of missing people and appeals for information. This type of loss is known as ‘ambiguous loss’, referring to the physical absence, yet psychological presence, of a person. In the aftermath of a disaster, communities are exposed to searches for missing people. These can last many months or even years. Such uncertainty is common in many communities facing collective trauma. The certainty of death (or loss) creates a space for mourning and closure, but in cases of ambiguous loss the mourning process becomes complex and can lead to symptoms of PTSD such as anxiety, guilt, intrusive memories, and difficulties in making decisions, particularly life choices (Boss, 1999). When a significant proportion of a community is affected by loss (including ambiguous loss) as a result of a disaster, the loss becomes a collective loss and evokes collective pain, collective anxiety, depression and guilt, which have implications for how the nation (the collective) copes with problems (Possick, Sadeh & Shamai, 2008).

But loss in the Sinai was not limited to life, dignity or property. It also included loss of belief and identity (both individual and collective identity). Eritreans felt deeply let down not just by their government, which at best did not do anything to prevent the loss and at worst was suspected of benefiting from the situation, but also by the international community, which did next to nothing about the heinous crimes being committed so openly. This is contrasted with the huge international media coverage of, and intervention in, other hostage incidences. The experiences of Serbs following the war in the former Yugoslavia, of Jewish children following the Holocaust, and of African Americans traumatised by the slave trade are clear illustrations of the impacts of losing identity and the implications of such loss as collective trauma (Shamai, 2016). This affirms that the

concern is not just for present day Eritreans, but for the future, including the future of many Eritrean communities in the diaspora. Damaged identity can be expressed through anger towards other collectives or subgroups within the collective; in many cases such damage remains in the subconscious and is often transmitted to subsequent generations (Brave Hart, Chase, Elkinks *et al.*, 2011).

Alternatively, damaged (and distorted) identity could also be expressed through some kind of need to make individual or collective 'reparation' or 'penance' for the 'badness'; however, this can increase the sense of guilt if individuals can not actually prove that they are not really 'bad', leading to anger towards those seen as putting obstacles in the way of reparation (Klein, 1946). Ultimately, this can lead to paranoia and the justification of actions taken for 'self-protection' – a prospect that is cause for concern in many post-conflict situations and possibly more problematic in Eritrea where the population size is small and blighted by a history of war and political repression going back several generations. Ultimately, traumatic events damage people's perceptions of themselves and the world (Janoff-Bulman, 1985), with pain that can linger for years, impacting on cognition and behaviours, as well as their sense of collective and even national worth and trust in others, hampering the ability of the collective to bounce back.

Pain of being ignored

Victims of collective trauma can include entire groups, regardless of age, gender, social standing or even closeness to the source of the traumatic event. However, there are social variables that define the status given to the calamity. For example, society might relate differently to children, women and the elderly than adult males. Similarly, the death or injury of combatants might be perceived differently to that of civilians. More worryingly, harm to privileged socioeconomic groups might receive more attention than harm to their lower socioeconomic counterparts (Gilbert, 1998).

Eritrean victims of human trafficking in the Sinai were faced with multi-layered ambivalence regarding their plight. The incomprehensibility of the whole phenomenon, the nonchalance of the rest of the world, and the sinister nature of the Government of Eritrea meant that the plight of Sinai victims was, and continues to be, a neglected disaster. The little regard given to the victims has resulted in their experiences being ignored. This sense of being ignored and misunderstood adds to their (and their communities’) anger, depression, and sadness (Shamai, 2015).

Pain of injustice

Many studies indicate that manmade trauma (such as accidents, technological failure, war and terrorist attacks) is more likely to result in collective trauma than natural disasters (Norris, Friedman, Watson, *et al.*, 2002a; Norris, Friedman, Watson, 2002b). A possible explanation could be the inevitability and, hence, relative acceptability of natural disasters. Human trafficking in the Sinai is a manmade disaster, perpetrated with great coordination and organisation against helpless refugees fleeing their country in search of safety and better prospects. The torture methods used, the barbarity of traumatising helpless families thousands of miles away, and the commoditisation of human beings makes the whole practice totally unacceptable and demeaning, not only for the individuals involved, but for every Eritrean who looked on helplessly as the whole situation spiralled out of control.

The other explanation that is given for the severity of collective trauma from manmade traumatic experiences is the sense of betrayal that often accompanies these events (Cairns & Wilson, 1984; Cairns & Wilson, 1991; Gampel, 1988; Solomon, 1995; Schuler, Stain, Jaycox, *et al.*, 2001). Indeed, as mentioned above, the total silence that the world met human trafficking in the Sinai with, particularly in the early years, made Eritreans feel abandoned and betrayed, not only by their government, which was pushing young people out of the country and then penalising their families, but also by the

international community, which took no steps to rectify the situation or offer protection to refugees. The heart of the Sinai trafficking torture camps is located near the Israeli-Egyptian border and within earshot of two UN security points, yet thousands of people were bought and sold, tortured to death and buried right there.

The duration of a traumatic event is another variable affecting the severity of collective trauma. For instance, the slave trade, which lasted over two centuries, has had a deep-rooted impact on generations of African-Americans, who were uprooted from their homelands and suffered humiliation and mistreatment or who witnessed the humiliation and mistreatment of parents and grandparents. This has left them with collective, as well as individual, trauma (Shamai, 2015; Usher, 2007). The Holocaust, which lasted almost six years and resulted in the murder of six million Jews amid intense fear, hunger, torture and humiliation, has left its mark on the identity of Jews inducing a strong sense of mistrust, a constant search for security, and deep-seated sense of being abandoned by the rest of the world (Shamai, 2015). Although the magnitude of human trafficking in the Sinai may not be comparable to the above two extreme examples, the psychological processes involved in the atrocities and humiliation and the deep-seated mark it leaves on identity are not very different.

Living with ongoing stress requires numerous adjustments and coping mechanisms for the whole community. Hyper alertness and suspicion become the norm as a consequence of the need to remain alert to danger. However, when the internal system of a human being is aroused excessively for a prolonged period it has implications for the quality of life. According to Fullilove (2004; 2013), collective trauma may lead to structural and individual violence. People lose their ability to react to patterns of threats and opportunities leading to poor decision making at all levels (including national policies and legislation). This can lead to cycles of fragmentation in society, exacerbating previous issues (e.g., racism and other forms of discrimination, social and economic inequalities and even previous or historical trauma). This is a concern for Eritrea, as the implications

of collective trauma could increase tensions and even result in civil war along ethnic or religious lines, or it may reopen the traumatic impact of the war of independence, which also casts a long shadow over the nation's recent history.

Impacts of collective trauma

When compared to our increasing understanding of trauma at the individual level, the understanding of collective trauma on society and culture is still very much rudimentary. Cultural trauma refers to the impact of collective trauma on a relatively large group of people who may not know each other, but who are connected by their shared system of knowledge, code of behaviours, beliefs, values and symbols passed down from one generation to the next (Shamai, 2015). Shamai (2015) attempts to overcome the gap in understanding the impact of trauma on cultures (and society) by comparing the phenomena with the 'cultural genocide' perpetrated against the American Indians (Legester, 1988) and the development of the welfare state in Britain, post-World War II (Titmuss, 1958).

The destruction of resources necessary for the continuation of American Indian life and the forced displacement and breakup of family and kinship bonds essential to the continuation of social structures destroyed the integrity and ongoing viability of the existence of Native Americans in accordance to their cultural values and norms. This destruction was made possible by fostering an attitude in the general population that resulted in American Indians being seen as 'savages' unable to raise their own children. As a result, children were institutionalised (in boarding schools) and raised in an atmosphere in which their culture was considered to be inferior. The natural process of intergenerational transmission of culture was, thus, disrupted and the language, symbols and rituals of Native Americans were no longer an integral part of everyday life. Today American Indians are relegated to choosing disjointed elements of their culture and attempting to retain them.

On the other hand, in Britain, it is claimed that the dynamics of World War II forced governments to be more involved in the daily lives of their citizens (Titmuss, 1958). The war efforts mobilised the wider population, as opposed to the customary combatant groups. The damage, death and injury that resulted affected people right across the nation, compelling authorities to address 'civilian morale'. This shift resulted in cultural changes, including changes in the belief and knowledge systems in Britain, as well as attitudes regarding human rights and state responsibilities. These changes eventually became the basis of the 'culture of the welfare state', which has spread to other Western European countries.

The above examples illustrate how a national trauma can either destroy a culture or modify it as part of the process of coping with the trauma. In this sense, the most significant impact of collective trauma emanates from its introduction of a new set of knowledge, which may change (or maintain) the shared set of beliefs, attitudes, values and meanings of those who share the culture. The resulting change may cause 'cultural disorientation', where the known context of individual and social life loses its stability and coherence, making familiar beliefs, expectations and activities diversified and even polarised (Sztompka, 2002). It is still too early to make final conclusions about how current events in Eritrea are impacting on the culture, but the patterns emerging are indicative of seismic changes in the form of unprecedented mass migration and the fragmentation of Eritrean society.

In addition to helpful cultural adaptations, researchers have identified elements of core beliefs, such as religious beliefs, whose basic principles seem to be resistant to change as a result of traumatic events (Shamai, 2015). In fact, societies, communities, families and individuals going through collective traumatic events often turn to religion in times of distress (Van der Kolk & McFarlane, 1996). This is important for those concerned about potential damage to Eritrean society and culture from the impacts of collective trauma. Indeed, many observers note that there is increasing adherence to religious

beliefs among the Eritrean diaspora, as well as inside Eritrea, despite severe religious persecution and pressure against some faith groups.

Finally, with such significant impact, collective trauma can play a crucial role in accelerating social change (Pastor, 2004). Many researchers claim that significant traumatic events on a national scale have played a catalytic role in various wider changes in society (Sztompka, 2000, Picou, 2000). The Chernobyl Nuclear Disaster in April 1986, for example, is said to have played a significant role in the political changes that led to the collapse of the Union of Soviet Socialist Republics (USSR) (Read, 1993). Similarly, the failure to manage the aftermath of the 1985 earthquake in Mexico City led to the collapse of a political regime that had been in power for over 85 years (Pastor, 2004). Although the nature of the trauma in Eritrea might be different, there is a possibility that it could lead to a movement for a wider social change to address the issues that are the root causes of the mass migration of Eritreans.

It is clear that Eritrean society is going through a traumatic period, both as a result of the atrocities occurring inside the country and the experiences of people who have fled and become refugees. Sinai trafficking is but one example of these traumas; Eritreans in Libya are experiencing similar situations and life in the Calais jungle comes with its own traumas. When a traumatic set of circumstances becomes endemic over a prolonged period of time, the adaptations and changes used to cope can damage national identity. A case in point is the situation in Northern Ireland, where a spiralling conflict impacted on society at various levels right across the spectrum, increasing hate and suspicion between the two warring groups and leading to heightened animosity between people in the same community, consequently impacting on their national identity. The resultant damage is evident in the ongoing interventions required so many years after the formal conclusion of the armed conflict. There are many other examples of how traumatic experiences at a national level can lead to the national identity being defined by conflict. It is, therefore, important to understand the patterns of identity

redefinition in Eritrea and among Eritreans to ensure the cohesion and viability of the country and its people.

In search of healing

Community resilience is the ability to absorb the turbulence created by traumatic experiences, recover effectively, and attain a higher level of functioning in doing so. An important aspect of community resilience is “the capacity to rebound from adversity, strengthened and more resourceful. It is an active process of endurance, self-righting and growth in response to crisis and challenges” (Walsh, 2007). Understanding the concepts of collective trauma and community resilience will enable those who are concerned with the impacts of traumatic experiences on the Eritrean society develop strategies for helping the community to heal and rebuild.

Walsh identified three key social processes that facilitated resilience:

- Belief systems: referring to a positive outlook, transcendence and spirituality, which enable a community to find meaning in traumatic loss experiences.
- Organisational patterns: referring to the availability of economic and institutional resources and the connectedness and flexibility of the community to engage the resources as appropriate.
- Communication and problem solving: referring to open emotional expression and collaborative problem solving.

As a society in crisis and faced with the challenges of mass migration, building resilience through building institutional capacity to enhance economic and institutional resources in Eritrea is difficult – and for Eritreans caught up in the migration crisis it is impossible. However, the communities that are constituting and reconstituting themselves in the aftermath of mass forced migration are

resuscitating age-old spiritual practices as a response to the distress caused by their memories of migration and their experiences thereof. In an interview, a recent arrival to Europe disclosed the widespread use of exorcism as a response to what sounds like the dissociation that is one of the symptoms of PTSD. Exorcism is also used when a person exhibits the symptoms of a split personality (which are known as ‘Boeda’ and ‘Zaar’ forms of evil spirits in Eritrea) (Interview, Van Reisen with S, WhatsApp, 22 October 2016). These practices had become rare, but it appears that severe and widespread trauma is leading to the proliferation of these practices as a potential coping mechanism or solution to the impacts of traumatic stress. In an interview between Mirjam Van Reisen and Meron Estefanos (Eritrean radio presenter and human rights activist), the latter explains:

To expel the devil or demon, physical violence is used to beat the invader out of the body. People who suffer from Zaar may not receive medical help, because it is believed that this would kill them. (Interview, Van Reisen with Meron Estefanos, face-to-face, 14 October 2016)

As mentioned above these practices are not exactly alien to the culture, however, they had ceased to be practised widely, at least in urban areas and among those with a modern education. The interviewee continues: “I did not know it. I have first seen it in Sawa [during the national service]. It looked like an epileptic episode” (Interview, Van Reisen with S, WhatsApp, 22 October 2016)

This reliance on spiritual practices in the absence of religious leaders with experience and knowledge might expose vulnerable victims to further maladjustments. Another interview, this time with an experienced activist with vast knowledge of trafficking in the Sinai, relates this very phenomena clearly:

SA is young minor girl who was very severely tortured and abused in Sinai, she keeps getting attacks where she falls. She has Buda. Possessed by a wicked spirit who can control other people. To take the Buda out [to exorcise] they beat you up.

There are many incidents where girls are beaten up severely by other girls who try to drive the Buda out. There was an incident of one girl beaten up by four girls by a stick. (Interview, Van Reisen with Meron Estefanos, face-to-face, 15 October 2016)

The interview also relates that although the notion of evil spirits, witchcraft and exorcisms are not new to the culture, many myths and legends that were no longer part of everyday life seem to be regaining momentum as a result of the need to deal with the impacts of trauma.

SA is falling down [fainting or convulsing] in Sweden, her mother was practising Buda or was [possessed by] Buda. In the Sinai many women were experiencing Buda [attacks]...In the Orthodox Church they chain you or beat you [to exorcise the demons]. Aبا Selama – the crooked priest will offer to take out the demons, it is a big cult which now has many followers all over the world. These are self-proclaimed prophets, SA follows him now. (Interview, Van Reisen with Meron Estefanos, face-to-face, 15 October 2015)

The overreliance on spiritual practices is further complicated by the fear of the potential effects of psychiatric treatments, particularly drug treatments. Estefanos describes a particular case of a Sinai victim:

After Lampedusa [a disaster that claimed over 300 Eritreans crossing the Mediterranean], she wanted to have psychiatric help, other people told her that they [psychiatrists] would give her pills she would become a zombie, the group pressure made her stop seeking for [psychiatric] help. F is 17, she left at the age of 14. She was kidnapped in Libya. She is a survivor from a ship accident. Her brothers aged 9 and 12 called from Ethiopia and her brother from Israel, they are asking her to send money. (Interview, Van Reisen with Meron Estefanos, face-to-face, 15 October 2015)

In search of answers to what are overwhelming responses to extremely difficult experiences, many young people seem to be experimenting with spiritual practices that they are vaguely familiar

with in their culture. Estefanos describes the following:

Then there is Zaar, people have Zaar, they scream. If they smell perfume, the Zaar needs to have the bottle. They like green, it comes from the Middle East. People who have Zaar wear bright green or bright red. The new generations have gone back to this.

They also spend a lot of time in church. MU's daughter who is 16 who can hardly stand because of the torture, goes to church from 4:00 am to 14:00 hours, she spends 10 hours in church. It gives some comfort and [many of] the young generation come from the rural areas where these things are still practised. (Interview, Van Reisen with Meron Estefanos, face-to-face, 15 October 2015)

The traditional trauma creates a reliance on traditional priests to help those suffering from these symptoms to overcome them or be relieved from them.

Healing collective trauma

The horrific crime of human trafficking in the Sinai was made possible by the communication of extremely traumatic material using mobile phones, and further transmission via the Internet on social media and through satellite radios. This led to the traumatising of not just the hostages, but also their families and friends, who were forced to listen to their torture, as well as many in the community at large.

The power of information and communication technologies (ICTs) to remotely control and influence the emotions, attitudes and behaviours of people is enormous and unprecedented. The hostage takers have effectively exploited this element to their advantage. Family members, relatives and friends of the victims were made to communicate with the victims while they were being tortured. The crying and pleas for help over the phones emanating from those tortured emotionally traumatised those who heard them, transcending time and space (Van Reisen *et al.*, 2017).

Modern technology has played a significant role in incubating collective trauma in scattered refugee communities. Somasundaram (2014) notes that:

Modern technology keeps the collective trauma alive and present [in the lives of refugees and migrants from collectivistic communities]. They maintain close contact through mobile phones, keep abreast of current news through television, internet, other media and other travellers. In fact, they continue to live more within their home network, undergoing all the uncertainty, insecurity, terror, agony and trauma. (Ibid., p. 46)

At the same time ICTs also presents an opportunity to challenge unhelpful rigidity allowing people to explore a multiplicity of views and perspectives (Van Reisen & Gerrima, 2016) and, hence, enabling healing from the adverse impacts of collective trauma.

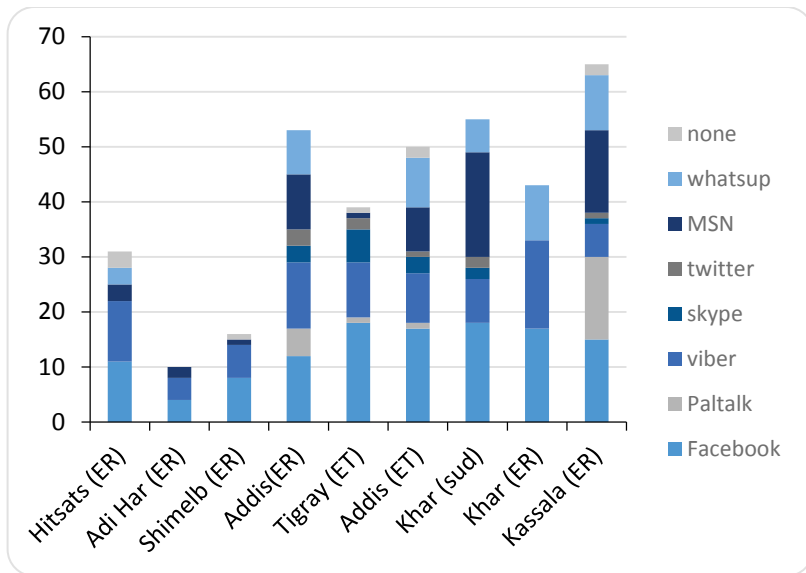
Various researchers have identified that the widespread problem of collective traumatisation is most cost effectively approached through community level interventions that reach a large section of the community, while simultaneously being a preventive/public mental health promotion initiative, for example, as was the case in post-conflict Rwanda (Scholte & Ager, 2014). A worldwide panel of trauma experts (Hobfoll & Watson *et al.*, 2007) have identified restoring connectedness, social support and a sense of collective efficacy as essential principles in interventions after mass trauma.

Therefore, taking the above together (i.e., the fact that mass traumatisation was caused by the utilisation of ICTs and the need for mass healing), it is not difficult to envisage the development of innovative approaches that enable social healing (Somasundaram, 2014). Public mental health information can be also provided in relevant languages and in keeping with the culture via radio and social media platforms.

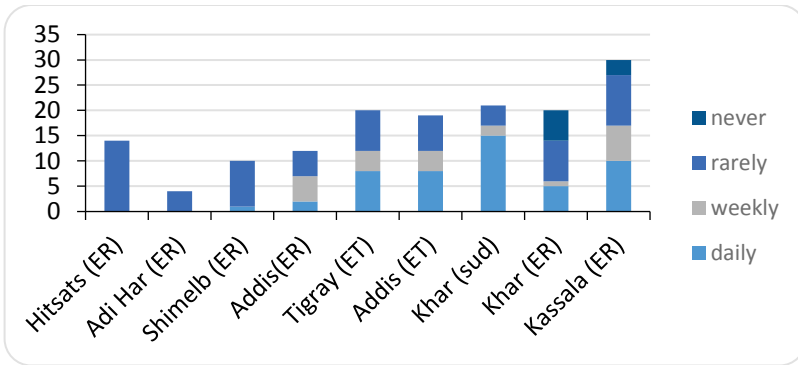
A baseline study aimed at exploring the use of ICTs to promote community resilience has established that there is plenty of scope to utilise social media and information technology (IT) to enhance the quality of interaction among youth to promote community resilience

and also prevent adverse situations (Kidane, 2016). This study, which was carried out in Eritrean refugee camps in Ethiopia and Sudan, as well as among local youth from refugee hosting communities in Addis Ababa, Khartoum, Kassala and Shire, found that social media usage was extensive, with Facebook being the most popular medium followed by Viber and WhatsApp (Kidane, 2016; see Graph 8.2).

In addition to social media, local FM radios were also popular among youth. Despite the lack of connectivity in the camps in Ethiopia, hardly any respondents reported not listening to the radio. Many people would at least listen to the radio occasionally in the camps with many reporting to be listening weekly or daily where connectivity was available (see Graph 8.3).

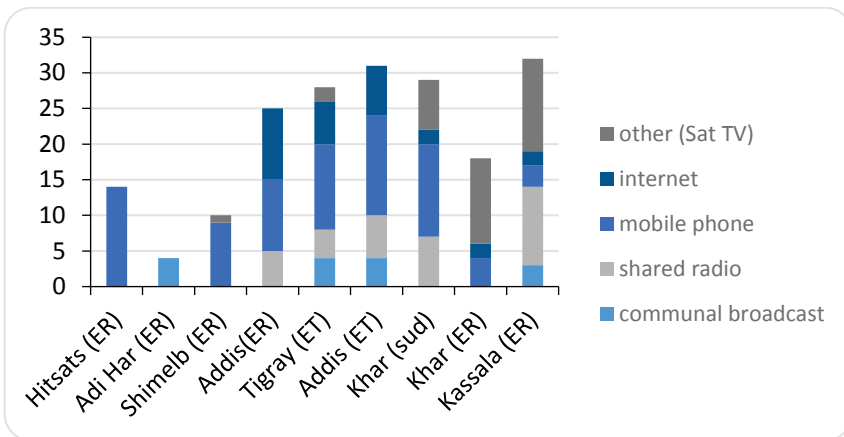


Graph 8.2. Use of social media in youth from refugee and host communities in Ethiopia and Sudan



Graph 8.3. Radio listening habits of refugee youth and their peers from the host community

Finally, the study also found that smart phones were in use by a great majority of young people in both the refugee and host communities, making it the ideal tool for a variety of communication platforms, including radio listening as well as accessing social media to remain in contact with friends and family across the world (see Graph 8.4).



Graph 8.4. Equipment used to listen to the radio

The popularity of local FM radio and the prevalence of the use of smart phones to access information, as well to listen to the radio through satellite TV, presents a lot of opportunities for using phones

to support young refugees struggling to cope with their traumatic experiences. Smartphones can be used to connect young people with each other and with resources within their communities and culture. This would help communities to gradually regain their inherent resilience. It would not only enable members of the community to cope with traumatic experiences, but would lead to positive psychological changes or post-traumatic growth, which results from successfully struggling against adversity (Tedeschi & Calhoun, 2003).

Conclusion

Severe trauma and loss is shared within the Eritrean community. Multiple and consecutive trauma is shared within families, communities and across different geographic locations. This can be attributed in part to the phenomenon of collective trauma, as has been described and defined in other circumstances of extremely traumatised communities. Studies identifying generational aspects of collective trauma are highly relevant for a nuanced understanding of the community impact of human trafficking for ransom on Eritreans.

In human trafficking for ransom in the Sinai (and elsewhere), ICTs add a new element, which enabled it to provoke collective trauma. The victims of this form of trafficking were forced to contact relatives by mobile phone for the collection of ransom while being tortured, drawing these relatives into the experience. In this way, not only the actual 'individual' victim of the torture was traumatised, but also the relatives of the victim.

The ransom amounts demanded were so high that entire communities were drawn into the collection of the ransom. This further exacerbated the experience of collective trauma. The resulting material loss and poverty create further situations of new trauma. The mutual debts, the associated guilt, and the feeling of wrongdoing on the part of the victim and of the family members who were asked for help, caused further traumatising.

The results of the Impact of Events Test carried out for the research on which this chapter is based saw severely elevated levels

of trauma. These include people who were not actually trafficked, but who were associated with it as secondary victims (e.g. parents and other relatives). The interviews that were carried out further explain how and in which way the human trafficking for ransom has become deeply traumatising for the relatives associated with such situations. The increased use of ICTs to communicate such events, to collect the ransoms, to communicate the names of people who have disappeared or died, and to share events in general has created a context in which geographically dispersed Eritrean communities continue to share the horrific events that are happening.

In this chapter, it is suggested that such ICT connections may also be used to help relieve the symptoms of trauma, and it is important that such programmes are developed. The collective trauma negatively affects the ability of communities to take rational decisions and, therefore, it is all the more important that the symptoms of such trauma are addressed.

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