

Coming of Age After the Genocide: Mental Health of Rwandan Young Adults

Application for the Dr. Zellig Bach Award for the Study of the Family

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Background

Twenty-six years ago, in 1994, the genocide against the Tutsi took place in Rwanda and claimed the lives of an estimated 800,000 people in 100 days (Prunier, 1997). This genocide continues to have a considerable psychological toll for the 300,000 to 400,000 survivors who escaped this horrifically traumatic event with their lives (Hirondelle News). A recent survey by the Rwandan Ministry of Health revealed a PTSD prevalence of 27.9% and a depression prevalence of 35% in this population (Rwanda Mental Health Survey, 2018).

Studies conducted on children of survivors of other genocides have found that the psychological sequelae of genocides can be passed down across generations. The strongest evidence for this transmission of trauma across generations comes from the extensive literature on children of Holocaust survivors which has revealed that they show a significantly higher prevalence of current and lifetime PTSD, depression, anxiety, eating disorders, and substance abuse disorders compared to demographically comparable groups (Yehuda, Bell, Bierer, & Schmeidler, 2008; Yehuda, Halligan, & Bierer, 2001; Yehuda, Schmeidler, Wainberg, Binder-Brynes, & Duvdevani, 1998). Similar results have also been reported for children of survivors of other genocides such as the Khmer Rouge genocide in Cambodia (Münyas, 2008). The only three studies to date conducted on children of Rwandan genocide survivors have also found evidence for this intergenerational transmission of trauma (Perroud et al., 2014; Rudahindwa et al., 2018; Shrira, Mollov, & Mudahogora, 2019).

However, no studies to our knowledge have investigated predictors of this transmission in offspring of Rwandan genocide survivors. Evidence from Holocaust survivors and survivors of the Khmer rouge genocide suggest that factors related to family functioning such as family

communication styles (Braga, Mello, & Fiks, 2012; Giladi & Bell, 2012; Kaitz, Levy, Ebstein, Faraone, & Mankuta, 2009), parenting styles (Field, Muong, & Sochanvimean, 2013; Field, Om, Kim, & Vorn, 2011; Rowland-Klein & Dunlop, 1998), and parental communication about their traumatic experiences (Bar-On et al., 1998; Lin & Suyemoto, 2016; Wiseman, Barber, Raz, Yam, Foltz, & Livne-Snir, 2002; Wiseman, Metz, & Barber, 2006) might predict this transmission, but these factors have not been investigated in children of Rwandan genocide survivors.

The 20th century was nicknamed the “century of genocide” because of the long list of genocides that occurred in this century, starting with the Herero and Armenian genocides in the early 1900s and ending with the genocides in Rwanda and Bosnia in the 1990s (Levene, 2000). Given the reported high numbers of survivors of these different genocides affected by trauma-related disorders and the potentially higher number of descendants to whom they could transmit their trauma, the public health consequences of intergenerational trauma transmission are concerning. Furthermore, some studies of holocaust survivors have found that mothers who were exposed to the holocaust as children show the highest likelihood of transmission (Yehuda & Lehrner, 2018). This suggests that the number of affected children of survivors of more recent genocides, like the genocide in Rwanda, will continue to increase as more survivors who were children at the time of exposure begin to have children. Given the severe shortage of mental health providers in Rwanda, this could constitute a mental health crisis (Rugema, Krantz, Mogren, Ntaganira, & Persson, 2015). It is therefore imperative to evaluate the mechanisms that underlie this intergenerational transmission of trauma and to tailor prevention and intervention efforts to address them.

My proposed study will investigate the relationship between intergenerational trauma and family functioning in adult children of Rwandan survivors of the 1994 genocide against the Tutsi. In this study, three family functioning variables will be investigated as potential mediators of this intergenerational trauma transmission: parenting styles, family communication styles, and parental communication about the genocide.

Study design

Participants

The participant population for this study will be Rwandan youth between the ages of 18 and 40 who identify as children of survivors. Our target sample size is 250 participants. Participants will be provided with the equivalent in Rwandan Francs of a \$10 incentive, which will be distributed via the Mobile Money application that is widely used in Rwanda and free to enroll. Upon completion of the survey, participants will be directed to a separate secure survey in which they will provide a Rwandan phone number to which the \$10 can be transferred.

Recruitment for this study will be conducted in collaboration with a Rwandan youth genocide survivor organization named GAERG (Groupe des Anciens Etudiants Rescapés du Génocide). The GAERG Management Team has provided feedback on the survey, is assisting with the Rwanda National Ethics Committee review process, and has agreed to assist in participant recruitment.

Procedures

This study will be conducted through an online survey using the Qualtrics secure online survey platform. The survey will take approximately 30 minutes to complete and will include questions on demographic variables, parental exposure to the genocide, exposure to post-genocide stressors, family functioning variables, parental and personal mental health, and

protective factors. All study materials will be provided in English and Kinyarwanda, the local language, to ensure that our findings are generalizable to the general Rwandan population.

IRB approval

This study has been approved the Yale University Institutional Review Board and is currently being reviewed by the Rwanda National Ethics Committee.

Proposed use of funds

This \$1,000 grant from the Dr. Zellig Bach Award for the Study of the Family is being requested to supplement a grant that has been provided by The Whitney and Betty MacMillan Center for International and Area Studies at Yale University for this project. The funds from this grant will go towards paying the 1,500,000 Rwandan Francs (the equivalent of \$1,600) required by the Rwandan National Ethics Committee to review the research. This cost was not anticipated when the original study budget was made. We are therefore pursuing additional funding to cover these costs.

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