



زانكۆی سه لاهه دین - هه ولێر  
Salahaddin University-Erbil

# Early Childhood Trauma in the Psychiatric Hospital in Erbil

Research Project

Submitted to the department of (Social Work) in partial fulfillment of  
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**Prepared by:**

**Zeynab Idrees Dyab**

**Supervised by:**

**Hazha Mohammed Salih**

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## **Abstract:**

This study is entitled (Early Childhood trauma in the Psychiatric hospital in Hawler), the main objectives of the research are, finding out the best strategies to overcome Childhood trauma in Hawler city specifically, and to learn more about the aftermaths caused by Adverse Childhood Experiences (ACEs) in Hawler city, which is to analyze the Kurdish families' effects from childhood, to youths and adults nowadays, this study has used Sequential explanatory design, with an online survey and face to face interviews, the result and findings after collecting data were that the Kurdish families have had many effects on their children in the past, that led them to who they have become now, some of the participants are suffering from some mental issues, in the conclusion as a means of solution and prevention, Kurdish families need to become more aware about the psychological state of the children's mind.

## Chapter One: Introduction

### 1.1 Introduction

Over the past 2 decades, many studies have demonstrated a strong link between childhood trauma and adult psychopathology, such as depression and anxiety (*Ferguson and Dacey, 1997*), dissociative symptoms (*Draijer and Langeland, 1999*), substance use disorders (*Triffleman et al., 1995*), suicidal behaviors (*Soloff et al., 2002*), and, in particular, personality disorders (*Salzman et al., 1993*)

Childhood. The very word draws up images of innocence, joy, optimism and wonder. Childhood is a time of security – being protected and loved. (*Roy, C.A. and Perry, J.C., 2004*).

Children love to be cared for and feel they are as important, children love when their life is positively stable, having stability in knowing you are protected by your family allows you to form solid and safe relationships later in life. This is the ideal definition and experience of childhood. However, the reality of many children experiences and the effect on the rest of their lives is in stark contrast to this idealized expectation.

So when we remind ourselves of the childhood we've had, we can tell if it was a healthy childhood, or something worse, some of us might have been neglected, some of us might have faced abuse and violence, some of us might have been bullied or face or witnessed any other forms of traumatic events.

Childhood trauma chips away at a child's stability and sense of self, undermining self-worth and often staying with the child into adulthood. This trauma can also impact a person into adulthood as they experience feelings of shame and guilt, feeling disconnected and unable to relate to others, trouble controlling emotions, heightened anxiety and depression, anger.

This research as one of the first researches about Trauma/Childhood trauma in Hawler city, focuses on finding out the aftermaths of Childhood trauma in adults.

## 1.2 Research problem

The effects of adverse childhood experiences (ACEs) commonly linger throughout adolescence and adulthood, according to *the United States Department of Health and Human Services (HHS)*:

“The more childhood trauma a child experiences, the greater their risk for health consequences and negative behaviors”

Research has shown that childhood trauma survivors may experience:

(Learning problems, anger issues, shame, guilt, long-term health problems...)

Research about childhood trauma haven't been usefully conducted in our country and our city, there is a gap in the research area, since like all of the other subjects (childhood trauma) is a really important subject and researching helps to find prevention and protection guide from it.

According to *the National Association of Social Workers (NASW)*, a majority of children have experienced childhood trauma, often termed Adverse Childhood Experiences (ACE) these traumatic events can carry out harmful aftermaths well into adulthood.

Social workers can be a significant part of both prevention and care since we (social workers) meet and interact with individuals, and there is a possibility they might have ACEs.

## 1.3 The objectivities of the research:

- Finding out the best strategies to overcome Childhood trauma in Hawler city specifically.
- To analyze what type of childhood trauma is common at the Psychiatric hospital in hawler.
- To learn more about the aftermaths caused by ACEs in Hawler city.
- To analyze the Kurdish families' effects from childhood to youths nowadays.

#### **1.4 Research questions:**

- What are the best working strategies to overcome childhood trauma?
- Which type of (childhood trauma) is more common in Psychiatric hospitals in Hawler?
- What are the main and worst aftermaths caused by ACEs in Hawler city?
- To what extent families have affected the Psychological state of youths nowadays in Hawler city?

### **1.5 Definition of Concepts**

#### **1.5.1 Early childhood trauma:**

Based on *the National Child traumatic stress network (NCTSN)*:

Early childhood trauma generally refers to the traumatic experiences that occur to children 0-6. Because infants and young children's reactions may be different from older children's, and because they may not be able to verbalize their reactions to threatening or dangerous events, many people assume that young age protects children from the impact of traumatic experiences. A growing body of research has established that young children may be affected by events that threaten their safety or the safety of their parents/caregivers, and their symptoms have been well documented. These traumas can be the result of intentional violence—such as child physical or sexual abuse, or domestic violence—or the result of natural disasters, accidents, or war. Young children also may experience traumatic stress in response to painful medical procedures or the sudden loss of a parent/caregiver.

#### **1.5.2 Trauma**

*American Psychiatric Association (2013)* defined trauma as exposure to an extraordinary experience that presents a physical or psychological threat to oneself or others and generates a reaction of helplessness and fear. (*Levenson 2017*)

Trauma is defined as an adverse life experience that overwhelms an individual's capacity to adapt positively to whatever threat they face. (*Virginia C. Strand 2021*).

### **1.5.3 ACE's**

Adverse Childhood Experiences, or ACEs, are potentially traumatic events that occur in childhood (0-17 years) such as experiencing abuse, or neglect; witnessing violence in the home, and having a family member attempt or die by suicide.<sup>1,2</sup> Also included are aspects of the child's environment that can undermine their sense of safety, stability, and bonding such as growing up in a household with substance misuse, mental health problems, or instability due to parental separation or incarceration of a parent, sibling or another member of the household.

*(National Center for Injury Prevention and Control Division of Violence Prevention).*

### **1.5.4 Traumatic events**

Based on NCTSN: a traumatic event is a frightening, dangerous, or violent event that poses a threat to a child's life or bodily integrity. Witnessing a traumatic event that threatens the life or physical security of a loved one can also be traumatic. This is particularly important for young children as their sense of safety depends on the perceived safety of their attachment figures.

## **1.6 Organization of the research**

Chapter one: Introduction, research (problem, objectivities, questions, concepts)

Chapter two: A literature review (previous studies, types of childhood traumas, social worker's role to prevent and care for traumatized adults)

Chapter three: methodology of the research (sampling, questionnaire, geographic area, data analysis)

Chapter four: finding and discussion

Chapter five: conclusion, and recommendations

## Chapter Two: Literature Review:

### 2.1 Previous studies regarding childhood trauma:

An article on the attachment trauma networks site, with the title “early childhood trauma – realize the impact ... build the resilience” claims that Trauma is defined as “an event outside normal human experience”. These events are generally emotionally painful and distressing, and overwhelm a person’s ability to cope, leaving him/her powerless. Feeling powerless is an important concept when trying to understand trauma – especially as you apply it to trauma in children.

especially in situations where children are exposed to repeated neglect, abuse, and maltreatment. While most of the public recognizes war, physical violence, rape, natural disasters, and sexual abuse as potentially traumatizing experiences, few recognize the significant impact that long-term neglect or repeated verbal abuse and poor early childhood care can have on a child’s emotional health and their neurological development.

Researchers, such as Dr. Bruce Perry, have reported for more than a decade about the neurodevelopmental differences of children subjected to chronic traumatic stress.

A difficult reality for psychiatrists and counselors of child abuse is that young victims are at high risk of becoming offenders themselves one day, although it’s unclear why. But now a team of behavioral geneticists in Switzerland reports a possible reason: early psychological trauma may cause lasting changes in the brain that promote aggressive behavior in adulthood. (*Blue, B., 2013.*)

Trauma Theory teaches us that when experiencing stress or a threat (perceived or real), the brain has three possible protective responses – **fight, flight, or freeze**. The midbrain area is activated by the “trigger” and responds by increasing the production of the powerful hormone: cortisol.

## 2.3 Types of Childhood trauma:

The article mentions that in a recent study the researchers find the following nine categories of childhood abuse and household dysfunction:

- Recurrent physical abuse
- Recurrent emotional abuse
- Contact sexual abuse
- An alcohol and/or drug abuser in the household
- An incarcerated household member
- A household member who is chronically depressed, mentally ill, institutionalized, or suicidal
- Mother is treated violently
- One or no parents
- Emotional or physical neglect

**“The health risks for Adverse Childhood Experiences are higher than smoking, alcohol, or exposure to chemical toxins and pollution.” — Donna Jackson Nakazawa** - author of 6 books including *Childhood Disrupted: How Your Biography Becomes Your Biology, and How You Can Heal*.

## 2.4 Roles of social workers to analyze and find out about people with childhood trauma:

To help those who survive trauma cope, recover, and potentially grow from the experience and to help change the conditions that contribute to the traumatic event, social workers use a diverse body of intervention strategies combining individual, family, group, and community modalities, all of which need to be culturally sensitive. The importance of cultural competence applies to all types and levels of intervention and in all phases of the process, including the assessment of the problem and the delivery of services. For example, the use of culturally valid techniques for assessing traumatic reactions is crucial for avoiding underdiagnoses, over-diagnoses, or misdiagnosed as psychiatric disorders with distress responses that are considered normal in the survivor's culture. Thus, assigning a diagnosis of posttraumatic stress disorder without a full cultural assessment raises serious concerns relative to the validity of the diagnosis and the appropriateness of subsequent interventions. (*Berger. 2012*)

I, as the researcher, expect that the answers to my questions would be, yes of course families have and are affecting the way a human thinks and grows (positively or negatively), I expect that the hospital is not qualified enough, and the people don't know much about this subject.

## **Chapter Three: Methodology**

### **3.1 Method:**

This research used the mixed-methods sequential explanatory design, which implies collecting and analyzing quantitative and then qualitative data in two consecutive phases within one study.

The explanatory-sequential approach is sequential and is used when the researcher is interested in following up the quantitative results with qualitative data. Thus, the qualitative data is used in the subsequent interpretation and clarification of the results from the quantitative data analysis. (*W. Alex Edmonds & Thomas D Kennedy*)

the interviewees gave permission to their names to be shown.

### **3.2 Sampling and Data Collection Tools:**

As for the qualitative method, two psychiatrists and 3 social workers were interviewed, the hospital only allowed me to interview three of the employees/social workers working there, and for the quantitative method, as the questionnaire was made online by google form, the participants were chosen randomly because the research sample includes youth people like the public mental health studies sample.

### **3.3 Questionnaire:**

the questionnaire for the research was made online, with google form, which contained 4 biography questions 10 questions to analyze the current psychological state of the participants, and the last 27 questions for analyzing their childhood, the questionnaire form is 41 questions total.

### **3.4 Geographic Area:**

Part of The geographic area was the Psychiatric hospital in hawler, which is located on 60 meters' street, and the interviewees were all working at that hospital, but the last interview was online, on Facebook messenger 1-hour video call, and the

questionnaires also were online, there was not a specific area, but they were all filled out inside of Hawler city.

### 3.5 Data Analysis:

#### 3.5.1 Interview data analysis

This research has used two data collection methods, they were the quantitative method and the qualitative method, first, an online questionnaire form was made and it got spread non -proposed-fully (randomly), the research population is the youths and adults nowadays in Hawler city, and the questionnaire had 56 responses, and since the spreading was random, some of them are male and some of them are female.

in the qualitative interviews I went to my research area which was ‘the psychiatric hospital in Hawler city’ there was one doctor one psychiatrist who was ready to take part of the interview, whose name was dr. Kamaran Qadr Resul, I interviewed him for about one hour but since he didn’t give his consent to record his voice I started writing down every word he said so as not to miss one of his answers.

My first question for him was **what’s trauma and specifically what is childhood trauma to you? if you could give me a definition?**

His answer was

“the ones who experience trauma in their childhood, would probably do the same traumatic act or make the same traumatic event to their surroundings, in my clinic people have come and said (we are not normal we are reacting to things overly, we are doing the same things) and he gave an example that was that when a young boy 8 years old gets beaten by his parents or by the teacher, he might do the same to his students if he becomes a teacher or to his children when he becomes a parent.”

With this answer, it can be seen that traumatic events can have significant effects on children, traumatic events might stay in the subconscious mind or memory of children which can result in remaking or re-experiencing the same event.

Dr. Kamaran mentioned and made an example about the Kurdish people who are driving on the street and they never accept the other drivers and sometimes they have no attitude and they just disrespect each other, and usually, “the ones who

make mistakes, don't admit to their mistake, and find excuses and try to even persuade others, that they are the right ones!" He claimed.

For example, Saddam, if you were to tell him he is wrong, he wouldn't like it and say that he is fair and good.

My understanding about this part of the interview is by this explanation Dr. Kamaran told us, that the ones who do bad things or even make mistakes purposefully, they can always find and say excuses, sometimes people do that to rest their coincidence, so the ones Who traumatize people also think they are doing the right thing, they think if they hit their children it's an educational matter, as This is the case in every or most of the families in Kurdistan, the ones who make mistakes, don't admit to their mistake, and find excuses and try to even persuade others, that they are the right ones! For example, Saddam, if you were to tell him he is wrong, he wouldn't like it and say that he is fair and good.

They hit their wives to make them obey, they even hit their sisters to stop them from doing anything wrong or making mistakes, they have these types of excuses, they only know this much about education, about marriage, being a brother, or being a father.

As I asked the psychiatrist **what do you think is the best treatment for the traumatized people or the ones that have experienced childhood trauma when they were a child?**

His answer surprised me because he said "I never believe in therapy or consultation, it's a long-term treatment and it lasts for a short time."

"I don't believe in talking or consultation."

He mentioned that neurotransmitters and medication are much better and have many more effects on the patient or the one experiencing or has experienced trauma.

He said "these traumatic events make the person have the symptoms of depression and when they come to me I can write down a tablet of antidepressant pills" he said "But still there have been some that didn't need any pills or medication and they recovered" Dr. Kamaran linked this with "neuroplasticity- it's like the things

we always do or mind gets used to it and we will always have this subconsciously and do these things again and again repeatedly”

so the aggressive people have always been aggressive so they will always be aggressive their mind has been used to it.

As I understood the doctor he meant that, you can't give up on the thing that you have been doing in all your life someone specialties in economics he will always say money financial and this stuff.

As the doctor continued giving examples of how some characteristics from parents can go on to their children, he mentioned the women or the mothers with OCD or they have anxiety, they say some things daily so the babies or the toddlers or the teenagers will think or say the same thing.

And the next question was I needed to know **if the doctor has some examples of trauma I'm sure he had had several patients probably that were traumatized or were suffering from the aftermaths of traumas they have experienced?** And he gave me samples of grief, experiencing grief and the stages of grief are four stages, first you just don't believe that person is dead, The second stage is you believe but it's hard, the third stage is you get shocked while living your daily life and you feel the absence of the person whose dead, the 4th and last stage is you get used to it but in some cases, while getting shocked you stay in this shock missing the dead person you might get traumatized or if the person has been killed in front of you, then again you will be traumatized, other examples of patients with trauma who visited doctor Kamaran, are if someone is killed in front of them or get to experience sexual assault or they have had an aggressive person around them.

My last question for doctor Kamaran was **Do you ever try to treat any mental health issues with trauma or others, with Cognitive Behavior Therapy(CBT) or do they work on the subconscious part of the mind of patients?**

This answer was “no, as I mentioned neuroplasticity, we do know about this, but as I mentioned I don't believe in therapies or consultation and I don't give these types of treatments in my clinic but I know what you are talking about.”

In the end, he talked about “3 types of memories of humans regarding to what we remember and what stays in our minds, first is short term memory, you use it every

day, and if you don't have short term memory you can't talk, the second one is intermediate, if you make a box, and the last level is long term memory which is all the things that you have experienced from a long time ago, you have achieved all of them but you don't remember them or memorize them daily in your life."

doctor Kamaran mentioned that in 1980 he was studying in America, and in 1994 and 1995 he was abroad and he said that he has many years of experience and he used to give consultation and therapy to patients but he mentioned that he once had one patient and he consulted with her for five or six months but still the patient came back as the therapy never had happened and they started giving her pills because the effects of the pills take a shorter time.

Then I went to another room, To interview the social workers or consultants working in the psychiatric hospital in Hawler, but since there was no empty room I had to change the interview method to the focus group method so the focus group contained five social workers or I can say because some of them are graduated from psychology department so they were all sitting there and with no distractions, we had our focus group and I asked my questions freely and openly and each one of them if they had an answer they would answer me, Mr. Sdiq was the first That answered my question that was... **how often do you give therapy treatment or consultation treatment for patients in psychiatric hospital in Hawler?...** and he mentioned that "it's different from someone to another, or like some people get better and get treated only with medications and pills but some others only get better and feel better and recover with only consultation or therapy or some of them can have both and then recover fully, it depends on the case, It's not a doctor job" he said.

But the other social worker named Ali argued with him and said "it's a part of clinical psychology and every doctor must believe and work with clinical psychology, like it's not full if you only go to it with medication, you must use both treatments (medication plus consultations and therapies)."

Then I asked **if they use different types of therapies treating the patients that come to the psychiatric hospital in Hawler**, and Mr. Dedawan, as he said that PTSD cases defer from one to another from one country to another country, from someone that is educated or someone that is not educated, from a Kurd person or

an Arab person, like it's not a must take therapies, the way people take and receive therapies or get into therapies and consultations differs some people can't take their peas some people can take them.

The other social worker whose name was Bazhdar interfered and said that

“therapist and consultations with patients have always been useful and beneficial, for example a patient that has some memory loss or that has amnesia and can't remember things, he regularly can take information from us, can learn things from u, for example he knows that if he has a good and healthy sleeping routine he'll get better, his hormones will get better, his life will be more controllable and will get better, but he still doesn't know how to do it, so if consultant or us as therapists tell him or her that they must or they should make their sleeping routine healthier, they will absolutely do it probably most of the times, maybe for the rest of their lives they get inspired and motivated while taking therapies and consultation but still there are some patients that refuse to take any consultation or any therapies and those types can never get benefit from consultation, like some of them are not here in the hospital by their own willingness so if they even get forced or their parents say that they must get therapies they can never get used to it” He said.

My last interview was online with doctor Mohammed Irfan, a psychiatrist.

I started the interview with the question **what is trauma, or what is childhood trauma to you as a doctor how can you describe and define childhood trauma?**

He answered, “trauma contains all the acts or all the treatment that left a negative emotion or some negative emotions that are or were un-expressible, you can never pass The negative emotions that were caused by childhood traumas you have experienced in your childhood until you treat it and resolve it the best way you can, the best way possible.”

As I understood doctor Mohammed he defined childhood trauma perfectly, it's all about our emotions and the way we express them, not every traumatic event is traumatic or causes trauma to a child.

Okay, that's for sure but for the ones that get traumatized they'll get feelings and emotions, and the ones that can't express the emotions or the way they feel, when they were a child and they kept it inside, for them it lingers and lingers until they grow up and the aftermaths of the childhood trauma would be bigger for these types of people those types of children...

“There are stages of trauma or I can say the severity of childhood trauma, from smallest to biggest effect, for example, ignorance has a smaller effect on a person Compared to abuse or violence, but it's still a reason for children to be traumatized or to experience childhood trauma but, physical abuse is the big trauma has a bigger effect on children or anyone, so the trauma caused by physical abuse is bigger and worse than the trauma caused by ignorance.” Leveled the stages of childhood trauma.

I would say violence in all types of (physical, emotional, psychological violence) might be the most traumatic situations or reasons for children to be traumatized, children always seek validity, seek security, seek love from their parents and their surroundings, ignorance also is a part of psychological violence, it violates the psychological state of a child ignorance has been a big concern in research studies, because if you ask the parents if they have hit the children they would say no never, if you ask the parents if they have ever said hurtful words to the children they would say no we have never done, that but there is still a gap, there is still ignorance.

### **How can you link PTSD and childhood trauma?**

“every un-treated (un resolved) childhood trauma leads to PTSD, but not all of the PTSD cases are the result of childhood trauma”

PTSD contains traumas even in adulthood not only for childhood trauma.

After growing up the child might cope with the situations with his or her resiliency, but it still lingers and stays in their heart and their mind, they become grownups but yet still they haven't got any treatments for the childhood trauma they Have

experienced, so they might become an aggressive person, or since they have been ignored when they were a child, they might be over pleasing with the people around them, always seeking attention from the people around them, such aftermath can

mislead them to know their self, to know their worth, their personality, Traumas can get to be left untreated.

### **If u could count some types of childhood trauma what would they be?**

“in Kurdish society beating children happens a lot it has already become a culture to beat your child parents beat their children or the teachers beat the children, so as I mentioned physical abuse is one type, and ignorance Is the next type, the reason why ignorance is a lot in Kurdish society is that we don’t have a specific education system to stick to for educating our children and taking care of them, as in the other countries or the developed countries.”

“so as I mentioned physical abuse is one type, and ignorance Is the next type, the reason why ignorance is a lot in Kurdish society is that, we don’t have a specific education system to stick to for educating our children and taking care of them, as in the other countries or the developed countries.”

as the doctor mentioned, until this year 2022, we still have no education system for the children, we still have no security guaranteed for children, we still have infants dying outside of the hospitals because their parents didn’t want to have one, we still have children dying from physical abuse.

But for the ones that are right now in this moment experiencing a traumatic event, getting beaten by their parents every day, they might experience sexual abuse and say no words to anyone, or the ones that are now or today dying because of the amount of physical abuse they got for these cases childhood trauma is Simple, children daily die from physical abuse from just making a mistake, as a child and the parent or the person living with them doesn’t accept it and kills them.

for these cases, they are among more dangerous than childhood trauma. because even if a child experiences childhood trauma or traumatic events, He or she is still alive and there’s still hope that they get treated.

**To what extent do people seek help and treatment from a mental health center or a psychiatrist, how often do people come by their willingness to get treated and get rid of the negative emotions they have?**

“Most of the traumatized people or any people with mental illness/issues, don’t come to clinics or mental health centers by themselves until the trauma triggers them and makes their lives hard to live, or any mental issues that they cannot handle anymore, Then they will come and seek help and treatment, they might have anger issues, they might have emotional issues, That they might not be able to talk about their emotions.”

Doctor Mohammed gave an example: a wife comes and tells the psychiatrist: “my husband doesn’t talk to me, he never tells me what he thinks, and how he feels, this has made me feel bad and I’m stressed and I have anxiety.” and when the doctor talks to the husband, they might find out that The husband has been ignored in his childhood and that’s why he never values his words and his ideas himself, he doesn’t express his emotions and his Ideas to even his wife. And after this, the person gets treated if they like.

they might never go to a Psychiatrist or seek treatment until it becomes so severe that they cannot handle it anymore and it might be too late for that.

people need to go see a psychiatrist or come under some psychological tests, to see if they have any mental issues or any childhood trauma experience before it’s too late before it’s too severe and too hard to be treated.

**What would you suggest as the best treatment for childhood trauma?**

“There are lots of therapies, the first one is the traditional therapy which is more solution-based which means, the therapist sits with the patient and sees the effects on the child and tries to fix the issues, if the patient can’t sleep, the therapist helps him/her to sleep well or if the person is suffering from depression or any other kinds of issues, the focus is on symptoms that can be seen in the mean time.”

“On the other hand, some other therapists seek to find out the root of the problem and the main reason for the problem, Freud made up the ‘speech therapy’ which is giving treatments only with the help of talking”.

Other newest techniques and therapies are:

CBT (cognitive behavior therapy)

Internal family system: which has been made especially for treating traumas.

And Trauma-informed therapy.

Some recent studies say that (yoga helps heal from trauma, or theaters helps as well)

And one last thing to mention is that being a therapist or graduating from the psychology department, becoming a therapist for treating trauma needs a specialized degree to become a trauma healing therapist.

### 3.5.2 Questionnaire data analysis:

The first section was about biography and basic personal information:

*Table 1 gender*

Gender	Number	percentage
Female	34	% 61.8
Male	22	% 31.2
Total	56	% 100

The reason for the difference between the amount of both genders participating, is mostly because the forms link was sent randomly so (%61.8) were female participants which covers most of the samples and responses.

*Table 2 age*

Age	Number	Percentage
15 – 19	5	% 9.1
20 – 25	38	% 69.1
26 – 30	7	% 12.7
31 – 35	2	% 3.6
36 – 40	2	% 3.6
41 – more	2	% 1.8
Total	56	% 100

The research’s focus is also more on the youth people nowadays who are going to be or are a parent.

*Table 3 Marital status:*

Marital status	Number	Percentage
Single	43	% 78.2
Married	10	% 18.2
Divorced	3	% 3.6
Total	56	% 100

*Table 4 Educational level:*

Educational level	Number	Percentage
Basic school degree	1	% 1.8
High school degree	5	% 9.1
Bachelor degree	45	% 77.2
Higher education - masters - PhD	5	% 9.1
Total	56	% 100

As for the responses (%77.2) of the participants have graduated and have bachelor’s degree, but (% 9.1) of them have only finished and graduated from high school, (%9.1) of them have (higher education – masters – Ph.D.) degree.

**The second section of the questionnaire is about the way of feeling and the current psychological state of the mind:**

*Table 5*

I feel anxious from time to time for no reason.

Answer	Number	Percentage
Yes	5	9%
Sometimes	8	14%
No	43	77%
Total	56	%100

Feeling anxious is the first question since most the people struggle with it (%77) of the respondents said (No) and (%14) responded with (sometimes) and (%9) have answered with (%9)

Table 6 I am afraid that a problem might arise in my surrounding

<b>Answer</b>	<b>Number</b>	<b>Percentage</b>
Yes	16	29%
Sometimes	27	48%
No	13	23%
Total	56	%100

People nowadays often get worried with no reason, and feel afraid that something might happen to them (%48) of the participants were sometimes afraid, but (%29) were actually afraid that something might happen.

Table 7 I feel worried/anxious about doing my work.

<b>Answer</b>	<b>Number</b>	<b>Percentage</b>
Yes	10	18%
Sometimes	3	5%
No	43	77%
Total	56	%100

(%77) of the participants, don't feel worried about doing their works, but (%18) were actually afraid.

Table 8 When things don't go the way I want I get nervous

<b>Answer</b>	<b>Number</b>	<b>Percentage</b>
Yes	43	77%
Sometimes	12	21%
No	1	2%
Total	56	%100

Sometimes the rate of patience a person has, becomes clear when things don't go their way (%77) of the participants get nervous when things don't go the way they want, maybe that's because they never tend to do their

Table 9 I feel lonely when I'm among people.

<b>Answer</b>	<b>Number</b>	<b>Percentage</b>
Yes	14	25%
Sometimes	19	34%
No	23	41%
Total	56	%100

As we can see in the results of this table people being around people or being in a crowded place doesn't mean that they can't feel lonely most of the respondents answered with no but still (%25) Have said yes we feel lonely

among people and that's one of the aftermaths off being traumatized in their childhood.

Table 10 I feel sad, daily.

<b>Answer</b>	<b>Number</b>	<b>Percentage</b>
Yes	20	36%
Sometimes	13	23%
No	23	41%
Total	56	% 100

Feeling sad daily it's not a normal thing people get sad when something happens but if you feel sad daily that means you have an emotional issue and for the answer of these questions 36% of the respondents sad yes, we actually feel sad Daily.

Table 11 I blame myself from time to time

<b>Answer</b>	<b>Number</b>	<b>Percentage</b>
Yes	17	30%
Sometimes	16	29%
No	23	41%
Total	56	% 100

Self-blame is another aftermath caused by some tragic or some traumatic events that have happened in the past and left this type of feeling this type of emotion inside the individual may be because when they were a child uh the parents scolded them and blamed them for the mistakes they have made.

Table 12 I feel that I'm not confident.

<b>Answer</b>	<b>Number</b>	<b>Percentage</b>
Yes	17	30%
Sometimes	16	29%
No	23	41%
Total	56	% 100

Not being confident enough and affecting the daily life routine really affect the way people think about themselves and value themselves, 30% of the respondents answered with yes which claims that the ones who are not confident are also aware of that, 41% of the respondents answered with no which is a good thing but not every unconfident people admit they are not confident.

Table 13 I feel tired and exhausted for no reason.

<b>Answer</b>	<b>Number</b>	<b>Percentage</b>
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Yes	14	25%
Sometimes	19	34%
No	23	41%
Total	56	% 100

Feeling tired and exhausted for no reason makes a person full and more of stress and this might be the reason for always making excuses about doing the duties they have to do, 41% did not agree with this but 25% agreed and admitted that they actually feel tired and exhausted for no reason.

The third section of the questionnaire is about Childhood experiences or daily routine:

Table 15 I didn't have enough to eat.

Answer	Number	Percentage
Yes	3	5%
Sometimes	10	18%
No	43	77%
Total	56	% 100

Having enough food to eat is the opposite of being neglected, when children receive a basic need as enough food, that might be a sign of being cared for.

Table 17 People in my family called me things like "stupid", "lazy", or "ugly".

Answer	Number	Percentage
Yes	12	21%
Sometimes	8	14%
No	36	64%
Total	56	% 100

This is a type of getting verbally and psychologically abused, and might result in feeling worthless and actually thinking the words they used to call them is actually right, especially in Kurdish families this happens a lot.

Table 18 My parents were too busy with their work to take care of the family.

Answer	Number	Percentage
Yes	11	19%
Sometimes	14	25%
No	32	56%

Total	57	% 100
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This is another sign of being neglected, not being taken care of, not having quality time with parents.

Table 19 There was someone in my family who helped me feel important or special

Answer	Number	Percentage
Yes	32	57%
Sometimes	14	25%
No	10	18%
Total	56	% 100

Feeling important makes children's minds work better, be smarter, ask more questions and explore more.

Table 20 I had to wear dirty clothes

Answer	Number	Percentage
Yes	3	5%
Sometimes	2	4%
No	51	91%
Total	56	% 100

This statement also resonates Ignorance in childhood, some families might have been poor and couldn't have provided new clothes, but clean clothes only needs some time and some tiny products, if parents still didn't provide clean clothes, that means the child is not being taken care of.

Table 21 I felt loved

Answer	Number	Percentage
Yes	36	64%
Sometimes	12	21%
No	8	14%
Total	56	% 100

The need to feel loved is one the main feelings any children needs.

Table 22 I got hit so hard by someone in my family that I had to see a doctor or go to the hospital.

Answer	Number	Percentage
Yes	1	2%
Sometimes	6	11%
No	49	88%
Total	56	% 100

Even nowadays children come to hospitals having big scars, from getting beaten by parents or teachers, sometimes the parents don't even take the child to a doctor or hospital just to avoid getting questioned.

Table 23 There was nothing I wanted to change about my family.

<b>Answer</b>	<b>Number</b>	<b>Percentage</b>
Yes	19	34%
Sometimes	19	34%
No	18	32%
Total	56	% 100

Table 24 People in my family hit me so hard that it left me with bruises or marks.

<b>Answer</b>	<b>Number</b>	<b>Percentage</b>
Yes	4	7%
Sometimes	3	5%
No	49	88%
Total	56	% 100

Having a scar/scars left, is just like a tattoo that reminds the person of the exact feeling and experience they had when they were a child, and most of the times they get ashamed by it.

Table 25 I was punished with a belt, a board, a cord (or some other hard object).

<b>Answer</b>	<b>Number</b>	<b>Percentage</b>
Yes	8	14%
Sometimes	7	13%
No	41	73%
Total	56	% 100

Using a (belt, thick wooden stick, harsh things) as a tool to physically abuse innocent children, had been almost like a norm in Kurdish families.

Table 26 People in my family said hurtful or insulting things to me.

<b>Answer</b>	<b>Number</b>	<b>Percentage</b>
Yes	12	21%
Sometimes	8	14%
No	36	64%
Total	56	% 100

Similar to table 17 above.

Table 27 I had the perfect childhood.

<b>Answer</b>	<b>Number</b>	<b>Percentage</b>
Yes	14	25%
Sometimes	26	46%
No	16	29%
Total	56	% 100

Table 28 I got hit or beaten so badly that it was noticed by someone like a teacher, neighbor, or doctor.

<b>Answer</b>	<b>Number</b>	<b>Percentage</b>
Yes	1	2%
Sometimes	3	5%
No	52	93%
Total	56	% 100

Getting hit or beaten is a disaster, but other strangers noticing or witnessing or being there is another disaster for children, because they get so embarrassed of it.

Table 29 Someone in my family hated me.

<b>Answer</b>	<b>Number</b>	<b>Percentage</b>
Yes	9	16%
Sometimes	10	18%
No	37	66%
Total	56	% 100

Feeling 'hated' makes any child more vulnerable.

Table 30 Someone tried to touch me sexually or tried to make me touch them.

<b>Answer</b>	<b>Number</b>	<b>Percentage</b>
Yes	8	14%
Sometimes	6	11%
No	42	75%
Total	56	% 100

This question is about being "sexually abused" or used in childhood, children who can't give details and inform parents of things they don't understand are more likely to face sexual abuse.

Table 31 Someone threatened to hurt me or tell lies about me unless I did something sexual with them.

<b>Answer</b>	<b>Number</b>	<b>Percentage</b>
Yes	2	4%
Sometimes	4	7%
No	50	89%
Total	56	% 100

Similar to table 30.

Table 32 I had the best family in the world.

<b>Answer</b>	<b>Number</b>	<b>Percentage</b>
Yes	32	57%
Sometimes	19	34%
No	5	9%
Total	56	% 100

Table 33 There was someone to take me to the doctor if I needed it.

<b>Answer</b>	<b>Number</b>	<b>Percentage</b>
Yes	42	75%
Sometimes	10	18%
No	4	7%
Total	56	% 100

Table 34 My family was a source of strength and support.

<b>Answer</b>	<b>Number</b>	<b>Percentage</b>
Yes	35	63%
Sometimes	13	23%
No	8	14%
Total	56	% 100

Table 35 My parents used to make me feel protected and secured sometimes.

<b>Answer</b>	<b>Number</b>	<b>Percentage</b>
Yes	36	64%
Sometimes	15	27%
No	5	9%
Total	56	% 100

As mentioned in the chapter 2 of this research, children always seek protection and security, if they receive them from their parents, there could be less chance to be traumatized even if something traumatic happens.

Table 36 Someone in my family was so aggressive.

<b>Answer</b>	<b>Number</b>	<b>Percentage</b>
Yes	18	32%
Sometimes	7	13%
No	31	55%
Total	56	% 100

Living with aggressive parents or siblings, makes children always be in alert mode, always wait and expect the worst case scenarios.

Table 37 I felt like my life is not as normal as the other kids the same age as me.

<b>Answer</b>	<b>Number</b>	<b>Percentage</b>
Yes	15	27%
Sometimes	9	16%
No	32	57%
Total	56	% 100

Feeling abnormal, and feeling that the other classmates or other same age children are somehow better, results in isolations in adulthood.

Table 38 There was a lot of discrimination in my family that made me feel less about myself.

<b>Answer</b>	<b>Number</b>	<b>Percentage</b>
Yes	11	20%
Sometimes	9	16%
No	36	64%
Total	56	% 100

Discrimination between the siblings, make the children feel they are less than the one sibling that has most of the parent's attention, love, care. This might affect the discriminated children jealous even when they grow up and become adults.

Table 39 I used to have enough money and I used to be stable economically.

<b>Answer</b>	<b>Number</b>	<b>Percentage</b>
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Yes	25	45%
Sometimes	25	45%
No	6	11%
Total	56	% 100

Having enough money for the little children's needs, is one of the basic needs for children, but most of the families might have been even rich but still don't provide the children enough money.

Table 40 In your childhood, did you lose someone from your (family, or friends)?

<b>Answer</b>	<b>Number</b>	<b>Percentage</b>
Yes	20	36%
No	36	64%
Total	56	% 100

Table 41 In your childhood, did your parents face any kind of (separation, divorce)?

<b>Answer</b>	<b>Number</b>	<b>Percentage</b>
Yes	27	48%
No	29	52%
Total	56	% 100

## Chapter Four: Findings and Discussion

Before conducting the research, the researcher assumed that many and most of the citizens in Kurdistan are not aware of trauma and childhood trauma and its aftermaths, with the interview results, it has become known that the social workers working in the psychiatric hospital in Hawler, are giving consultations but therapy techniques are less used, which had to be more used and more types should have been given in this big hospital.

and for the results of the survey, according to the answers that were given, most of the participants have had one or more mental or psychological issues.

the main idea of conducting this research is making “Trauma / Childhood trauma” an area to study, a subject to be known, to be a concern for parents nowadays and the ones who are going to be a parent one day.

The way parents have treated their children in the past in Kurdish societies is well known that it was not healthy or educational enough, there are some big mistakes and small mistakes that parents have made and effected the children and the children’s way and perspective to see life and experience life.

this research finding tells us that in two areas there needs reform to be made, first in the psychiatric hospital giving therapy treatments or consultation in more details with patients especially for traumatized adults, is less than average and the fact that a psychiatrist believes more in giving medications and pills more than giving therapy treatments is a disaster.

if you look at the trending subject about human psychological state nowadays in the developed countries, you can see that therapy is one of the biggest and most effective ways to overcome trauma or any other mental issues.

If there’s an original source or academically source to teach the Kurdish society overall about how you can leave a healthy life with a healthy way of thinking, a healthy way to treat others, a healthy way to treat yourself.

Plus, the stigma around the people who seek psychological help or seek clinical psychology needs to be removed and getting help, asking for help needs to be normalized in Kurdish society.

People get scared and worried of being judged, called “psycho” “crazy” “dumb” “stupid” because the mental awareness level in Kurdish society hasn’t been promoted, and has been like this since a long time ago.

if you imagine, Kurdish parents in the past, knew about how their way of treating their children could negatively affect their children, knew about some other healthy techniques to educate their children, how would the Kurdish society nowadays be?

So if we as social workers try to and take part to change and promote the lives of Kurdish people we have so many ways we can spread awareness we can show the people the easy way to live, and make healthy and happy families.

## **Chapter Five: Conclusion, Recommendation**

### **5.1 Conclusion**

After conducting this research, as expected the Kurdish families have actually traumatized children in the past who are now adults, and there are adults who suffer from feelings such as (guilt, shame, anxiety depression, ...) that might be caused by one of the traumatic events they might have faced or experienced, social workers haven’t studied enough about trauma and childhood trauma.

### **5.3 Recommendation**

My recommendation, first of all, goes to the Ministry of Health, to inform about employing more skillful and qualified therapists in the Psychiatric Hospital in Hawler, and for the researchers to conduct further research about Trauma/Childhood trauma please spend more time and make more time for conducting it, and for the mass media to use and to recall words such as ‘trauma’ more to spread more awareness in public.

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