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*Guest Editors*

**Dr. Madhav Hande**  
**Dr. Grishma Khobragade**



*Signature*

**PRINCIPAL**  
Govt. College of Arts & Science  
Aurangabad



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## Impact of riots and community violence on children

**Dr. Ramprasad S. Kale**

Assistant Professor

Govt. College of Arts and Science, Aurangabad,

former Asst. Audit Officer, Defence Services (under C&AG of India)

A social psychiatrist, Harish Shetty (2002) wrote after visiting the victims of Gujarat carnage, "In Gujarat, the mental health fraternity was silent fearing the disruption of 'therapeutic neutrality'. This is actually a denial of professional responsibility. Mental health professionals need not be sloganeers, but they must raise some voices during difficult times. A small minority has made active efforts and taken stands, but on the whole, silence has transformed the profession's empathy into apathy. This collective silence must be broken with concerted action toward healing and prevention"

India is a secular state, but large-scale violence has periodically occurred in India since independence. In India, anarchy situation occurred during Gurjar protest in Rajasthan, Jat protest in Haryana, Patidar community riots in Gujrat for reservation quota and other demands, violence erupted after Gurmeet Ram Rahim Singh conviction of rape, violence erupted in some places in Maharashtra after the violent incidence in Bhima-Koregaon, and recent riots of 'Karani sena' against film 'Padmavat'. All these civil strife incidences show that communal tensions and religion based politics have become more prominent in India. The violence during riots underpinning the current period of social and political transition in India, coupled with economic uncertainty, has exacerbated personal, cultural and economic insecurity in communities unprepared and under-resourced for change. During this period, constructions and perceptions of personal, cultural and political identity have had a profound impact on young people's experiences and opportunities.

Who are the worst sufferers in all these social anarchy situations? The answer is 'children' because the effect is always tragically as they look the most helpless and unprotected part of the society during the communal riots. Children whose parents are rioters suffer no less consequence than those whose parents are the victims of such riots. Children are most vulnerable during the communal riots. In the earliest phases of infant and toddler development, existing research indicates there are clear associations between exposure to violence, and emotional and behavioral problems. Infants and toddlers who witness violence either in their homes or in their community show excessive irritability, immature behavior, sleep disturbances, emotional distress, fears of being alone, and regression in toileting and language.

Several studies support a link between exposure to community violence and symptoms of anxiety, depression, and aggressive behaviors in school-age children living in violent urban neighborhoods. As with

preschoolers, school-age children exposed to violence are more likely to show increases in sleep disturbances, and less likely to explore and play freely and to show motivation to master their environment. They often have difficulty paying attention and concentrating because they are distracted by intrusive thoughts. In addition, school-age children are likely to understand more about the intentionality of the violence and worry about what they could have done to prevent or stop it. There is now convincing documentation that war and political violence have many negative effects on the children, including heightened aggression and violence, revenge-seeking, insecure attachment, anxiety, depression, withdrawal, post-traumatic stress and somatic complaints, sleep disorders, fear and panic, poor school performance, and engagement in political violence (e.g., Sagi-Swartz, Seginer, & Addeen, 2008; Quota, Punamaki, & Sarraj, 2008).

Kumar Ravi Priya, (2002) found that more than four thousand families of Muslim community in Gujarat state of India, have been facing internal displacement besides many of them facing bereavement and trauma due to loss of family members and sexual assault after a riot that broke out in 2002. In this historical context, his study explored, with the help of innovative qualitative methods, the experiences of trauma reactions, social suffering and healing among the children of these families in Panchmahal district of Gujarat. Findings showed the presence of experiences of trauma reactions (trauma specific fear and the posttraumatic stress symptoms such as avoidance and sleep disturbance) and social suffering (loneliness, separation from loved ones and deprivation) among in these children.

Drell et al (1993) and Osofsky (1995) found that due to their inadequate ability to effectively verbalize their thoughts and emotions to others, children have often been described as the 'silent or invisible' victims of disasters or traumatic events. Despite being "normalized," the impacts of potential or actual violence were obvious. Children spoke of being "scared at night," feeling unsafe at particular times or in particular parts of their community.

Scheeringa et al (1995; 2004) have pointed out that young children (of about 8 years of age and below) have limited cognitive and expressive language skills to verbally describe all the DSM-IV PTSD symptoms occurs after exposure of violence. Due to this, these authors have proposed a modification in the symptoms of PTSD especially for young children. These symptoms are generalized anxiety symptoms (separation fear, stranger anxiety and fear of monsters and animals), avoidance of situations that may or may not have an obvious link to the original trauma, sleep

disturbances, and preoccupation with certain words or symbols, that may or may not have an apparent connection with the traumatic event. Presence of trauma-specific fear as another trauma reaction has also been noted among children. Osofsky (1995) and Terr (1990) have also indicated the possibility of obstructive impact on the psychological development of children exposed to disasters.

Pynoos et al (2007) found that culturally and socio-politically induced violence during riots results in to disturbances in peer and social relationship, moral development and conscience functioning as adverse psychological outcomes of disasters for children.

What can we do?

Children should be helped. If a child is touched by violence, adult should care and spend time with the child. Child should be sure about that his parents are with him for support and listen to him. Help the child talk about the trauma, and answer his questions honestly using words that your child understands. Try to understand that children may have new problem behaviors as a result of the trauma. These behaviors need your patience and understanding. Ask for help from friends, family, and medical and mental health experts for you and your child. Prevention programs are also important to keep community violence from happening.

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*[Signature]*  
 .. PRINCIPAL  
 Govt. College of Arts & Science  
 Aurangabad