

**Impact of intergenerational trauma transmission
on the first post-Soviet generation**

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Certificate of Original Authorship

I, ANNA DENEJKINA, declare that this thesis is submitted in fulfilment of the requirements for the award of Doctor of Philosophy (PhD) in the Faculty of Arts and Social Sciences at the University of Technology Sydney.

This thesis is wholly my own work unless otherwise referenced or acknowledged. In addition, I certify that all information sources and literature used are indicated in the thesis.

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Abstract

Artyom Borovik wrote that ‘Afghanistan became part of each person who fought there. And each of the half million soldiers who went through this war became part of Afghanistan.’¹ This mixed-methods study focuses on familial relationships pertaining to returned Soviet veterans of the Soviet–Afghan War, 1979 to 1989, examining the impact of the conflict on the first post-Soviet generation through the intergenerational transmission of war-related trauma from parents to children.

Research was conducted from 2015 to 2018, with fieldwork conducted in Russia in 2017, and survey data collected between 2016 and 2017. The qualitative analysis was based on interviews with veterans, now-adult children of veterans, and veterans’ other family members. The quantitative analysis was based on questionnaire responses from now-adult children of veterans.

The study was conducted using an exo-autoethnographic framework, a methodology developed during this PhD. Exo-autoethnography is the autoethnographic exploration of a history whose events the researcher did not experience directly, but a history that impacts the researcher by proxy through the familial environment. In this first conception, the methodology is a merger of the fields of psychotraumatology and autoethnography, connecting the present with a history of the other through trauma transmission and experiences of an upbringing influenced by parental trauma.

Research results show an ongoing impact of the Soviet–Afghan war on the first post-Soviet generation. This study provides four key findings: intergenerational trauma transmission, domestic violence, collective trauma and mental health in the former Soviet Union, and makeshift group therapy and substance abuse.

The outcome of this research demonstrates a strong likelihood that the correlation of mental health issues between children and their veteran parents is a result of intergenerational effects of military service in the Soviet–Afghan war. The implications of these findings show the grave situation of mental health and trauma in the former

¹ Borovik, A. 1990, *The hidden war: A Russian journalist's account of the Soviet War in Afghanistan*, p. 1.

Soviet Union, which continues to function as it did prior to its disbandment: individual mental illness and trauma continue to be 'disappeared'. This issue highlights the radical need for improvement in mental-health education and support within the former Soviet Union generally, and within the military services specifically.

This thesis includes an exo-autoethnographic component: a creative work reflecting the fieldwork and research in book form, including the personal experiences of the PhD candidate relating to her upbringing as a child of a Soviet–Afghan war veteran.

CHAPTER 1: INTRODUCTION

1.1 Background and approach

This thesis centres on the impact of the intergenerational transmission of trauma from parents to children. Focusing on the Soviet–Afghan war of 1979 to 1989, this research looks at the impact of the war on the first post-Soviet generation through the transmission of war trauma. The aim of this research is to move the field of intergenerational trauma transmission forward in our understanding of the impact of war-related trauma on the children of veterans. This is achieved with the use of a mixed-methods study on trauma impact, and by privileging the voices of participants and their stories.

On 5 December 1978, The Union of Soviet Socialist Republics (USSR) and the Democratic Republic of Afghanistan (DRE) signed a friendship treaty. The Afghanistan–Union of Soviet Socialist Republics: Treaty of Friendship, Goodneighborliness and Cooperation was signed in Moscow; its purpose was to reaffirm the commitment of the USSR and the DRE:

to the aims and principles of the Soviet–Afghan Treaties of 1921 and 1931, which laid the basis for friendly and good-neighbor relations between the Soviet and Afghan peoples and which meet their basic national interests ('Afghanistan–Union of Soviet Socialist Republics: Treaty of Friendship, Goodneighborliness and Cooperation' 1980).

On 6 December 1979, *The Kabul Times* ran an editorial on the DRA–USSR friendship treaty:

One can rarely see neighborliness without some clashes, tensions, and misunderstanding. However, in connection with the DRA and USSR such things have never happened and we are sure that they will never happen in the future ... Of course the main and important reason behind this friendship and mutual understanding lies in the fact that the two nations have the greatest respect to vital principles of good relation between

nations which are respect to independence, sovereignty, territorial integrity and mutual cooperation without any conditions and strings (Arnold 1987, p.85).

On 24 December 1979, 18 days after *The Kabul Times* editorial, the Soviet Union invaded Afghanistan (Gibbs 2000, p.241), using the Soviet–Afghan Treaty of 1978 as its justification (Barfield 2010, p.234). The invasion and occupation of Afghanistan lasted until 1989. In 1990, Russian journalist Artyom Borovik wrote: ‘Afghanistan became part of each person who fought there. And each of the half million soldiers who went through this war became part of Afghanistan’ (Borovik 1990, p.1). Almost a decade of war impacted millions. It is estimated that 1.8 million Afghans were killed and 1.5 million were left disabled, including an estimated 300,000 children (Khalidi 1991; Noorzoy 2005; Sliwinski 1988). The war resulted in 7 million refugees, including those internally displaced (Hilali 2017). More than half a million Soviet soldiers passed through Afghanistan; of the 500,000, at least 15,000 lost their lives (Bearden 2001); 417 were either taken prisoner or went missing in action; and since 2000, 287 soldiers still remain unaccounted for (Alexievich 2017).

As the Soviet Union was living through the collective trauma of a dictatorship and historical conflict (Merridale 2000), the Union pushed its 15 republics into a secret war – the conflict was initially presented and marketed as a peaceful, ‘brotherly’ mission to help the people of Afghanistan and their country (Borovik 1990).

But the hidden war did not end in 1989. This thesis demonstrates that its repercussions continue to live on through the first post-Soviet generation of children of the Soviet veterans of the Soviet–Afghan war.

Intergenerational trauma transmission is the transmission of the effects of trauma (personal or collective) across generations, affecting the offspring of the persons who experienced the primary trauma (Bombay, Matheson & Anisman 2009, p.6). In other words, individuals absorb the trauma of their parents. Though first observed in 1966 (Danieli 1998, p.3), intergenerational trauma is endemic, and has been an ‘integral part of human history’ (Danieli 1998, p.2). Despite the decades of research already completed in the field of intergenerational trauma, the former Soviet Union has not been a focus of the literature; specifically, the Soviet–Afghan war and children of its veterans.

Approaches to understanding intergenerational transmission of trauma include four models: Sociocultural and socialisation model (Danieli 1998); Psychodynamic relational model (Dekel & Goldblatt 2008); Family systems and familial communication (Kellermann 2009); and the Biological or genetic model (Kellermann 2001, p.263). This research uses these four theoretical approaches to understand the level of impact the Soviet–Afghan war had, and continues to have, on the first post-Soviet generation.

Structured within an exo-autoethnographic framework, this mixed-methods research (qualitative and quantitative) uses a thematic analysis of interviews with veterans, now-adult children of veterans, and veterans' other family members (n=12); and a quantitative, descriptive analysis of questionnaire responses from now-adult children of veterans (n=15). The mixed-methods approach to this study allows for a comparison between the results of the qualitative and quantitative data analyses, providing insight into the attitudes and themes presented in the interviews and explaining the questionnaire results.

Developed as part of this research project, exo-autoethnography is the autoethnographic exploration of a history whose events the researcher did not experience directly, but a history that impacts the researcher through familial, or other personal connections, by proxy. The method of exo-autoethnographic research and writing is developed for qualitative and mixed-methods research, moving beyond the personal experience of the researcher. In this first conception, the method is a merger of the fields of psychotraumatology (specifically, intergenerational trauma transmission research) and autoethnography. It aims to connect the present with a history of the other through trauma transmission and the experiences of an upbringing influenced by parental trauma.

In its initial development, exo-autoethnography aims to add knowledge and evidence to the study of intergenerational transmission of trauma through analytic research and narrative writing. Its purpose is to understand and expose the personal and cultural experiences of children of a parent(s) with trauma. Specifically, exo-autoethnographic research and writing aims to narrate and analyse the impact of trauma on children of a traumatised parent(s) through family functioning – by exploring the historical events of

the trauma and the personal experience of having a traumatised parent(s) – and the intergenerational transmission of trauma.

The significance of this research is, therefore, twofold. First, this thesis adds new knowledge to the field of psychotraumatology through its new findings on intergenerational trauma transmission, related to the impact of the Soviet–Afghan war on the first post-Soviet generation. Second, this thesis adds to the field of autoethnography, specifically in relation to methodology in social research, by introducing a new method of research and writing on intergenerational trauma transmission studies.

Although this thesis is organised traditionally, it is a non-traditional PhD that includes an exo-autoethnographic component (creative component), and a literature review that is not confined to one chapter but is instead present throughout the dissertation, with an overview of the literature provided for each topic of consideration included in this research.

1.2 Chapter overview

Chapter 2 provides context for the research and thesis. It focuses on the field of psychotraumatology, providing a review of literature in the field of intergenerational trauma transmission and its most recent and ground-breaking studies. It also includes a detailed account of the four models used to analyse the process of trauma transmission: Sociocultural and socialisation model; Psychodynamic relational model; Family systems and familial communication; and the Biological or genetic model, which are utilised in the discussion of the results in Chapter 6. Chapter 2 then moves into a discussion of collective trauma, providing an overview of the literature on collective trauma with a specific focus on collective trauma in the Soviet Union, its relationship to trauma and psychology, and how this history continues to impact post-Soviet society.

Chapter 3 presents the methodology used in this research. Beginning with a background on autoethnography – the parent methodology to exo-autoethnography – the chapter then moves into a detailed description and rationale for the development

and use of exo-autoethnography in social research. This chapter provides an outline of the exo-autoethnography process, including a specific focus on four distinct groups of participants in this study to address a social question(s) holistically, and not from an individual perspective of the autoethnographer.

Chapter 4 focuses on ethics and criticism in social research. Beginning with ethical considerations for and issues around autoethnography, including the criticism that this methodology faces in the academy. This chapter describes these issues, why they must be met, and how these issues are met using the framework of exo-autoethnography. Using literature and this PhD research as an illustration, Chapter 4 then moves into a discussion of de-identification in social research. Specifically, it considers the ethical issues of a blanket approach to de-identification across social research studies. This issue is explicitly addressed in relation to this PhD study, providing a discussion on how Western ethical standards undermine the agency of research participants of culturally diverse or marginalised backgrounds – a process that I argue is unethical, harmful, and which equates to the silencing and erasure of participant voices and stories. This chapter concludes with recommendations of how to approach identification and de-identification options with research participants in social research studies.

Chapter 5 provides the research design of this study. This chapter begins with a detailed account of the qualitative research design of this study, including an overview of issues in data collection. This section includes information on when, where, and how the data was collected, including the thematic analysis process, providing literature on the process. Chapter 5 then moves into a detailed account of the quantitative research design of this study, including an overview of issues in data collection; it provides details on the survey response rate, and outlines the descriptive statistical approach used in the analysis.

Chapters 6, 7, and 8 deliver the data analysis and results of this study. Beginning with the qualitative analysis, Chapter 6 provides a detailed thematic analysis of the interview transcripts. This is followed by a detailed quantitative analysis of the questionnaire results in Chapter 7. Chapter 8 then moves into a discussion of the data, providing the key findings from this study: Intergenerational Trauma Transmission; Domestic Violence; Collective Trauma and Mental Health in the Former Soviet Union; and

Makeshift Group Therapy and Substance Abuse. Here, I argue how these four findings interconnect and relate to the process of intergenerational trauma transmission, which impacts the first post-Soviet generation. This section provides the main discussion of this research, which interprets the qualitative and quantitative findings, and relates this information back to literature already cited in the thesis. This chapter answers the research question of this study: how has the Soviet–Afghan war impacted on the first post-Soviet generation? I argue that the research results show an ongoing impact of the Soviet–Afghan war on the first post-Soviet generation, showing a strong likelihood that the correlation of mental-health issues between children and their veteran parents shown in the data are a result of the intergenerational effects of military service in the Soviet–Afghan war. Chapter 8 concludes with a discussion of the implications of this research and its results, and recommendations pertaining to these results.

Chapter 9 is the exo-autoethnographic, creative component of this thesis: *Чёрный Тюльпан (Black Tulip)*. Written with a backdrop of the fieldwork conducted for this study in Russia in 2017, this written creative work is a consolidation of the literature on intergenerational trauma transmission, personal autoethnographic reflections on trauma and an upbringing influenced by parental trauma, and first-person accounts of the interview participants in this study. These accounts are written in first person from the participant interview transcripts, without interference of my voice. This is done to privilege the participant voices and individual stories. This creative work is an example of the culmination of exo-autoethnographic research on intergenerational transmission of trauma.

Chapter 10, the final chapter of this thesis, provides a conclusion to this study, including the qualitative and quantitative results; the effect of a creative, exo-autoethnographic account in relationship to the qualitative and quantitative results; and concluding statements on the impact of this research and its contribution to knowledge. The chapter concludes with a list of limitations and recommendations for further research, stemming from the results in this study.

CHAPTER 2: PSYCHOTRAUMATOLOGY

2.1 Intergenerational trauma transmission – what we know today

Intergenerational transmission of trauma is been an 'integral part of human history' (Danieli 1998, p.2), conveyed in writing, oral histories, body language, and in silence. In one word, it is endemic. Epigenetic, or acquired, transmission of trauma suggests that individuals absorb the trauma of their parents. In his research pertaining to the transmission of Holocaust trauma on the children of survivors, Kellermann suggests that children of parents with posttraumatic stress disorder (PTSD) may be vulnerable. This includes the offspring of war veterans, survivors of war-related trauma, survivors of sexual abuse during childhood, refugees, victims of torture, and others (2013, p.33).

PTSD is a trauma or stressor-related disorder, in which the 'exposure to a traumatic or stressful event is listed explicitly as a diagnostic criterion' (American Psychiatric Association 2013, p.265). It is important to note that rates of PTSD are higher among those whose vocation increases the risk of exposure to traumatic events, including veterans. The highest rates of PTSD 'are found among survivors of rape, military combat and captivity, and ethnically or political motivated internment and genocide' (American Psychiatric Association 2013, p.276), ranging from one-third to more than half of the people exposed to the trauma. According to the Diagnostic and Statistical Manual of Mental Disorders, 5th Edition (DSM-5), after the first year of life, PTSD occurs at any age, with symptoms beginning 'within the first 3 months after the trauma, although there may be a delay or months, or even years, before criteria for the diagnosis are met' (p.276).

First observed in 1966 (Rakoff, 1966; also see Danieli 1998; Yehuda & Lehrner 2018), multigenerational transmission of trauma has since been academically researched and described for more than half a century (Kellermann 2009). Kellermann notes that this process is connected with heredity: 'the transmission of characteristics from parents to their offspring' (2013, p.33). In 1980, PTSD was officially recognised by the American

Psychiatric Association in the third edition of the *Diagnostic and Statistical Manual of Mental Disorders* (1980). However the 'recognition of possible *intergenerational* transmission of victimization-related pathology still awaits inclusion in future editions' (Danieli 1998, p.3).

In 2010, Franklin et al. published results of a study hypothesising that traumatic experience in early life persists through adulthood and can be transmitted across generations. The experiment exposed mice to chronic and unpredictable maternal separation, finding that this stressor experience (or trauma) 'induces depressive-like behaviors ... in the separated animals when adult' (2010, p.408) by altering the profile of DNA methylation (an epigenetic mechanism). Importantly, comparable changes in DNA methylation were *also* present in the offspring of the separated mice. Similar empirical evidence in humans is presently insufficient (for a summary of examples, see Kellerman 2013). Despite this, research does support the idea that intergenerational trauma is transmitted via the familial environment, suggesting that results of traumatic events affect others in the environment of the person(s) directly exposed to the traumatic event (Dekel & Goldblatt 2008, p. 281).

A recent study on intergenerational consequences of war focused on the Vietnam War: the study investigated the long-term, intergenerational impact of parental deployment on the mental health of adult children of Australian veterans. The study found that adult children of Australian veterans who served in the Vietnam War have worse mental health than children of comparable men, who served in the Australian army at the time of the war but who were not deployed. Results of the study show that adult children of veterans were more likely than the children of non-deployed veterans to be diagnosed with anxiety, to have had thoughts of suicide or self-harm, and to have made suicidal plans. The current mental health of these adult children is also reported to be poorer, showing that 'there are significant and enduring adverse effects of parental deployment on the mental health of children in military families' (Forrest, Edwards & Daraganova 2018, p.1). The authors of the study suggest that the 'most plausible explanation for the results ... is that the higher rates of mental health problems found among the sons and daughters of Vietnam veterans are among the intergenerational effects of military service in the Vietnam War' (Forrest, Edwards & Daraganova 2018, p.7).

Approaches to understanding intergenerational transmission of trauma consider heredity, and include the sociocultural and socialisation model; psychodynamic relational model; and family systems and familial communication. All show how trauma and its impact may be passed down 'even to children born *after* the trauma' (Danieli 1998, p.9):

1. *Sociocultural and socialisation model* (Danieli, 1998): beliefs, behaviours, opinions, traditions, customs, symbols, and routines of the parent(s) that they pass on to their children through childrearing;
2. *Psychodynamic relational model* (Dekel & Goldblatt 2008): the projection of severe emotions onto the children of parents with combat-related PTSD, leading to these children identifying with:

the projected parts of their fathers' emotions, and perceive[ing] his experiences and feelings as their own. These unconscious processes can make it difficult for the child to form a separate self, and may result in the development of symptoms that replicate the disturbances of the father such as social isolation, guilt and detachment (Dekel & Goldblatt 2008, p.284);

3. *Family systems and familial communication* (Kellermann, 2009): transmission of parental trauma taking place within a family environment as the children can live vicariously in the past events that led to the parent's trauma (p.81). In a paper focusing on Holocaust trauma and its permeation of the familial environment through intergenerational transmission, the authors note that the trauma, and discussion of trauma, can flood this space, 'especially when survivors overwhelm their loved ones with traumatic stories or, conversely, when the Holocaust was considered taboo' (Shmotkin et al. 2011, p.10). This model suggests that '*communication* is the mediating agent', and that the trauma can become dangerous and harmful to the child if it is talked about with the child either too much or too little (2011, p.78). As Kellermann writes:

Parents who care too much and who become overly involved and intrusive, tend to enmesh their offspring in the crossfire of their own

emotional problems and bind their children unto themselves in a manner that makes it difficult for the children to gain independence (Kellermann 2009, p.82).

It is important to note that, in 2013, Kellermann suggested that the aforementioned models are too general to sufficiently explain how trauma can cross generations, writing that hereditary variations should also be taken into account – that is how parental trauma ‘may be biologically passed on to the child before birth’ (Kellermann 2013, p.34). This forms the fourth model of transmission:

4. *Biological or genetic model* (Kellermann 2001, p.263): this model refers to the epigenetic transmission and inheritance (going beyond the inheritance of DNA sequences) of information, that our children and grandchildren might inherit – some studies on rats have continued on to a fifth-generation, finding that some effects of ancestral exposure to pollutants (such as the fungicide Vinclozolin and the insecticide DDT) have persisted (Skinner 2014, p.49). Chromosomes house our genes and epigenetic information (such as DNA) resides in these chromosomes. However, epigenetic information is different to DNA as it responds to the environment (for example: pollutants, as noted above, and stressors can induce epigenetic alterations without modifying the DNA sequence itself). Epigenetic modification ‘can take various forms, including small molecules that attach chemically to the DNA and to proteins in chromosomes’ (Skinner 2014).

In a literature review looking at human intergenerational responses to early life experience, the authors defined a true epigenetic intergenerational effect as having the following steps: 1. exposure to stressor, 2. epimutation, 3. transmission of this information between generations (epigenetic transmission), and 4. changes in the observable characteristics or traits in offspring not exposed to the original stressor (Pembrey, Saffery & Bygren 2014, p.567).

Changes in gene expression as a result of stressors (such as trauma) may be transferred from survivors to their children ‘even at the prenatal stage or in early stages of life during which maternal behaviour may influence hormonal and metabolic processes in the infant’ (Shmotkin et al. 2011, p.10; also see Yehuda & Bierer 2009). Other studies suggest that, additionally, epigenetic modifications can affect maternal

behaviour in ways that produce the same behaviours in their offspring (Nestler 2011), despite these changes not being passed down through the germline (a sequence of cells that develops into eggs and sperm). He writes:

pups raised by passive mothers show more DNA methylation than aggressively groomed pups in the regulatory sequences of a gene encoding the glucocorticoid receptor – a protein, present in most cells in the body, that mediates an animal's response to the stress hormone Cortisol (Nestler 2011, p.82).

This example suggests that, despite not being passing down through the germline, the epigenetic modifications produced in one generation can be passed on to the next, due to the mother's behaviour altering the epigenetic markings in her offspring (through her passive nurturing of the pup).

In both veteran and community samples, 'PTSD is associated with poor social and family relations, absenteeism from work, low incomes, and lower educational and occupational success' (American Psychiatric Association 2013, p.279). Harkness posits that the effects of PTSD may have a larger influence on the intergenerational transmission of trauma than the condition itself, suggesting that family violence resulting from a parent's combat-related PTSD (this violence arguably resulting in a primary trauma for the child) projects greater distress in children than did the PTSD in itself (1993, pp.635–643). Further, it has been found that combat-related PTSD hinders the veteran's ability to parent a child, and may directly 'interrupt the development of a positive parent–child relationship' (Galovski & Lyons 2004, pp.486–487). This is supported by Dekel and Goldblatt's (2008) review on the intergenerational transmission of combat-related trauma, asking the question: what is transmitted from father to child? Relating to family functioning, the authors found that numbing symptoms of combat-related PTSD impacted on the parent–child relationship, writing that 'emotional numbing, detachment, and avoidance may directly impact on the veteran's parenting ability' (Dekel & Goldblatt 2008, p.284). The review outlines three mechanisms pertaining to indirect transmission of trauma; these are: functioning and involvement within the familial unit, familial atmosphere, and patterns of communication (pp.284–285).

A 2016 review and study into the transmission of trauma in refugee families highlights how limited the knowledge is on intergenerational trauma, noting that a considerable amount of work is still needed to address the current gap in research (Sangalang & Vang 2016, p.10). This dissertation aims to address this gap from a mixed-methods perspective, by interrogating the notion of intergenerational transmission of trauma from the experiences of veterans and children of veterans of the Soviet–Afghan war (1979–89).

As trauma transmission is an important part of the human experience and its history (Danieli 1998), so is its relationship to culture; therefore, beyond the familial environment (or transmission from parent to child), ‘entire bodies of human endeavor are vehicles of transmission: oral history, literature and drama, history and politics, religious ritual and writings, cultural traditions and the study thereof, such as anthropology, biology, and genetics’ (Danieli 1998, p.9–10). Wilson and Drozdek call the relation of trauma and culture an important connection ‘because traumatic experiences are part of the life cycle, universal in manifestation and occurrence, and typically demand a response from culture in terms of healing and care’ (2007, p.367). Though human beings are equal in their susceptibility to pain, it is culture that creates a difference to the human response to pain and trauma: culture plays part in both the identification and the treatment of its sufferers, ‘even in the individual’s willingness to be identified as a victim’ (Merridale 2000, p.40).

Similar, or analogous, trauma may be experienced differently between cultures, communities, and even homes. This can lead to feelings of an isolated experience of a trauma that has occurred across a whole community, or even generation. The sharing of personal experience through research and writing, produced by exo-autoethnographic practice, aims to give voice to the silent stories of others. Further, the exo-autoethnographic process may be purgative for the researcher, and a tool to reclaim their agency.

Wilson and Drozdek ask ‘how does a culture define trauma?’, ‘Is the experience of psychological trauma the same in all cultures?’, and ‘Is trauma in one culture necessarily viewed as a trauma in another culture?’ (2007, pp.371–375). These questions highlight the gap in information pertaining to trauma studies, our

understanding of trauma, and the gap of information related to the transmission of trauma between generations, and its impact on cultures. Trauma and the multidimensional nature of cultures necessitates a theoretical framework to address issues relating to these questions and our understanding of trauma in culture (Wilson & Drozdek 2007, p.371). Exo-autoethnography aims to address this gap in knowledge by producing rigorous research and writing to address trauma transmission from a personal perspective, including the perspective of participant subjects. Part of addressing the transmission of combat-related trauma in any culture is to utilise an educational process – that is, to educate and share with both insiders and outsiders to the trauma what it is, its impact, and its implications. This educative function can emerge from the formation of trauma transmission archives of individualised stories to demonstrate the collectivity and singularity of these experiences.

Collectivity and the disappearance of trauma in the former Soviet Union, and its ongoing impact on the singularity of trauma in the first post-Soviet generation (including the cultural impact that this process continues to have on the Russian people and community) will be addressed in section 2.2 of this chapter.

2.2 Collective trauma and post-Soviet society

Russia's ongoing issues with the understanding, acceptance, and treatment of psychological trauma is connected to the disappearance of individual trauma during the Soviet Union era. This disappearance is part of the zeitgeist of the USSR. This disappearance, too, is an example of a society encouraging culture-specific and collective responses to trauma and pain (Merridale 2000).

The history of totalitarianism, armed conflict, and oppressions create a collective trauma, leaving a deep psychological mark on the affected society. Collective trauma is the shared traumatic effect experienced by a group of people: 'Complex situations that follow war and natural disasters have a psychosocial impact on not only the individual but also on the family, community and society' (Somasundaram 2007, p.1). As the type of community differs, so does its size. The exposure of a group of people to a traumatic experience or events induces a collective response. Somasundaram writes:

Just as the mental health effects on the individual psyche can result in non-pathological distress as well as a variety of psychiatric disorders; massive and widespread trauma and loss can impact on family and social processes causing changes at the family, community and societal levels (2007, p.1).

This response and the psychological trauma can shift a society's cultural and social landscape.

For post-Soviet society, the concept of collective trauma is twofold:

1. Life under a totalitarian dictatorship during the USSR and a century of war, genocide, famine, and ongoing conflicts has traumatised the society and its people collectively, the impacts of which are felt today through intergenerational trauma transmission. These major traumatic events 'transcend the realms of individual suffering and enter the universal and collective sphere' (Kellermann 2007, p.9). In addition to the primary and multigenerational trauma, there is an absence of collective healing as the trauma continues to be unaddressed both at the individual and collective level. Kellermann writes that, due to this lack of acknowledgment there:

can be no complete healing for anyone as long as the collective sources of trauma remain unaddressed because, in the long run, collective trauma cannot be healed as isolated events in the lives of individuals. It needs a group setting for its proper exploration and resolution (2007, p.9).

The erasure of individual pain and trauma from society (in the Soviet Union, individual problems were described as 'egocentric' – both in civilians and military personnel) placed society's focus on the collective struggle and aims of the State. This impact on the cultural fabric of society continues to be felt today, in part due to a historiography full of blank spots, as 'Russian culture remains suspended between the historical narratives of the emergence of the new nation from the ruins of the USSR' (Dobrenko & Shcherbenok 2011, p.77) and its Soviet legacy; this 'suspension between the traumatic experiences of the past ... and an underdeveloped and unstable narrative about it, are at the core of contemporary Russian culture' (p.77).

Dobrenko and Shcherbenok define the Russian nation as 'a community of people united by shared pain' (2011, pp.77–78). To understand this sentiment, we must first look at the impact of Stalinist ideology on Soviet society, and whether it also affected responses to trauma, violence, and pain on an individual level.

As Russia's sociopolitical environment transformed during the Revolution of February 1917, so did its attitude to pain: 'Soviet Russia took a distinctive line on individual pain, trauma and bereavement. The Soviet experience of war was narrated with a particular emphasis upon survival and endurance' (Merridale 2000, pp.39–40). The impact of the evolution of views on pain and trauma in Russia began from the late 1800s and the Russo–Turkish war of 1877–78, with attention of the field of psychiatry to shell shock (a term used to describe PTSD in veterans of World War I, before the term PTSD came into use in the 1970s) peaking during the Russo–Japanese war of 1904–05, during which period Western European ideas on psychology and the mind were briefly accepted. These ideas, however, were abandoned at the end of the 1920s by the Soviet government. Merridale explains:

An alternative paradigm of the individual and the mind, whose origins were historically Russian as well as ideologically Stalinist, was widely adopted. It is still predominant in Russia today. Post-communist Russian society, and especially its responses to violence and alienation, cannot be understood without considering it (2000, p.40).

It was this rejection of Western psychiatric ideals that led to Stalinist psychiatrists branding shell-shock sufferers as egocentric. 'Modern warfare, to these judges of the sick, was a test of manhood' (Merridale 2000, p.40), and they proposed that the men afflicted by shell shock simply lacked social responsibility and were generally selfish and possessed a personal weakness. This view of linking trauma to personal weakness persists today, as psychiatry in the Russian army continues its orientation towards optimising the capacity of its men, rather than caring for their suffering and mental health (Sieca-Kozlowski 2013).

Prior to the revolution, Soviet psychiatrists were working on establishing hospitals for the treatment of traumatised patients. However, February 1917 disrupted this debate, with journals such as the *Psikhiatricheskaya gazeta* (Russian: Психиатрическая газета) ceasing publication in the same year (Tolz 1997). The number of psychiatrists calling for the establishment of such hospitals depleted by 1923, due to 'war, hunger, cold, disease and emigration, but a dozen or more of the prerevolutionary psychiatric élite remained in post' (Merridale 2000, p.41).

These demands were renewed by the relative stability of the 1920s and saw the establishment of a hospital for the treatment of patients afflicted by trauma, called the Red Star. The numbers of traumatised men and women were astonishing; 'one expert is reported to have told Lenin that half the Soviet population was suffering from trauma in some form' (Merridale 2000, p.42). Despite this, and due to a wide lack of sympathy and understanding about the sanatorium for traumatised patients, the Red Star was closed less than three years after opening its doors.

Merridale writes that neurosis was widespread and affected war veterans and civilians alike. 'Rank and file communists, especially the young, were vulnerable to a particular kind of despair' (2000, p.43) and, by 1927, malaise was the most common cause of illness in the party. During this time, suicide rates among young communists grew – these numbers, however, are part of Soviet-era historical blank spots, due to the 'authorities' unwillingness to confront certain aspects of Soviet history in particular' (Dobrenko & Shcherbenok 2011, p.80).

Suicide was a prohibited topic in the USSR; during perestroika (1985–90), data on suicide rates was released (Várnik 2012). Between 1965 and 1984, suicide rates in the Soviet Union rose from 17.1 per 100,000 inhabitants to 29.6 (Várnik & Wasserman 1992). Though specific statistics are not known, some researchers estimate that 'the attributable fraction of alcohol for male suicides in the whole USSR is approximately 50%, and for female suicides 27%' (Várnik 2012, p.150). Following the collapse of the Soviet Union, Russia experienced a further surge in suicide rates in the 1990s, with the death rate among the country's working-age men increasing between 1990 and 1994 by 74 per cent, from 759.2 to 1323.7 deaths per 100,000 inhabitants (Brainerd 2001). These numbers meant a drastic decline for male life expectancy, which dropped from

63.8 to 57.6 years, and 'many countries of the former Soviet Union – in particular, Belarus, Ukraine, and the three Baltic countries – experienced a similar increase in mortality rates over the same period' (2001, p.1007).

Again, egocentrism was applied to individuals who dwelt on personal problems, with E.M. Yaroslavskii (Communist Party's spokesperson), announcing in 1925 that suicides completed by communists were a result of their lack of faith in 'the power and strength of the Party', and that they were both weak of will and of character (Merridale 2000, p.43). Many suicide notes included apologies to the Communist Party (Lebina 1994).

Despite this turn away from individual pain and trauma, the elite of the Party were interested in neurosis and in debates about the mind, 'especially where they were affected themselves' (Merridale 2000, pp.43–44). One witness described that, in the 1920s, 'it was not just not dangerous to be involved in psychoanalysis. It was prestigious' (Etkind 1993, p.222).

Sigmund Freud's work circulated in Russia before the Revolution, and his ideas remained acceptable for the first decade after 1917. However, by 1932, under Stalin's revolution, psychoanalysis was dismissed because of its expense and time-consuming process, as well as its potential for subversion (the Stalinist regime drew on the collective, rather than the individual, spirit of the union). At this stage, the 'emphasis shifted from analysis to re-education. Hypnosis, which had always been more respectable in Russia than in Britain, became the therapy of choice' (Merridale 2000, p.44). Hypnotism gained traction in medical science in the 1880s, and 'proved a valuable aid in the study of neuroses' (Freud 1961, p.192). The procedure of hypnotism was to induce the patient to 'remember the forgotten traumas and to react to them with powerful expressions of affect' (Freud 1961, p.194). This method of treatment was the direct precursor for psychoanalysis, and the technique was eventually substituted by Freud with 'free association' (1961, p.195).

Other influences upon Soviet collectivism included 'Orthodox belief, social patterns, and economic constraints' (Merridale 2000, p.45), including communal living situations for city-dwellers; while notions about the individual did not place much value upon the individual person (Offord 1998). Merridale writes that, under such conditions – in which ordinary people resided in Kommunalki apartments (коммуналка) with shared kitchens

and bathrooms, some families sharing a single room with curtains for privacy – ‘the concept of private emotion was likely to remain alien. Grief and pain, like joy, childbirth and domestic violence, were shared because they were public, at least within the bounds of the collective’ (2000, p.46). This collective privacy reinforced notions against forms of nonconformity, including individual pain, and these views were reinforced in all areas of life: from the home environment to work. This was when individual trauma disappeared from the Soviet Union, and from Russian culture: ‘Private pain went underground ... It became dangerous, in a world of informers and guilt by association, to weep for supposed enemies of the people’ (Merridale 2000, p.46). In her research, Merridale gathered explanations for how millions of Soviet Russians did not supposedly give way to despair or neurosis, despite decades of war, fratricide, famine, and genocide. ‘The myth,’ she writes, ‘is that almost all Russians, whatever their age, got through the war without suffering mental trauma. Archival evidence, however, confirms that this was not the case’ (Merridale 2000, p.48).

This myth is of unbreakable mental resilience. The catastrophe of Stalinism is still felt, and it permeates the fabric of Russian and post-Soviet society, with a people repeatedly traumatised for decades. The individual has yet given way to the Stalinist collectivism of the Soviet era, and veterans of war, along with victims of repression and disasters continue to be distrustful of therapy, analysis, and talk – all done at an individual level. As Merridale writes:

Most have survived until now by suppressing their memories and focusing on work and family. Anyone who forces them to confront the hidden past risks wakening images which still have the power to injure. The last thing most Soviet survivors want, especially as their whole lives have been built around concealment, is to be encouraged to explore their personal histories (2000, p.55).

Soviet-era historiography is littered with gaps ‘because of the peculiarity of the Soviet relationship with history in general and the authorities’ unwillingness to confront certain aspects of Soviet history in particular’ (Dobrenko & Shcherbenok 2011, p.80). What was left of that historiography was further devastated following the collapse of the Soviet Union, which Dobrenko and Shcherbenok argue produced a ‘cultural continuity

disorder' (2011, p.80). Making sense of events, and understanding such events in an individual's life and community was considered to be 'a fundamental part of both everyday social functioning as well as adjustment to traumatic events' (Updegraff, Silver & Holman 2008, p.718). The 'cultural continuity disorder' of the Russian people disrupts their ability to tell, or to make sense of, any story at all.

In his book on collective trauma, Kellerman writes that the after-effects are far-reaching and manifold (2007, p.33). Like any individual psychological trauma, collective trauma 'continues to contaminate those who were exposed to it in one way or another' (2007, pp.33–34) and impacts on further generations through the processes of intergenerational trauma transmission. Not only does it contaminate people and their communities, collective trauma additionally leaves traces on physical locations (2007, p.34). The physical remnants of trauma that occurred during the Soviet era live on, even in its architecture, with Socialist Classicism – or, in the style of the Stalinist Empire (Russian: Сталинский Ампир) – and khrushchyovka apartment buildings (Russian: хрущёвка) pervading cities across the former Soviet bloc; a daily reminder, in the public spaces and private dwellings, of the Stalinist shadow that continues to be cast on Eastern Europe.

CHAPTER 3: METHODOLOGY

In this chapter, a new autoethnographic method is introduced: exo-autoethnography. This method aims to shed light on, and add knowledge to, the study of intergenerational trauma transmission. Exo-autoethnography connects the present with a history of the other through the impact of trauma transmission processes, and/or experiences of an upbringing influenced by parental trauma. The chapter examines and defines the exo-autoethnographic method as a process of research into and writing about the intergenerational transmission of trauma.

3.1 Background on autoethnography

Autoethnography is an academic endeavour that aims to bring the social sciences closer to literature (Ellis 1995a, pp.3–4). In its merger of academic research with creative writing, undertaken from an autobiographic perspective (Denejkina 2016, p.3), autoethnography connects the personal with the cultural, producing scholarship that “at minimum, places the author’s lived experience within a social and cultural context” (Reed-Danahay, 2009, p. 30). As a research method and method of writing, autoethnography is defined as ‘an approach to research and writing that seeks to describe and systematically analyze (graphy) personal experience (auto) in order to understand cultural experience (ethno)’ (Ellis, Adams & Bochner 2011). Challenging the “scientific approaches to inquiry that intentionally separate the Observer and the Observed” (Anderson & Glass-Coffin 2013, p.58), within the autoethnographic method the researcher is both the examiner and initial focus of the research. This autoethnographic research is the starting point and filter for a cultural analysis, producing an ethnographic account of the *I*: the personal experience in order to understand broader cultural experience.

In the 1970s, a move towards autoethnographic research grew from the need for social scientists to self-observe first, including their communities and people (Hayano 1979).

Anthropologist Hayano's 1979 essay, *Auto-Ethnography: Paradigms, Problems, and Prospects*, was the first time the terminology 'autoethnography' was used in its current framework. Hayano discussed the use of autoethnography for the purpose of an anthropologist's self-observation during their ethnographic research (Hayao 1979), likening 'auto-ethnography with insider studies in which the researcher was a native, or became a full insider, within the community or culture being studied' (Bochner & Ellis 2016, p.47).

A 'renewed interest in personal narrative, in life history, and in autobiography among anthropologists' was observable in the 1990s as autoethnography began to merge postmodern ethnography with autobiography (Reed-Danahay 1997, p.2). This merger is evident in autoethnography's continued dependency on "many of the same methods as other ethnography", however, it is argued that the methodology and scholars of autoethnography are distinguished by their "greater allegiance to progressive sensitivities in the social sciences and humanities" (Anderson & Glass-Coffin 2013, p.80). Today, autoethnography retains its main principle: giving voice to the voiceless (Denzin 2014, p.6) – that is, for the researcher to give voice and space to those not afforded with a platform or ability to discuss their narrative openly and/or safely – while its definition is refined to suit the researcher's individual research (Denejkina 2016, p.2) – that is, autoethnography can serve different purposes across different projects and investigations (Denzin 2014, p.20).

Autoethnographic research focuses on events directly experienced by the self – or, as in the case of collaborative witnessing, a relational autoethnography (to be discussed in more detail later in this chapter, section 3.2), focuses on evocatively telling the lives of others while becoming part of the other's story in the process – including its principles of interventionism, commenting on cultural practices, critiquing cultural practices, contributing to existing research, and compelling a response from its audience (Holman Jones, Adams & Ellis 2013, p.20). As a result, autoethnographies "are highly personalised accounts that draw upon the experience of the author/researcher for the purposes of extending sociological understanding" (Sparkes 2000, p.21).

On the autoethnographic spectrum are two principal autoethnographic forms of autoethnographic research and writing: evocative autoethnography, and analytic autoethnography.

3.1.1 Evocative autoethnography

Defined as 'an autobiographical genre of writing and research that displays multiple layers of consciousness, connecting the personal to the cultural' (Ellis & Bochner 2000, p.739), evocative autoethnography can be seen as the principal or fundamental form of autoethnography (Denejkina 2017).

A combination of autobiographic and ethnographic characteristics, the autoethnographic method sees the researcher write about his or her own experiences in a selective and retrospective manner, while analysing these epiphanies (Ellis, Adams & Bochner 2011). To examine personal experience, evocative autoethnography focuses on emotion, evocation of emotion, and self-expression, 'allowing us to examine the self, our identity, emotions and experiences as relational and institutional stories affected by social and cultural structures' (Haynes 2017, p.217; also see Ellis & Bochner 2000).

Evocative autoethnography is a method rejecting the generalisation of experience, and thus the representation of *the other* (Anderson 2006). It is an approach that challenges traditional processes of social science research and representation of others (Denejkina 2017), while treating 'research as a political, socially-just and socially-conscious act' (Ellis, Adams & Bochner 2011).

3.1.2 Analytic autoethnography

Like evocative autoethnography, an analytic autoethnography explores individual experience with a theoretical analysis of said experience – that is, analytic autoethnography aims to shed light on a 'broader set of social phenomena' and is not just about evoking an emotional response or resonance from the audience, or

documenting the personal experience of the researcher, or to produce an insider perspective on the issue studied (Haynes 2017, p.218).

The following researcher characteristics are essential elements in conducting analytic autoethnography: the researcher is a full member in the research group, or setting; is visible as such a member in the researcher's published texts; is committed to an analytic research agenda, focused on improving theoretical understandings of broader social phenomena; participates in dialogue with informants beyond the self; and is committed to theoretical analysis (Anderson 2006, p.375, 378).

Within the spectrum of analytic and evocative autoethnography lie varied approaches to the method, including but not limited to meta-autoethnography, collaborative autoethnography, co-constructed decolonizing autoethnography, relational autoethnography, and collaborative witnessing. For a further discussion on the varied approaches to autoethnography and different autoethnographic methods, see 'Autoethnography and Family Research' (Adams & Manning 2015) and *Interpretive Autoethnography* (Denzin 2014).

In addition to these autoethnographic models of research and writing, autoethnography involves reflexivity, specifically, an ethics of care. Developed by Ellis, ethics of care holds the researcher accountable for the consequences their research has on participants within their work, the reader, and themselves. Reflexivity in autoethnography was conceptualised further with meta-autoethnography – a practice of reflexive autoethnography. Established in 2009, meta-autoethnography is an autoethnographic examination of previous autoethnographic work, allowing the researcher to ask questions they did not ask originally (Ellis 2009a, p.13). It is important to note that ethics of care includes the safety of the researcher. This means that, though it is ethically sound to take an autoethnographic text to all participants within the work for their input and feedback, if the autoethnographic account is of, for example, abuse or traumatic experiences, it is unreasonable for the researcher to return to her abuser for their input and feedback, as it is potentially damaging psychologically, and includes safety issues for the researcher.

Autoethnography begins inside the researcher who 'retrospectively and selectively write[s] about epiphanies that stem from, or are made possible by, being part of a

culture and/or by possessing a particular cultural identity' (Ellis, Adams & Bochner 2011, p.3). Furthermore, if the ethnography or the project does not make use of personal experience, memories, or storytelling techniques, then the work cannot be considered a work of autoethnography, 'just as in autobiography without any fieldwork, observation, acknowledgement of extant research or theories, or cultural participation and analysis cannot be an autoethnography' (Adams & Manning 2015, p.352). The outcome of the research and text may be political, giving a voice to the voiceless, healing, and powerful advocacy – paralleling the impact produced by trauma narrative as advocacy: '[I]f the most vulnerable tell their own narratives, in their own way, in their own time and on their own terms, then this can become a form of powerful advocacy' (Joseph 2016, p.211).

3.2 Exo-autoethnography

Exo-autoethnography is the autoethnographic exploration of a history whose events the researcher did not experience directly, but is a history that impacted the researcher through familial, or other personal, connections by proxy. It is an approach to research and autoethnographic writing that seeks to analyse individual and private experience, as directed by the other's experience or history, to better understand a history that impacted the researcher indirectly, and personal and community experiences as related to that history.

During this PhD, the method of exo-autoethnographic research and writing has been developed for the qualitative and mixed-methods study of intergenerational transmission of trauma, moving beyond the personal experience of the researcher. In its first conception, the method aims to connect the present with a history of the other through intergenerational transmission of trauma and/or experiences of an upbringing influenced by parental trauma.

Exo-autoethnography was developed as part of my research into the intergenerational transmission of combat-related trauma from parent to child. Journalist Borovik wrote that 'Afghanistan became part of each person who fought there. And each of the half million soldiers who went through this war became part of Afghanistan' (1990, p.1). My

research asks: did Afghanistan become part of even more than the people who fought there; do its remnants persist in the children of the Soviet veterans who returned home?

Inspired by familial experiences of war and trauma (my father served in the Soviet army during the Soviet occupation of Afghanistan), this research focuses on the Soviet–Afghan conflict of 1979–89, and how the Soviet occupation of Afghanistan impacted on the first post-Soviet generation. This study includes interviews with Soviet veterans and children of Soviet veterans, and is an exo-autoethnographic account of how my father’s story and trauma impacted on my development and personal story.

In its initial development, exo-autoethnography aims to add knowledge and evidence to the study of the intergenerational transmission of trauma through evocative narrative and analytic research. Its purpose is to understand and expose the personal and cultural experience of the children of a parent(s) with trauma. Specifically, exo-autoethnographic research and writing aims to narrate and analyse the impact of trauma on children of a traumatised parent(s) through family functioning – by exploring the historical events of the trauma, and the personal experience of having a traumatised parent(s) – and the intergenerational transmission of trauma.

Rather than placing sole focus on the individual experience of the researcher or author, exo-autoethnography builds on Ellis et al.’s definition of autoethnography (2010): exo-autoethnography is an approach to research that seeks to analyse (graphy) individual and private experience (auto) as directed by the other’s experience or history (exo) to better understand:

1. A history that impacted the researcher by proxy
2. Personal and community experience (ethno) as related to that history.

Exo-autoethnography comprises all that is autoethnography, including its tenets of commenting and/or critiquing cultural practices, contributing to existing research, and compelling a response from its audience (Holman Jones, Adams & Ellis 2013), as well as its interventionist principle: ‘seeking to give notice to those who may otherwise not be allowed to tell their story or who are denied a voice to speak’ (Denzin 2014, p.6). Exo-autoethnography utilises a more rigorous approach to the ethnographic exploration of the self, by combining evocative and analytic autoethnographies with a third element

to its process. Instead of exclusively focusing on events experienced directly by the self, exo-autoethnography places focus on a history that impacted the self (researcher) by proxy. It connects the present with a history never directly experienced, through the intergenerational transmission of trauma and/or experiences of an upbringing influenced by parental trauma. Not to be confused with post-memory – 'the relationship of the second generation to powerful, often traumatic, experiences that preceded their births but that were nevertheless transmitted to them so deeply as to seem to constitute memories in their own right' (Hirsch 2008, p.103) – exo-autoethnography aims to analyse parental trauma that impacted on the self through the familial unit, resulting in the transmission of trauma, directly and/or indirectly.

In its initial development, exo-autoethnography aims to analyse and understand the personal and cultural experience of children of parent(s) with war-related PTSD or trauma, and the impact this has on the experience of the child. Combat-related PTSD affects familial relationships and psychological adjustments of family members through the direct and indirect transmission of PTSD (Galovski & Lyons 2004). Direct and indirect models of trauma transmission are differentiated as:

- a. *Direct transmission*: PTSD symptoms (such as anxiety and dissociation) transmitted to the child through projection and identification
- b. *Indirect transmission*: PTSD symptoms impacting or affecting the child's distress through problems in the functioning of the family unit, (Galovski & Lyins, 2004; see also Dekel & Goldblatt, 2008).

The exo-autoethnographic analysis and account assumes the story's focus as the self – the ethnographic exploration of the *I* – as well as the history that has created the self: what was inherited by the researcher directly and/or indirectly, and has impacted or formed who the researcher is today.

On the surface, exo-autoethnography might appear to share similarities with collaborative witnessing due to both methods having a focus on the other, and on the story of the other. Developed by the preeminent scholar of autoethnography, Ellis, collaborative witnessing is a form of relational autoethnography that gives opportunity to the researcher to 'focus on and evocatively tell the lives of others in shared storytelling

and conversation' (Ellis & Rawicki 2013, p.366). Collaborative witnessing 'extends an autoethnographic perspective in its emphasis on writing for and with the other ... bearing witness to others as well as to oneself' (Ellis & Rawicki 2013, p.366). However, exo-autoethnography is about a history of the other that directly impacted the researcher in their development, rather than the researcher becoming part of the other's story through collaborative witnessing (that is, shared storytelling and conversation). In other words, in exo-autoethnographic research and writing, the researcher does not proactively seek to collaboratively witness the other's story or trauma but was impacted by the other's story or trauma through familial or other close relationships (for example, via the process of intergenerational trauma transmission).

Further, exo-autoethnography is not to be confused with narrative inheritance. Goodall writes, 'narrative inheritance refers to stories given to children by and about family members' (Goodall, 2005, p.492). Importantly, a narrative inheritance can be part of the silences within families, where 'important and relevant stories may never have been told, or told incompletely' (McNay, 2009, p.1178).

The dynamics of shared and silenced narrative inheritance share similarities with exo-autoethnography because it aims to uncover the impact of traumatic events of the other on the researcher, and these events may have been shared by the other, or may have stayed secret. However, the difference of exo-autoethnography is its exploration of the other's trauma on the researcher, asking how it has impacted the researcher's life from birth to now, and unpacking how trauma moved from the initial traumatic event into the researcher's childhood and into their present. Furthermore, exo-autoethnography is not about writing the other's story; instead, it is about the researcher's story and how the other's story (untold or told) impacted the researcher.

3.2.1 Conducting exo-autoethnography

The roots of exo-autoethnography can begin generations prior to the birth of the researcher. However, the event that influences the researcher, in this case looking through the frame of trauma, has shaped and directed the life of the researcher. Four distinct primary informants form from this event:

1. *The Self*: The primary researcher, who was impacted by impacted by the event through the intergenerational transmission of parental trauma.
2. *The Other*: The individual whose initial trauma influences their offspring (the researcher) through intergenerational transmission of trauma.
3. *The Others*: A group of individuals who were traumatised by the same event as *The Other* (and who are connected by said event), and whose initial trauma influenced their own offspring through intergenerational transmission of trauma.
4. *The Community*: A group of individuals who were impacted by the same event through the intergenerational transmission of parental trauma (and are connected by said event), similarly to the researcher.

In this study on the impact of the Soviet–Afghan war (1979–89) on the first post-Soviet generation, the four groups of informants become:

1. *The Self*: The primary researcher of this study
2. *The Other*: The father of the researcher, who is a returned Soviet veteran of the Soviet–Afghan war.
3. *The Others*: The returned Soviet veterans of the same war, who have children who fall into the first post-Soviet generation.
4. *The Community*: The offspring of the returned Soviet veterans of the Soviet–Afghan war, who like the researcher (*The Self*) are part of the first post-Soviet generation.

Like the ethnographic methods of immersion, in exo-autoethnography, the researcher returns to the place of the initial (traumatic) event, to connect the past with the present. This can be a physical return (geographically), and/or a theoretical or emotive return (through journal entries, oral history, photographs, and interviews with informants – particularly *The Other* (who directed the private and individual experience of the researcher)).

To do exo-autoethnography, the researcher engages with the self to produce the evocative autoethnographic portion of the study; further, the researcher engages in an analytic exploration and theoretical analysis of individual and *The Other's* experience, in order to add knowledge to the understanding of broader social phenomena. The researcher engages with informants beyond the self, which take the aforementioned three forms:

1. The Other, *directing* the experience of the researcher (The Self) impacted by proxy
2. The Others, *directing* the experience of The Community by proxy
3. The Community, *impacted* by the experience of The Others by proxy.

Exo-autoethnography is primarily a qualitative method, utilising narrative inquiry and thematic analysis of interviews, including introspection of the self through autoethnography. The process of collecting oral history data through open-ended interviews allows the researcher and participants to form a collaborative relationship, providing a personal understanding of the subjective experience of the traumatic event(s) and gathering first-hand accounts of said event(s) (Leavy 2011). However, based on the events interrogated and the research study's sample size, the method can utilise quantitative analysis of questionnaires. The current research is a mixed-methods approach using the exo-autoethnographic framework, which engages with the four primary informant groups through the use of interviews and questionnaires, providing qualitative and quantitative analysis of data.

Exo-autoethnography exposes the issues of a traumatic past and its ability to influence generations in the future. It is about connecting a past never experienced in first-person to the self's present and own history through evocative and analytic research and writing, by finding and exploring the threads that bind the current self (the researcher and their experience) to the experience of *The Other*. By creating an exo-autoethnographic account, the researcher understands the historical context of her life; the how and why of what she has inherited through a familial history; and the impact of these events on the researcher's community.

A 2016 review and study looking at transmission of trauma in refugee families highlighted the limited knowledge on transgenerational trauma, noting that a considerable amount of work is still needed to address the current gap in research (Sangalang & Vang 2017, p.10). Exo-autoethnography aims to address this gap from a qualitative and mixed-methods perspective, by interrogating the notion of transgenerational transmission of trauma from the experiences of 1. *The Other*, 2. *The Others*, 3. *The Community*, and 4. *The Self* (researcher), through one unifying historical event – in this research, the event is the Soviet–Afghan war of 1979–89 and its impact on the first post-Soviet generation.

The method developed aims to connect a past never experienced in first-person to the present: making connections with *The Other's* history that directed the present of the researcher by proxy. An exo-autoethnographic account aims to explain to the researcher, and the community, some of the context of their lives; the how and why of what they have inherited through a familial history; and the impact of these events on the researcher and the researcher's community.

As a developing method, exo-autoethnography aims to add knowledge to the study of transgenerational transmission of trauma. Its aim is to understand and share the personal and cultural experience of children of a parent(s) with PTSD, and the impact of trauma transmission on the child. Current and future studies can be utilised to address policy pertaining to the effective treatment and support of people with PTSD and trauma, in order to break or interrupt the cycle of trauma transmission.

CHAPTER 4: ETHICS AND CRITICISM

4.1 (Exo) autoethnographic issues and ethics

As a qualitative method of research, autoethnography utilises reflexive personal investigation and observation conducted as ethnographic fieldwork and writing. This approach to social science research has resulted in numerous criticisms aimed at autoethnography, pertaining to its research rigour and objectivity, as well as highlighting its issues in attempting to merge literature and social science. These issues and criticisms will be discussed in this chapter.

Autoethnography means to critically study the personal and individual experience from the lens of an ethnographer: to see yourself as the subject of study. Conducting autoethnography is to open up the discussion to an audience and for research to give voice to those not afforded with a platform or ability to discuss their narrative openly (Denejkina 2016). As Denzin writes: 'Autoethnographic work must always be interventionist, seeking to give notice to those who may otherwise not be allowed to tell their story or who are denied a voice to speak' (2014, p.6). Despite this, autoethnography continues to face criticism, targeting its research practice, research rigour, output, and ethics, as well as its position within academia.

Due to varied applications of autoethnography (see Denzin 2014; Ellis & Bochner 2000 for detail on forms and applications), there is also a variation in the degree of detail in the study of the self and informants, interaction with informants, collection and analysis, including 'traditional analysis, and the interview context, as well as on power relationships' (Ellis, Adams & Bochner 2011). These potential issues stem from judging a qualitative methodology by using criteria aligned with generalisability of data (Maynard & Clayman 1991, p.412), and the positioning of the arts and scientific fields at conflict – a condition 'autoethnography seeks to correct' by disrupting 'the binary of science and art' (Ellis, Adams & Bochner 2011, p.9).

As an amalgamation of ethnography and autobiography, criticism aimed at autoethnography concerns the similarities between the academic autoethnographic method and writing, and creative non-fiction (including memoir and autobiography). Importantly, these criticisms are based on applying ethnographic and autobiographic criteria to the method. Critics argue that autoethnography, therefore, either lacks scientific rigour (by ethnographic and social science standards), or is inadequate as a literary art (by autobiographic standards) (Ellis, Adams & Bochner 2011). Ellis, Adams, and Bochner write that autoethnographic writing and research are acts of social justice, in that the researcher's goal is 'to produce analytical, accessible texts that change us and the world we live in for the better' (2011; also see Holman Jones 2005): 'Simply put, autoethnographers take a different point of view towards the subject matter of social science' (Ellis, Adams & Bochner 2011).

Exo-autoethnography aims to address criticism directed at autoethnographic research and writing by actively disrupting 'the binary of science' (Ellis, Adams & Bochner 2011, p.9) in its amalgamation of analytic and evocative autoethnographic methods with rigorous qualitative research. It employs a qualitative method of research and writing, utilising narrative inquiry and thematic analysis of interviews and surveys with four primary informants: *The Self (the researcher)*; *The Other*; *The Others*; and *The Community*.

This following section focuses on two specific criticisms of autoethnography: those of truth in autoethnographic research and writing; and the questions of whose story or stories we are telling, and what ethical boundaries exist in order to protect the other.

4.1.1 What is autoethnographic truth?

One criticism aimed at autoethnographic ethics is its use of composite events in writing. As Ellis writes: 'You might collapse events to write a more engaging story, which might be more truthful in a narrative sense, though not a historical one' (Ellis & Bochner 2000, p.753). This issue is visible in Ellis' *The Ethnographic I* (2004), a methodological text about autoethnography, and a text with composite characters (Ellis 2004, p.xiii): '... from the very first page, she pulls readers into her fictional graduate classroom of

diverse students who are mostly composite characters with attributes similar to students she has taught' (Maguire 2006, para.6). Ellis conveys to the reader that some of the scenes within *The Ethnographic I* are fictionalised, and that some characters are composite creations, something Erich Goode dubs as an informal pact with the reader: 'If the author fictionalizes some of it, he or she has an obligation to tip off the reader to that fact' (Goode 2006, p.263). Goode notes that 'not all writers (memoirists, for instance) have been as considerate' (2006, p.262) in notifying their readerships of fictionalisation or fabrication within their work. However, as a work of social science, I posit that Ellis' *The Ethnographic I* must be judged in terms of the standards of social science.

In a 2007 journal article, Ellis focuses on relational ethics concerning research conducted with intimate others (2007, p.3). In her work with students, she tells them to always 'seek the good' (Ellis 2007, p.23) – pertaining to the ethical decisions they make during their research – and 'to think of the greater good of their research' (p.24), while also warning them 'that they should be cautious that their definition of *greater good* isn't one created for their own good' (p.24). Ellis goes on to explain her justification for the creation of composite characters, and fictionalising plot, in order to write ethical research:

Then, I warn: Now you must deal with the ethics of what to tell. Don't worry. We'll figure out how to write this ethically. There are strategies to try. You might *omit* things, use pseudonyms or *composite* characters, *alter* the plot or scene, position your story within the stories of others, *occasionally decide to write fiction*. Sometimes it may be appropriate to write and not publish (Ellis 2007, p.24, emphases added).

The American Sociological Association's (ASA) Code of Ethics states that 'sociologists conduct their affairs in ways that inspire trust and confidence; they *do not knowingly make statements that are false, misleading, or deceptive*,' (ASA Code of Ethics 1999, emphasis added). Further, section 13.04 *Reporting on Research* outlines:

(b) Sociologists do not fabricate data or falsify results in their publications or presentations.

(c) In presenting their work, sociologists report their findings fully and do not omit relevant data. They report results whether they support or contradict the expected outcomes (ASA 1999, p.17).

Ellis' explanation seemingly forgoes these ethics for the purpose of creating ethical autoethnographic writing and research that is conducted with intimate others: trading ethics for ethics. This position also supports Ellis' viewpoint that collapsing events in order to write a 'more engaging story, which might be more truthful in a narrative sense, though not a historical one' (Ellis & Bochner 2000, p.753) is permissible within an autoethnography. While not proactively *deceptive*, altering a plot or scene, or producing composite characters or events, places this information into a false light, removing some trust in and confidence with the information.

In her paper on confidentiality in qualitative research, Kaiser (2009) writes that Hopkins (1993) creates wholly new characters and scenes from composites of people and events, albeit unlike the use of pseudonyms, in order to deliver confidentiality to participants:

[C]hanging additional details to render data unidentifiable can alter or destroy the original meaning of the data. For example, in a study of work-family policies, removing or altering details of employer size, industry, policies, and family structure might protect individual and employer identities, but these changes make the data useless for addressing the research questions at hand (Kaiser 2009, p.1636; also see Mckee, Mauthner & Maclean 2000; Parry & Mauthner 2004).

Accordingly, Kaiser writes that 'readers are typically unaware of how data has been altered and therefore unable to consider the significance of changes for their interpretations of the data or for the validity of the data' (2009, p.1636). Kaiser's note on the audience's unawareness of how data has been altered is important, as the passage may suggest and potentially tolerate changes in data occurring *if* the reader is notified of the anomaly by the researcher.

4.1.2 Whose story are we telling?

The third issue in autoethnographic ethics is the question of whose story or stories we are telling, and what ethical boundaries exist in order to protect the other, or to write the other into the story of the self. These issues can be seen in the decision-making process of inclusion and omission of facts or anecdotes from the piece to ensure that information disclosed has a specific reason for its disclosure: without this fact, the story is incomplete.

Ellis' *Final Negotiations: A Story of Love, Loss, and Chronic Illness*, is a text that intersects narrative with autobiography, 'bringing social science closer to literature' (Ellis 1995b, pp.3–4). In this text, Ellis presents an account of Gene Weinstein (a sociologist and Ellis' former partner) and his battle with emphysema, from which he died in 1985. Ellis writes:

One night in a campground a pill lodges in his lungs when he swallows. For hours, Gene crouches on his hands and knees in the camper trying to cough it up. When he defecates from the efforts, I calmly collect his feces in a paper bag (1995b, p.32).

This recount of events may be viewed as problematic because it reveals an intimate detail of a personal experience within the private life of Weinstein, following his passing in 1985. The book was published in 1995. Ellis begins to write of her relationship with Weinstein in 1984 and concludes the writing in 1993, eight years after Weinstein's death (1995, p.9). Conceivably, Weinstein has no input into the inclusion of this intimate personal detail – he cannot give consent.

However, the above passage is succeeded by content that, it may be argued, can only be understood within the context of the previous passage, thus requiring its inclusion:

Is this real? I am numb, but give him encouragement, and then suggest going to hospital ... I am immersed in a bathtub of whipped cream, but it is turning to liquid, as it eventually must, and I will drown (Ellis 1995b, p.32).

These two passages highlight an ethical dilemma, raising the question: is this *Ellis'* story, or *Weinstein's* story?

Autobiography and memoir are the story of the story and, if we are not individualistic beings, we are, therefore, relational beings – as are our stories (Eakin 1998; Eakin 2004). Calling this the *relational self*, Eakin uses the term 'to describe the story of a relational model of identity, developed collaboratively with others, often family members' (1998, p.69). By Eakin's description, all memoir is, therefore, the researcher's (author's) autobiography, the biography of the other, and the autobiography of the other.

In her work *Landscape for a Good Woman* (1987), Carolyn Steedman also conceives of relational identity, and of writing a relational autobiography. She states that 'children are always episodes of someone else's narrative ... not their own people, but rather brought into being for particular purposes' (Steedman 1987, p.122), giving way for the writing of the other into the story of the self. Similarly, as Steedman's quest for her origin focused on her mother, the quest of exo-autoethnography focuses on the self (the I), and the experience of *The Other*, *The Others*, and *The Community*.

In her essay *Friendship, Fiction and Memoir: Trust and Betrayal in Writing from One's Own Life* (2002), Claudia Mills asks in what context are we justified in sharing the stories of our most intimate associates with others? To Eakin, Steedman makes the case 'that the key events in her mother's life and personality shaped the design of her own in the most direct and lasting fashion' (Eakin 1998, p.68). This point underlines that, within the personal experience (that of the researcher), whatever event has happened to or was experienced by *The Other*, ultimately, *it directly impacted the design of the self*, and therefore would be a viable context in writing about intimate associations.

On writing about vulnerable subjects, Couser notes that 'life writing is far too complex and variable to be subjected to a set of abstract, unvarying, and presumably universal principles' (2004, p.33). This suggests that, in fact, there is no definitive answer, and that the topic of writing about vulnerable subjects, and familial subjects, is a continuous ethical dilemma. Different cases may require revision, or invocation of the ethics of care – which is proposed normally within autoethnography. However, as per Chapter 3, section 3.1, it is important to remember that ethics of care includes the safety of the

researcher, meaning that, if the autoethnographic account is of, for example, abuse or other traumatic experience(s), it is unreasonable for the researcher to return to her abuser for their input and feedback.

In a paper concerning self-protection in autoethnographic research and writing, Chatham-Carpenter argues that though autoethnographers have made great considerations about the representation of others in their research and writing, “very few have written about the need to protect themselves in the process of doing autoethnographic writing” (2010, p.1). In her research on Anorexia, with others and autoethnographically, Chatham-Carpenter concludes that “revisiting the pain is necessary in many types of autoethnographies”, however, meta-autoethnographic accounts of the writing process are needed for a discussion of how the autoethnographic work impacted the scholar, otherwise, the “potential effects of such writing for autoethnographers is not always clear” (2010, p.10). Within autoethnographic research and writing, “secrets are disclosed and histories are made known” (Holman Jones, Adams & Ellis, 2013, p.24). These revelations open scholars up to potential criticism and attack, but are revealed through autoethnography in “order to call attention to the vulnerabilities that other human beings may endure in silence and in shame” (2013, p.24). The exo-autoethnographic component of this thesis, *Чёрный Тюльпан (Black Tulip)*, does not include a dedicated meta-autoethnography (though this discussion does meet some meta-autoethnographic objectives), as suggested by the work of Chatham-Carpenter. However, it embraces vulnerability using an ethics of care with the purpose of bringing attention to the impact of intergenerational trauma within a familial environment. Part of my protecting myself in writing about childhood trauma and intergenerational trauma in *Чёрный Тюльпан* has been enacting an ethics of (self) care by controlling what is revealed (see Wall, 2008; Ellis, 1999) – that is, limiting myself in my exploration of my personal trauma “as a way of mitigating [psychosomatic] vulnerability” (Holman Jones, Adams & Ellis, 2013, p.24).

4.1.3 How exo-autoethnography meets the criticism

As noted above, one of the more repeated criticisms aimed at autoethnographic writing and research is its main principle: the ethnographic exploration of the self, or focus on

the self. Autoethnography has been called a navel-gazing exercise, dubbed as self-indulgent and individualistic (Atkinson 1997; Coffey 1999; Méndez 2013) due to its focus on the experience of the researcher, which has been interpreted as research that does not present or use information supported by collected data and the inclusion of informants outside the self.

The criticisms concerning autoethnography's similarity to creative writing, or memoir, are highlighted by its focus on the self. In her writing on the art of memoir, American author, Annie Dillard, states that 'you have to take pains in a memoir not to hang on the reader's arms, like a drunk, and say, 'And then I did this and it was so interesting'' (1987, p.154). This criticism, pointed at memoirists, is directly related to autoethnographers who do not move past research and reflexivity of their self; thus, it can be argued, stopping short of producing academic research. In the analytic tradition, the exo-autoethnographic method aims to further disrupt a self-aiming focus of autoethnography, while encapsulating its creative writing, and utilising outside informants.

Exo-autoethnography allows for a more seamless merger of social science with creative writing, by producing creative work in an academically rigorous framework. As evidenced by Ellis (see Ellis 1995b; 2004; 2009a; 2009b) and underpinned in review by Moro (2006), to write well autoethnographically, the researcher must be a good writer; an exo-autoethnographic work would need the writing flair of a creative writer, and the research aptitude of an academic. The exo-autoethnographic work takes your personal experience and contextualizes it by presenting the account alongside rigorous academic research through an exo-autoethnographic framework that presents the stories of other primary informants: *The Other*, *The Others*, and *The Community*.

Exo-autoethnography aims to address criticism directed at autoethnographic research and writing by actively disrupting 'the binary of science' (Ellis et al. 2011, p.9) in its amalgamation of analytic and evocative autoethnographic methods with rigorous qualitative and mixed-methods research. It employs a qualitative method of research and writing, utilising narrative inquiry and thematic analysis of interviews and questionnaires with four primary informants: *The Self* (researcher), *The Other*, *The Others*, and *The Community*.

The new method aims to connect a past never experienced in first-person to the present: making connections with *The Other's* history that directed the present of the researcher by proxy. An exo-autoethnographic account aims to explain to the researcher and *The Community* some of the context of her and their lives; the how and why of what they have inherited through a familial history; and the impact of these events on the researcher and the researcher's community.

4.2 Ethics of de-identification in social research

This section provides a discussion of issues present in de-identifying marginalised research participants, or research participants who request to be identified, in the publication of social research. As this research is mixed-methods (qualitative and quantitative), it included several data collection techniques and analyses. This discussion focuses specifically on the face-to-face and Skype interviews conducted with participants in Russia and the United States.

As this PhD study investigates the intergenerational transmission of war-related trauma from parent to child, focusing on the Soviet–Afghan war of 1979–89, my research includes interviews with Soviet veterans and family members of veterans; it was these interviews that raised questions of participant erasure and agency. In these interviews, some of my research participants requested that their full names be used, while others requested only first names be used. All requested that their other identifying details remain identifiable. Given the social and political sensitivity that persists in Eastern Europe around the discussion of the Soviet invasion into Afghanistan, I had to consider and discuss the issue of safety with participants who requested they be identified.

My research participants are marginalized participants by virtue of the topic of my research, the Soviet–Afghan war, and the ongoing silencing treatment they have received during and following the war by the state:

To take just two examples: in the hope of obscuring the true impact of the war, some local authorities refused to allow special areas in cemeteries to be set apart for the graves of soldiers killed in Afghanistan; while others

forbade the cause and place of death to be stated on gravestones or memorial shields (Aleksievich, Whitby & Whitby 1992, p.5–6).

Given academic broad-stroke standards of de-identifying research participants, we must review the ethics of this practice, because it can promote and perpetuate the erasure of marginalised participants and the silencing of their voices. Some textbooks on the topic of ethics in the social sciences approach anonymity and de-identification of participants from the angle that anonymity is part of the basic expectations of a research participant – without elaborating that anonymity is not always desirable nor ethical (see, for example, Ransome 2013) – essentially replicating the medical model of human research ethics developed for the regulation of biomedical research in the United States (Dingwall 2016, p.25). Such an approach does not address the issues of presenting anonymity as a status-quo in social research, and it makes a sweeping – and a Western academic – generalisation that anonymity is one of the vital assurances researchers must give to their participants to keep within their duty of care (that is, that researchers have at least some obligation to care for their research participants).

This approach to research ethics negates participant agency, particularly those participants who request they be identified in research. Furthermore, forced anonymity can be an act of disrespecting participants (Mattingly 2005, p.455–456) who may have already experienced invisibility and who are then further erased through anonymity by researchers (Scarth & Schafer 2016, p.86); for example, ‘in some Australian and, in particular, some Indigenous cultures, failing to name sources is both a mark of disrespect and a sign of poor research practice’ (Israel, Allen & Thomson 2016, p.296).

As researchers, we must also question if presenting this approach as a vital tenet of social research can become a damaging rule-of-thumb for new researchers, who might, therefore, not question the potential undermining of participant agency and use de-identification unethically as a sweeping regulation within their research, without consideration for the individual situations of their research participants. This is part of the issue created by applying a medical model of ethics assessment processes to the social sciences, in which the prevailing interpretation is that de-identification is *also* required within social research, whereas the reality is that specific agreements between the researcher and the research participant must be honoured.

The ethical dilemma, therefore, is this: can researchers ethically de-identify participants at the expense of the participants' agency, potentially perpetuating the historical and symbolic erasure of their voices and experiences? I argue that, based on research design and data-collection methods, this decision-making process is an 'ethics in practice' and must be approached in context, individually, for each study and for each individual participant.

As scholars, we want to minimise or eradicate harm that might come to our participants through our research. While we think 'in advance about how to protect those who are brought into the study' (Tolich 2016, p.30) this must be a continual process throughout our project, in which we 'work out the meaning of what constitutes ethical research and human rights in a particular context' (Breckenridge, James & Jops 2016, p.169; see also Ntseane 2009). This is important to note because protection does not refer only to participants but also to others connected to them. For example, the use of a real name at the request of a participant may expose their family member(s) who were not part of the research.

Consequentialist approaches to ethics suggest that 'an action can be considered morally right or obligatory if it will produce the greater possible balance of good over evil' (Israel 2015, p.10; see also Reynolds 1979). This is an approach that could be taken to issues around de-identification; however, this also means that researchers must know what is good or bad. In studies like the present research, this would mean knowing (or making an attempt or assumption to know) what is good or bad for my research participants. This action is infantilising, and places the researcher above the research participant by making the final call ourselves, the effect of which is to remove participant agency – if we can assume that participants are autonomous during the research consent process, we must also assume that they are autonomous in making decisions with respect to their identification (Said 2016, p.212). Additionally, this action may be culturally insensitive given that Western human research ethics committees follow Western cultural guidelines, centring the dominance of Western academia.

The ethical issues I faced during my PhD research highlight why researchers cannot take a sweeping approach to de-identification in qualitative research – not even for a single study. 'Ethics in practice' means that each participant's situation is analysed

individually, and issues around erasure, safety, and their agency are weighed against each other to reach a conclusion. I propose that, if this conclusion is at odds with the preference of the participant, it must then be taken back to the participant for further discussion. Not implementing this aspect of 'ethics in practice' goes against social science ethics, that we must avoid doing long-term and systemic harm, both of which come through erasure and silencing. We must also remember that 'any research project has the potential to further disenfranchise vulnerable groups' (Breckenridge, James & Jops 2016, p.169), and that ignoring the wishes of participants regarding their identification due to a Western model of ethics can cause further damage to these groups.

In this study, I am honouring my participants' requests for identification or de-identification. As such, those participants who requested they be identified will be identified, as per their stipulations and guidelines, in the written exo-autoethnographic portion of this dissertation, which will delve deeper into the stories of participants than an analysis chapter can. No names will be identified in the data analysis chapter, for the sake of clarity and to retain focus on the thematic analysis and discussion.

CHAPTER 5: RESEARCH DESIGN

A qualitative and quantitative approach was taken to the exo-autoethnographic method (requiring multiple analyses and forms of analyses) of this study to better examine the interview and survey data from a thematic analysis and statistical approach. The use of interviews and surveys allowed me to compare the finding in both methods, as well as to make a comparison between my qualitative and quantitative data analyses, which provided insight into the attitudes presented in the interviews and explained the questionnaire results.

This formal stage of analysis provided an in-depth discussion of the intergenerational trauma and impact of the war on veterans and family members, as well as statistical information that was used as a separate analysis from the thematic data, and as comparison between the thematic and statistical results.

The analysis of this study was iterative, as ethnographic research commonly is; this stage involved 'sifting for patterns, developing new matrices, and applying statistical tests to the data' (Fetterman 2010, p.112).

Fetterman notes that 'qualitative data do not have to be quantified to be meaningful or legitimate. Descriptive passages are as persuasive as a *p* value in ethnography, if not more so' (2010, p.108). To clarify, the qualitative data from this study come from interviews, whereas the quantitative analysis was conducted on survey responses. As such, this study provides a well-rounded approach to the question of intergenerational trauma transmission and its impact.

5.1 Interviews

Of the 12 interviews, 11 face-to-face interviews were conducted in 2017 in Russia and 1 interview was conducted via Skype in 2017. Seven of the interviews were conducted with veterans of the Soviet–Afghan war; two interviews were conducted with children of

veterans of the Soviet–Afghan war; two interviews were conducted with wives of veterans of the Soviet–Afghan war; and one interview was conducted with a mother of a veteran of the Soviet–Afghan war.

The semi-structured interviews provided me with the opportunity for an in-depth discussion of intergenerational trauma and the impact of the Soviet–Afghan war on veterans, children of veterans, and family members of veterans (the collection of this information provided a holistic representation of the impact of the war on the collective).

During the interviews, I attempted to triangulate (Fetterman 2010, p.94) participant comments regarding trauma by asking questions about their daily experiences without using the word ‘trauma’ specifically – that is, I wanted to confirm if their daily life showed signs of trauma without prompting them with the word ‘trauma’, and/or despite them saying otherwise (that they weren’t traumatised). To do this, I asked questions about their experiences and reactions to stimuli (fast movement, noise, etc.) in their daily lives. This aimed to get a better understanding of their relationship to trauma and its impact, regardless of their personal commentary on trauma more generally. This was important given the sensitive nature of the topic in Russia and its historical relationship to individual trauma and mental illness (see collective trauma discussion in Chapter 2, section 2.2). This issue surfaces in the cultural and social standards that can dictate the rejection or denial of personal trauma, and can lead to participants answering in ways that can be seen as ‘expected’ of them – or more aligned with – those cultural and social standards.

All interviews that took place in Russia were conducted in the Russian language, with the exception of one interview, which was conducted in a mixture of Russian and English. The Skype interview was conducted in a mixture of Russian and English. All interview transcripts were translated from Russian into English before data analysis. All data analysis was conducted in English.

Each interview transcript was analysed thematically (Attride-Stirling 2001; Boyatzis 2009; Smith 2015; Tuckett 2005), a process that involves the identification of themes through the ‘careful reading and re-reading of the data’ (Rice & Ezzy 1999, p.258). The process began with an analysis of each transcript, which was then coded in a Word document and interpreted for patterns that emerged within the content. Analysis refers

to 'the systematic examination of something to determine its parts, the relationship among parts, and their relationship to the whole' (Spradley 1980, p.85). This analysis was performed to uncover cultural patterns and discover themes. Culture refers to patterns of behaviour and knowledge that people have learned or created; it is an 'organization of things, the meaning given by people to objects, places, and activities. Every human society is culturally constituted' (Spradley 1980, p.86). Patterns on their own do not equal themes, but a collection of patterns does. During the analysis, I had to make choices 'between genuine patterns of behaviour and series of apparently similar but distinct reactions' (Fetterman 2010, p.93). In the beginning of my search for themes, I identified all themes that appeared in the data, no matter how broad their application might be. Once a theme was discovered, I began to look for other specific instances of this general principle, and from this, a running list of major and minor themes was created during the data analysis.

First introduced into the social sciences in 1945 by anthropologist Morris Opler, cultural themes are used to 'better understand the general pattern of a culture by identifying recurrent themes' (Spradley 1980, p.140). Opler defines a theme as 'a postulate or position, declared or implied, and usually controlling behaviour or stimulating activity, which is tacitly approved or openly promoted in a society' (1945, p.198); Spradley defines a theme as 'any principle recurrent in a number of domains, tacit or explicit, and serving as a relationship among subsystems of cultural meaning' (2016, p.141). Spradley writes:

The concept of theme has its roots in the general idea that cultures are more than bits and pieces of customs ... It consists of a system of meaning that is integrated into some kind of larger pattern. Many anthropologists have sought to capture this larger pattern with such concepts as values, value-orientations, core values, core symbols, premises, ethos, eidos, world view, and cognitive orientation (1980, p.141).

While themes are patterns making up a culture, a cognitive principle is the ideas that people within a culture or a community believe as true or valid; 'it is an assumption about the nature of their commonly held experience' (Spradley 1980, p.141).

Spradley explains that most themes remain at a tacit, rather than explicit, level of communal knowledge, meaning that people do not express the themes easily, 'even though they know the cultural principle and use it to organize their behaviour and interpret experience' (1980, p.143). This is important for social scientists to understand, and to be aware that some themes may be taken for granted within the community, as their knowledge of the themes and their meaning is so ingrained that members of the specific community may 'seldom find a need to express what they know' (Spradley 1980, p.143), meaning that it is our job to extrapolate their meaning.

'The assumption underlying content analysis is that the frequency (or lack thereof) of a term or topic reflects its relative importance to the group or culture' (Spradley 1980, p.104) and, in following this assumption, major themes were transferred into an Excel spreadsheet and calculated based on prevalence, with the 14 most frequent themes selected for in-depth analysis.

5.1.1 Issues in data collection

I began contacting potential participants in early 2016. Despite this, I was not able to secure a single interview with a representative from the leading organisations related to Soviet–Afghan war veterans affairs, including the Warriors–Internationalists Affairs Committee (Содружество Независимых Государств Комитет По Делаам Воинов – ИНТЕРНАЦИОНАЛИСТОВ при Совете глав правительств государств – участников Содружества), and the War Veterans Committee (Международный Союз общественных объединений «Общественный Комитет ветеранов войн»), who were willing to speak with me about the topic of my PhD research, including sending me any potential leads to find veterans willing to participate in my study. This proved to be a setback to my fieldwork and data-collection, as I was not able to secure leads for interviews in a timely manner for fieldwork, originally planned for mid-2016.

This issue reflected the ongoing sensitivity about discussing the Russian invasion of Afghanistan (1979–89) in Eastern Europe. This was remedied during my eventual fieldwork in Russia, as I was able secure an interview with Tatyana Gennadyevna Knyazevskaya, the head of the Ulyanovsk regional public organisation, Union of

Families of War Dead in Afghanistan and Local Military Conflicts (Ульяновская областная общественная организация «Союз семей военнослужащих погибших в Афганистане и локальных военных конфликтах»). From this interview, Tatyana Gennadyevna became my main contact and fixer, and I was able to expand my interview contacts through her introductions, building a larger pool of participants for my study.

5.2 Questionnaires

A survey targeted at children of veterans of the Soviet–Afghan war was created in 2016 and was made available in both English and Russian languages. The survey included 37 questions; a mix of closed and open-ended, multiple-choice, Likert-scale, and preference selection questions were used. The survey was developed using my personal knowledge of the culture, impacting cultural terms, expressions, how I phrased the questions, and the actual content of these questions, as well as following Phoenix Australia’s PTSD Guidelines to inform questions related to emotional, behavioural, and personality features and symptoms (*Australian Guidelines for the Treatment of Acute Stress Disorder & Posttraumatic Stress Disorder* 2013).

The survey utilised intuitive navigation, and was created and distributed using Google Forms.

All questions were coded using IBM SPSS Statistics software, (version 24.0.0.1).

Fetterman argues that questionnaires produce both misinterpretations and misrepresentations of their participants, as ‘many people present an idealized image of themselves on questionnaires, answering as they think they should to conform to a certain image’ (2010, p.56). This issue is something scientists do not have control over but must take into account during data analysis and extrapolation of the data, as well in the overall limitations of the method. Furthermore, this issue does not solely impact questionnaire data collection, but even face-to-face interviews, as was discussed in section 5.1 of this chapter.

Sociologists working with smaller sample sizes will use nonparametric statistics (which include both descriptive statistics and statistical inference) rather than parametric statistics (which assume that sample data come from a population that follows a probability distribution based on a fixed set of parameters, and requires a large sample for statistical significance) because ‘the assumption of normality is not met, and outcomes are frequently categorical or ordinal variables’ (Fetterman 2010, p.105).

In the quantitative analysis, I focused largely on descriptive statistics (which quantitatively describe or summarise features of a collection of information for analysis) rather than inferential statistics (which infer what the population might think from the sample data) because my data sample was too small for the latter. However, an analysis of the descriptive statistics was conducted to make sense of the quantitative data and what they show, in order to understand if an observed difference between groups was dependable or not (which is part of an inferential data analysis). Here, it is important to note that I was careful not to infer causality from statistical correlations, because correlation does not equal causality.

5.2.1 Issues in data collection

This survey targeted children of veterans of the Soviet–Afghan war. Given the sensitive nature of my research, I initially had difficulty in obtaining an adequate data sample. As noted above, the topic of my research was culturally sensitive, of which I was aware going into this project. However, I did not anticipate how reserved the Russian and Ukrainian communities would be to this project. The first round of distribution of the survey was targeted at Russian and Ukrainian populations for practical reasons, given the size of the former Soviet Union (which was formed from 15 republics); as well as due to my familiarity with both languages, given my Russo-Ukrainian heritage.

My poor return rates for the questionnaire related not only to the sensitivity of the topic, but to an ‘innate’ distrust of people by communities in the former Soviet population. This issue also relates to socialisation and norms in the interviews, and how these tacit cultural norms are reflected in the questionnaire responses (this is just one connection between the data in the interviews and data in the questionnaires).

The survey was initially distributed to dozens of universities across Russia and Ukraine; the second wave of outreach focused on those Russian and Ukrainian universities not contacted in the first round. A third wave of outreach included contacting Ukrainian and Russian diaspora organisations in Australia and the United States. Despite the outreach over a three-month period, the response rate did not yield an adequate data sample, and I had to revisit my method of survey distribution.

The survey was then promoted through other channels, including via Facebook and Twitter paid advertisements, social media, as well as directly in Ulyanovsk, Russia, during fieldwork. Due to the original data collection setback, I had to make the survey available to potential participants for an unprecedentedly longer amount of time than first anticipated; it was publicly available for almost 12 months.

'The credibility of survey findings (hard copy or online) depends on the response rate' (Fetterman 2010, p.57); as my survey response rate was low (discussed further in section 5.2.2), it is important to reiterate that the focus of the quantitative analysis was descriptive, and did not assume causation from correlates evident in the data. Furthermore, I must account for bias present within the survey, by virtue of a specific type of person being more inclined to respond to an online questionnaire. This is vital to note as the target population of my research, specifically in relation to the questionnaire, was already sensitive to the topic. As such, I note that there is potential for a wider range of views on the topic.

5.2.2 Survey response rate

The survey opened with an information sheet and ethical approval information. The first question of the survey was a screening one, confirming if the respondent was a child or family member of a Soviet–Afghan war veteran. The valid response rate relates to respondents who qualified to participate in the survey through this question; responses that did not qualify based on this screening question were kept in the system and included by the survey program in its final response tally.

Table 1. Response rates to survey

Russian language survey	
Total responses	17
Total clicks on survey	111
Response rate	18.9%
Valid responses	10
English language survey	
Total responses	8
Total clicks on survey	132
Response rate	10.6%
Valid responses	5
Overall (Russian and English surveys)	
Total responses	25
Total clicks on surveys	243
Response rate	10.3%
VALID RESPONSES	15

Note: It is impossible to know how many people found the survey and read the survey overview/description before clicking on the survey link to take them to the survey. The rate is calculated based on clicks on the survey link, taking the user to the survey front-page, who then either proceeded to respond to the survey or exited the browser.

5.3 Ethical considerations

As discussed in Chapter 4, section 4.2 ‘Ethics of de-identification in social research’, I came across issues present in the process of de-identifying marginalised participants, or participants who requested to be identified, in the publication of social research. As my research was mixed methods qualitative and quantitative, these ethical considerations only relate to interview participants. As outlined previously, my decision has been to honour my participants’ requests for identification or de-identification. As such, those participants who requested they be identified will be identified, as per their

stipulations and guidelines, in the written exo-autoethnographic portion of this dissertation, which will delve deeper into the stories of participants than the analysis chapter. No names will be identified in the data analysis chapter, including for the sake of clarity, to retain focus on the thematic analysis and discussion.

CHAPTER 6: DATA ANALYSIS AND RESULTS: QUALITATIVE ANALYSIS – INTERVIEWS

6.1 Introduction

The qualitative analysis of interview data focuses on 12 interviews conducted in 2017. The data analysis focuses on 14 major themes identified in the thematic analysis of interview transcripts. Quotes from the interview participants are provided along with participant identification codes, for the sake of clarity, with a deeper delving into the stories of participants in the exo-autoethnography (chapter 9).

Each thematic discussion provides the number of participants (and participant codes) whose interviews revealed that specific theme.

The themes are presented in an alphabetical order only.

Some themes in the following discussion, though not directly related to intergenerational trauma transmission, provide moments of crystallisation, otherwise known as ‘counterintuitive conceptions of reality’ (Fetterman 2010, p.110); these insights into the lives and affect of veterans can be helpful for researchers to better understand this community, and to consider how this information can inform our research and, potentially, influence the approach to the advocacy of psychological treatment of veterans and their families, who are impacted by combat-related trauma and trauma transmission.

Note: Some participant data (interview quotes) highlighted more than one theme in the analysis. For purposes of clarity and rigour, some interview quotes will be presented in more than one theme in the Analysis and Findings section of this chapter (section 6.4). This repetition is minimal and is not an oversight.

6.2 List of participant codes

Table 2. List of participant codes

P1	Veteran, two tours
P2	Veteran, two tours
P3	Veteran, one tour
P4	Veteran, one tour
P5	Veteran, one tour
P6	Veteran, one tour
P7	Veteran, one tour
P8	Wife of veteran (killed in action)
P9	Mother of veteran (killed in action)
P10	Wife of veteran (one tour)
P11	Son of veteran (one tour); joined the military, also served in Afghanistan during the United States invasion, 2001–present, two tours
P12	Son of veteran (one tour); joined the military

Key: P = Interview Participant;
No. = Interview Participant number

6.3 List of qualitative themes

1. Alcohol abuse post-combat
2. Child abuse
3. Denial of trauma
4. Domestic violence
5. Feelings of injustice and unjustness (community backlash)
6. Finding belonging and/or seeking approval/control
7. Machismo/patriarchy

8. Makeshift group therapy
9. Misconceptions of trauma and PTSD
10. Patriotism
11. Silence, secret-making, and isolation
12. Trauma
- 12.1 Intergenerational trauma transmission
13. Violence outside the home
14. War and identity formation

6.4 Analysis and findings

6.4.1 Alcohol abuse post-combat

The theme of 'Alcohol abuse post-combat' presented in six observations, including from P1, P2, P4, P7, P10, and P11. Four participants were veterans of the Soviet–Afghan war; one participant was a wife of a veteran of the Soviet–Afghan war; and one participant was a child of a veteran of the Soviet–Afghan war.

Alcohol use was described during the war to 'dull' the impact of traumatic experiences in combat, including loss of comrades, by all research participants who have had combat experience in the Soviet–Afghan war of 1979–89. However, this theme specifically relates to the use of alcohol as a 'means to forget trauma' or to 'deal with' the trauma transferred into life outside the military and combat. This theme was observed in four veteran interviews for this study (some directly experiencing issues with alcohol abuse post-combat, and others discussing the issue more generally in relation to veterans of the Soviet–Afghan war); the fifth participant, a wife of a veteran, confirmed his alcoholism following the war; and the sixth participant, a child of a veteran

of the Soviet–Afghan war, commented on his father’s ongoing issues with alcohol following combat and throughout his life to date.

P1 discussed that alcohol and even drug abuse were rampant in veteran populations; he noted that he, too, experienced some alcohol dependence following his tours of Afghanistan. Presenting this substance dependence as a normal part of returning home following combat, P1 connected this theme with issues around resettling into ‘normal’ life, and how the war continues to destroy even after a soldier, now a veteran, is removed from combat (in this case, P1 discussed how these issues destroy families):

Everything that was seen there, after it [pauses] begins to germinate, those seeds that were implanted, they then sprout in peaceful life. You start becoming aggressive, I don’t know. The bulk goes through this. The majority drinks, the majority [pauses] ahh, in general, there are very many people without jobs, and Chechen veterans who were in Chechnya, and those who were in Afghanistan, those who are unsettled, those who have problems in the family, lots of families were destroyed because of this.

P2 confirmed the use of alcohol within the military to dull traumatic experiences:

... frankly speaking, we dulled [memories and pain] with vodka ...

[Pauses] How long, it’s not a secret, but when your comrades perished, it was very difficult to handle. When you collected them yourself, bone-by-bone. Saw all of this yourself: what blood is, what bones are. Such things you only experience yourself, and it’s very difficult for your psyche to handle/cope with this.

Even our commander would say, ‘Is there alcohol?’ [and] for three days, or two days ‘we’re not flying’. You dampen it, drink with your combat comrades, quietly, calmly, [pauses] and it somehow dulls, muffles [the trauma and pain], and then again you go into battle.

P2 stated that he did not continue to use alcohol as a tool to dull the pain and trauma of combat following his two tours in Afghanistan. 'Ah, no, this practically never happened to me. I easily endured this.' However, this comment contrasts with his difficulty in dealing with the trauma during the war and using alcohol to dull this trauma and pain at that time.

P4 connected alcohol use following combat as a way to deal with anxiety and trauma, which he described as something all veterans went through, suggesting a normalisation of the issue:

What trauma? After the war, all of us went through alcoholism, through anxiety [nerves], through everything.

P4 did not call his use of alcohol post-combat 'alcoholism' and stated that he was not an alcoholic: 'Alcoholism, we [I] didn't have. But vodka, we did drink quite hard.'

P10 is the second wife of P4 and discussed his alcohol use during our interview, contradicting P4's position that his use of alcohol was not alcoholism. P10 connecting P4's use of alcohol to his combat experience, however, left the possibility of a predisposition to substance abuse open. Furthermore, she noted that P4 no longer has issues with alcohol as he had previously. She additionally discussed problems that his previous alcoholism caused to their children and family life.

P10: 'Actually yes. I somehow let it pass by, seemingly everything has moved on [got better, hence why she did not remember it immediately], but for a very long time, he drank, he was very drunken, he drank for a very long time, and he drank a lot. He could drink for a week straight.'

Anna: 'Would you call this alcoholism?'

P10: 'I [short pause]. Alcoholism. Uniquely alcoholism. I don't know the reason. It could be hereditary because his father also drank, but it all could be aggregated, that is one on top of the other [hereditary

alcoholism; experience in the war]. When he started to drink, to be honest I do not know, because when we met he already had such periods [drinking days on end], so I can't say exactly when [it started]. But it was very hard.

'His friends, when they met up, would sit in the evening and drink well, but in the morning, that's it [no more alcohol]. But he [P4], if he went [to drink], he went well [that is: if he drank, he drank a lot, and kept going].'

Anna: 'Does this still happen? Does he still drink like this?'

P10: 'Now, no.'

Anna: 'When did this stop?'

P10: 'When he saw white slippers in the hospital. When he ended up in the hospital, because they put white slippers on the deceased. They threatened him: "A little more and you will be there [also dead]."'

Anna: 'Because he drank so much?'

P10: 'Yes, yes.'

Anna: 'How did this impact his son and your daughter?'

P10: 'Obviously negatively. To be around a drunken person is impossible. He would also be quite explosive. He is normally quite explosive, but in a drunken state, it is even worse, more pronounced. Then when he drinks for a week, the days and nights get mixed up, so he can go in the night for a bottle, so it was hard. With a person like that, it's hard.'

Anna: 'If I may ask, did he get violent?'

P10: 'No. In this regard he always watched himself. That is, he never hit, he never crushed [broke] anything. [Giggles]. But this did happen.'

Anna: 'What do you think about this? What is it like to live with a veteran, and do you think there is an impact on the family?'

P10: [Exhales audibly] 'We live, knock on wood, seemingly okay, now [laughs a little] when he stopped drinking. But it's understandable that it [war] impacts the psyche, that is, the person becomes more short-tempered/explosive, more aggressive, I would say.'

P7 discussed alcohol post-combat in relation to his comrades, and connected the issue of substance abuse to the simultaneous changes in environment for veterans returning home from the war at a time of a changing Soviet Union – of it coming to an end, which impacted how people lived:

P7: 'When Afghanistan ended, the Soviet Union ended, too, and there was a moment when some didn't know what to do. I went outside to trade, pretty much the whole community went to trade [sell things]. Not everyone was able to get through this [so some died].'

Anna: 'What about any vets who died from alcoholism?'

P7: 'These, too. This is the group that couldn't get through the changes.'

P7 spoke about a friend he lost to a suicide by hanging, stating that this suicide was related to the culmination of combat experience, trauma, returning home, and a changing social and political environment in Russia.

P11 is a (now-adult) child of a veteran of the Soviet–Afghan war. Following the war, the family emigrated to the United States, where P11 eventually joined the military 'to pay a debt' to the United States, during which time he served both in Afghanistan and Iraq. P11 discussed the nature of his father's alcoholism following the war, which continues to the present, and how it impacted the family. P11 was confident that his father's alcoholism was related to his combat trauma during the Soviet–Afghan war.

Quote one:

[My father] just had a hard upbringing, and then the military didn't really help out, so he's an alcoholic, functioning alcoholic.

He has a job, he's actually a long-haul truck driver, I think that's what actually keeps him healthier and still going, because he's forced to not [drink].

But as far as him being a healthy, productive member of society, I don't think he is.

Quote two:

I don't think he'd ever admit that it was linked to that [his behaviour, alcoholism linked to trauma from war or experiences at war]. Um [pauses] he didn't really have any other traumatic [events] or anything crazy happen in his life, besides those two years [during Afghanistan service]. Besides his father dying early, it seemed like he had a normal childhood, from what I remember, his siblings and his mum, they were normal people for what normal is, or was, in the '90s when my memories were formed. That's why I'm pretty certain that the main stressor in his life that kind of made him, I don't know, not be living, I guess, positively is that [service in Afghanistan].

Quote three:

It was a really weird, chaotic [home environment] because you knew that, it was tense. I guess tense would be the best word because you knew something was going on, or the moment Dad brought alcohol home, because I mean, you kind of knew it was there, because sometimes he wouldn't do it openly, you know? And even then it was very tense, there was a lot of underlying conflict that we only saw when he lost control, whether that was because he was drinking or maybe because he was just tired, because he wasn't always, it wasn't like he was always drunk, there were times when he was sober, but even then he was always short [in

temper with Participant P11, his sibling and mother], and then it was really tense, and you were walking on eggshells [long pause].

Quote four:

Our Fridays and Saturdays were always the same: Dad comes home, he gets drunk [on Friday]. Saturday he's continuing [drinking] and that's a really crappy day, so I remember a lot of day trips that we went [on] by ourselves [mother, P11, and brother] so Dad could do his own thing, and Sunday we'd go to church and he [Dad] would sleep in, and Sunday afternoon we'd come back and it's a fifty-fifty, 'cause Dad could be happy because you know he has to sober up, he knew that, 'cause he has to go to work, so "Is he going to be happy, or is he going to be grouchy?" 'cause you know he's either hungover or the events of the weekend are just not to his satisfaction.

Subthemes connected to alcohol abuse post-combat for participant P11 include:

- Sibling death: drug or alcohol related
- Father is an alcoholic/has had issues with alcohol and/or other drugs
- Father's alcoholism leads to broken family
- Got into alcohol himself
- Stopped focusing on school
- Resented alcohol because of father's alcoholism
- Issues with alcohol (fights/car accidents)
- An alcoholic himself
- Father's alcoholism connected to abuse of family
- Connects drug and alcohol abuse with abusive, chaotic home environment, and traumatic childhood
- Substance abuse: has a drug addiction

These themes can also be collectively described as hereditary substance abuse, or substance abuse that runs in the family. These subthemes additionally support the

possibility of a cumulative effect of combat experience and hereditary substance abuse on P11 father's ongoing issues with alcohol, potentially triggered by his traumatic experience during the Soviet–Afghan war.

6.4.2 Child abuse

The theme of 'Child abuse' presented in two observations, including P11 and P12. Both participants are children of veterans who described child abuse within their home perpetrated by the veteran. Child abuse, and domestic abuse more generally, are not readily seen as violence within the former Soviet Union, specifically in Russia and Ukraine where, in the former, domestic violence was decriminalised for some offences in early 2017. This disparity between Eastern Europe and the West must be noted, because child abuse was a question for most participants. However, what would be considered child abuse in the West might not have been considered child abuse, or violence, by the participants in this study, which may explain the low number of participants discussing specific instances of child abuse. It is important to note that all the children of veterans in this study admitted that child abuse was present in their home and inflicted against them, whereas none of the veterans did. Given the particularly sensitive nature of this theme, it can be a reality that not all perpetrators of physical and/or psychological violence against a child would admit to this violence for an academic study.

It is important to note that P11 is US-based (he emigrated from Eastern Europe as a teenager with his family) and P12 is Russia-based. This information might account for the difference in their respective comments in relation to violence, and how they viewed child abuse. However, both participants presented the subtheme of 'child abuse perpetrated under the guise of discipline'.

The 'child abuse' theme is intrinsically linked with the theme of 'Domestic violence', which will be discussed in section 6.4.4.

P11 discussed the physical and psychological abuse that his father inflicted on him and his younger sibling (middle child), and a tense and unpredictable home environment

that he described as 'walking on eggshells'. P11 described the psychological abuse as 'mind games' played by his father, and scenes of child abuse that were perpetrated under the guise of 'discipline':

He [pauses], yeah, he was violent. He [short pause] beat on us a bit, more me than my other brother ...

You called it 'walking on eggshells' and it kind of threw me off 'cause that's kind of how it was. You just like, you didn't want to get in trouble, 'cause Mum would call Dad, so if Mum yelled or called too loud or anything and Dad could hear it, if he had an impression – and I notice I do this, too, actually – his first impression is it. You could tell him 'Hey, no, you misunderstood, you weren't even in the room,' and you know like, 'That's not how it played out, everything is good, you know, we just got excited and somebody was surprised, or we're laughing, joking,' but if he thought something negative happened, and he thought he needed to discipline, that's kind of where it came out, because it was almost like an outlet for him but he called it discipline.

On psychological abuse, P11 described the following scenes of continued and persistent neglect from his father:

As far as like, psychological [abuse] and mind games, I don't think they really affected me that much [pauses] um, most of his [abuse] towards me was physical [pauses]. I mean the emotional, I think it just comes as an attachment to the physical, because you know the emotions are there, you should be feeling love but you don't, you turn to your Dad for something else, like, I remember one time he worked nightshift, but instead of coming home and sleeping when we were at school, he would probably drink or hang out for whatever, and then he would be sleeping right before work when we were home. Which never made sense. But he set up his schedule like that. And one time [short pause] he had to take me to the doctor's 'cause I got into a fight with a friend and I ended up breaking my hand and he [father] was *not* happy about that, um [long pause]. He tried just calling the emergency for what to do, but they were

like, 'You need to bring him in because we can't do anything,' so anyways he wasn't happy that he had to wake up, take me, and when we came back he told me, 'Take off your cast and do the dishes,' and I was like, 'It's [younger sibling's] turn, we just do it that way 'cause it's fair,' and he was like, 'I don't care, you're doing them.' And that's when I was like, man it's kind of harsh, you know, 'You don't seem to care.'

And then there was another time when we were playing like hide-and-go-seek tag, and I tripped and face-planted on a rock, and he [father] had to take me to the hospital again, he was not happy about that either. And I don't know if it was just like [pauses] him being tired, or him being the way that he is, but like that's kind of like the pattern: don't want to bother him when he's sleeping or doing whatever he's doing.

In a sense, I guess you just didn't want to get in the way.

'There was never turning to my dad for advice, for help, for nothing. I always went to my mum. Pretty much, I avoided him as much as I could.'

Another scene described by P11 suggests an acquiescence on the part of an abused child to let his father abuse him physically/verbally to avoid harsher punishment:

So it was more like his way or the highway, and it's best to just let Dad be and if Dad's there, kind of agree and go on with it [pauses] because it's better for him because, 'He doesn't like to be mad, we don't like to get him mad,' so we kind of started making excuses as well, um and 'cause it's Dad, that's it.'

P11 described scenarios that suggest the presence of caretaking, that is a child (the participant) protecting his younger sibling and his mother from abuse perpetrated by his father:

Anna: 'Do you remember any moments when you were a kid, when you hid from your father or you sort of became scared when you'd hear him coming to the front door, or his car pulling up? Did you ever have moments like that?'

P11: 'Ahhh [exhales], no. Mainly because I have a little brother that I always watched out for. And then it's like, me and my mum were very close so it's like hiding was not an option, it's like, if I knew something was going on, I would just hang out with my mum and hope that, you know, maybe he would just not [attack] because we're there.'

P11 described the difference in experience for his youngest brother, who never lived with his father, and him:

Oh, he's [pauses] he's totally [pauses] different. I mean, he's surprisingly healthy. One, because he wasn't exposed to the same thing that, you know, my dad [pauses] being there was.

P12 described scenes of experiencing physical violence from his father, also perpetrated under the guise of discipline. This thought process seems to have transferred to P12, as he stated that some violence against a child was 'okay'. This transferral may be linked to his belief as a child that this violence at the hands of his father was okay, normalising child abuse.

Mmmh. I consider it's okay to, a little bit [be physically violent], you know? [Does soft exhaled laugh, smile]. But everything needs to be moderate. That is, when I was incorrect, it was okay to give me a hit on the back of the head or a slap. This is violence, but, again, it's a little; not so much [abusive].

The subtheme of 'child believes violence perpetrated against them is okay' further resurfaced with the following quote, when P12 stated that the abuse he experienced at the hands of his father was 'reasonable':

... his aggression, which was often aimed at his family and was within the family, this was difficult to digest for, in the first place, my mother. As I am a male, it was a little easier for me to deal with ... the love of a child is stronger for the mother than the father; you feel sorry for your mother

[when she is abused] and this was difficult for me to deal with. But, if you take just me, it was reasonable.

P12 described a scenario that led to physical violence:

Anna: 'Was your father aggressive?'

P12: 'Yes, yes, yes. I believe ... but, I'm not ready to concede one-hundred percent that this was an influence of the army. Perhaps, this was just his character. So, to say, this is definite because he was in the service in the war, and that is why he was very aggressive, I do not think that is the case. Again, [the army] left its imprint [on him] however, not totally. I believe this.'

Anna: 'Were there moments when everything was okay, and then your father goes from zero to one hundred about something?'

P12: 'Yes, [laughs slightly as he speaks] yes, yes. [He] blows [up] like a volcano.'

Anna: 'Why do you think this happened? What set him off?'

P12: 'Ah, ah, you know, out of nothing. Sometimes it's, you know, a dirty cup [left somewhere], sometimes it's, you know, long hair [if P12's hair grew a bit too long], it doesn't matter what, it just happened. And, nobody knows why [he explodes] – how it happens and why it happens. Wrong time, wrong place, maybe [pauses].'

6.4.3 Denial of trauma

The theme of 'Denial of trauma' presented in four observations, including by P1, P2, P6, and P11. Three participants are veterans of the Soviet–Afghan war; one participant is a child of a veteran of the Soviet–Afghan war.

This theme is linked with the theme 'Misconceptions of trauma and PTSD', which will be discussed in section 6.4.9, suggesting that this denial might in fact be the result of a misunderstanding of what trauma is and what it means, and that being traumatised is not a poor reflection on the idea of masculinity. This denial may additionally be linked to the image that participants want to project of themselves, and could be connected to informal techniques of social control.

Denial of trauma as a theme was identified through participants contradicting their stories, that is, describing trauma that they have experienced and continue to experience the impact of; however, when questioned directly if they are traumatised, either stating that they are not, or avoiding or side-stepping the question in totality.

P1 described instances of trauma during his two tours of Afghanistan, including witnessing torture and mutilation, executions, death of comrades, and his change in the perception of people and his environment. A traumatic scenario was discussed in the following interview excerpt with P1:

Anna: 'This was the first person you saw killed. How did this change the war for you?'

P1: [Long pause] 'War, no. I was in shock. Severe shock. To this day, I cannot look at a corpse [pauses]. To this day.

'I [pauses], when I served in Kabul I saw many corpses [pauses], I transported them to the morgue by helicopter, and, you [are supposed to] get used to it, to this day I cannot get used to it.

'For me, this is a scary thing, no matter how banal that sounds, for me it is scary. It was a shock, the first time, of course. It was a person, and then he is lying in blood, and then the person isn't there anymore [long pause]. The first time I saw this. But this didn't happen a lot. I threw up the first time, I was sick. Then the shock. When we came back to Shindand, we drank vodka for a long time.'

P1 described how the war made him see people differently, as 'pieces of meat' rather than human. When questioned further in relation to his perception and trauma, P1 did not answer two questions, and side-stepped another question in relation to the topic:

Anna: 'When did you start looking at people differently? You've previously told me you saw people as pieces of meat.'

P1: [Long pause, no answer].

Anna: 'When did this start for you? Which event or trauma did this?'

P1: [Very long pause] 'Nothing changed, Anna this was a job, this was service. In the big scheme of things, nothing changed. It all stayed with you, somewhere inside, in the subconscious. But in the big scheme, we lived the same and we served the same, we drank vodka the same.'

P2 stated that he was not traumatised by his experiences in combat, suggesting that his family waiting for him upon his return was a factor:

I didn't have this. I didn't notice anything. In terms of moral [psychological] trauma, my family waited for me.

P2 then went on to describe scenes where everyday sounds and objects triggered in him a fear response, suggesting that he might have symptoms related to posttraumatic stress disorder, including experiencing nightmares and dreams related to combat:

Anna: 'Did the war change you?'

P2: 'In my character, I became, how do I say, more judicious [sensible, reasonable], more mature, more tough [hard]. Any softness that remained in me disappeared. War hardens a person. He becomes stern [severe] just [fair].

'I was afraid of cars. The year that I was there, I became unaccustomed to cars, because they practically don't exist on airfields. And when I was

crossing the road, when I came [back] for a vacation [leave] to see my parents, and if a car was breaking for pedestrians, this scared me. It was something savage, I would turn around in fear. I didn't fear bullets as much as I feared the screech of a breaking car.'

Anna: 'Were there any other situations, such as anxiety, or other negative reactions to loud noises; were there any reactions that seemed out of the ordinary for you?'

P2: 'No, I can say that nothing like this happened. But the one thing I can say is that I remember I dreamed dreams with shooting. Gun fire, guns ... this memory remained.'

Anna: 'Did Afghanistan leave an imprint on you?'

P2: 'Of course. Individually on each person.'

'I don't know who else you've interviewed, but it was much harder for [young] soldiers to tolerate [the war]. Their psyches were practically broken, in that they were eighteen-years-old, or nineteen, right? We were a bit more mature, some five years older than them. We were more held together, we went through a specialised school, we wore boots for four years [military training]. For us it was a little easier; for them it was harder. But, frankly speaking, we dulled [memories and pain] with vodka.'

P6 stated that he did not have issues with mental health, which related specifically to PTSD, again suggesting that trauma avoidance was linked to family life; however, he conceded that his behaviour had changed:

P6: 'I didn't have problems, so to speak, related to posttraumatic stress syndrome. The question is, if the person adapts quickly [upon their return from combat] then the rule is there isn't PTSD. I was always busy. Then I married.'

Anna: 'Did you have any psychological or emotional issues when you came back from the war in Afghanistan?'

P6: [Exhales] 'Problems [says the word as a repetition while considering the question], [exhales]. I became more irritable. Because of this, sometimes, I didn't hold myself back in front of my commander, which may have impacted my career.'

P6 then described a scenario in which he inadvertently suggested that he did have symptoms of PTSD:

You try to break the wall with your head, so to speak. You leave reality, which is one of the symptoms of PTSD, I have been reading about this. It is the departure from reality.

I now see unjustness that I didn't notice before.

Near the end of our interview, P6 became emotional reciting the lyrics to a war song, following which he expressed that he did experience triggers that sent his mind back into combat:

Anna: 'You do not think there are any remnants of trauma within you following the war?'

P6: 'No. I wasn't in the most difficult situation, and secondly I left after one year.'

P6 recites song lyrics from the Aleksandr Balev [Александр Балев (Князь Балев)] song, 'Night Talk (Valera)' [Ночной разговор (Валера)]:

'И хотя [pauses] от пули не таясь,

'Ночью подышать выходим [pauses] в сквер.

'Черная восьмерочка твоя [voice quivers, holds back tears, eyes are watering, red]

'Мне [pauses, voice continues to quiver, almost breaks] напоминает БТР.'

English translation:

And though from a bullet not concealing,

At night we go out to the park.

The black eight of yours

It reminds me of an APC [armoured personnel carrier].

'Sometimes, an association happens, I don't know, sometimes something happens, and you remember. Those stronger, those more realistic ... there are those who've lost an arm or a leg, touching them is dangerous, asking them questions about [the war].'

P11 is a child of a veteran of the Soviet–Afghan war, and said his father would never admit to his alcoholism and that other issues manifested following combat were in any way related to his combat-related trauma:

Anna: 'Do you feel there was a denial on your father's behalf about what he was going through?'

P11: 'I don't think he'd ever admit that it was linked to that [his behaviour, alcoholism linked to trauma from war or experiences at war]. Um [pauses], he didn't really have any other traumatic or anything crazy happen in his life besides those two years [during Afghanistan service]. Besides his father dying early, it seemed like he had a normal childhood, from what I remember, his siblings and his mum, they were normal people for what normal is, or was, in the nineties when my memories were formed. That's why I'm pretty certain that the main stressor in his life that kind of made him, I don't know, not be living, I guess, positively is that [service in Afghanistan].'

6.4.4 Domestic violence

The theme of 'Domestic violence' presented in five observations, including those of P1, P4, P10, P11, and P12. The theme was observed in interviews with three veterans, one wife of a veteran, and both the children of veterans interviewed for this study. The theme of domestic violence included physical and psychological abuse perpetrated by the veteran. No instances of standalone physical abuse without the presence of psychological abuse were observed; one instance of psychological violence without the presence of physical assault was observed. The veteran targets domestic violence at all members of the immediate family, including wife/partner, and children.

As per section 6.4.2 Child abuse, it is important to note that responses to questions of domestic violence are potentially skewed culturally, as domestic abuse is not readily seen as violence within the former Soviet Union, specifically in Russia, where in the former domestic violence was decriminalised for some offences in early 2017.

P1 experienced domestic violence in his family home during his childhood and adolescence, prior to his participation in the war. This participant had a difficult relationship with both of his parents, mother and father, including witnessing and experiencing domestic violence in the home. This volatile household was part of the reason why P1 left his home at age 15 to join a military academy.

P1 presented the following in relation to domestic violence of his first wife, second wife, and three children:

1st Wife

- Possessiveness of wife
- Isolation of wife
- Psychological and physical abuse

Second Wife

- Psychological and physical abuse
- Isolation of wife
- Possessiveness of wife

- Arrested for physical assault

Children

- Physical and psychological abuse
- Possessive of children
- No longer in contact with one child
- Distant relationship with other two children

P4 presented the following information (occurring post-combat, and related to his issue with alcohol post-combat) during his interview, which was supported by P10, his second wife:

- His alcoholism negatively impacted on his son and daughter
- Strangled (second) wife in the night
- He is an explosive person
- His explosive nature worsened when he drank
- Not physically violent
- Emotionally violent

P10 presented the following scenario in relation to P4's instances of domestic violence:

I think in the whole time we have been together, I remember two or three times when he awoke at night [from nightmares]. In the whole time, fifteen to twenty years we're together. Once, I woke up from him strangling me [laughs]. He dreamed of Spirits (Mujahedeen) [continues to laugh].'

Bar the above instance of strangulation, P10 explained that her husband was not violent, bar being aggressive and explosive. The following excerpt from our interview shows the connection between his psychological violence and alcoholism post-combat, inflicted against members of his family:

Anna: 'How did this impact his son and your daughter?'

P10: 'Obviously negatively. To be around a drunken person is impossible. He would also be quite explosive, he is normally quite explosive, but in a drunken state it is even worse, more pronounced. Then when he drinks for a week, the days and nights get mixed up, so he can go in the night for a bottle, so it was hard. With a person like that it's hard.'

Anna: 'If I may ask, did he get violent?'

P10: 'No. In this regard, he always watched himself. That is, he never hit, he never crushed [broke] anything. [Giggles]. But this did happen.'

P11 presented several scenes describing psychological and physical abuse of himself, his younger sibling, and his mother, including isolation of his mother by his father. Scenes of abuse were often linked with father's alcoholism and drinking. The following interview excerpt describes the family having to remove themselves from their family home for safety from the father:

Anna: 'Was there violence in the home?'

P11: 'He [pauses], yeah, he was violent. He [short pause] beat on us a bit, more me than my other brother ...

'So yeah, he was pretty aggressive towards us, and then if he would drink pretty much more than fifty per cent of the time, there would be physical altercation with my parents. I remember many a night where we had to go to somebody else's home, or my mum, like, we didn't have a phone but she knew a friend had a phone, many a time she wouldn't leave us with him, and she'd up in the middle of the night, wake us up and take us to a friend's house because she needed to call the police.'

P11 has a history of mental-health issues, including alcohol and drug abuse (pharmaceutical and illicit), and he linked this partly to the physical and psychological abuse he endured from his father. P11 linked this negative upbringing to the trauma he

experienced firsthand during his own combat tours, suggesting that the culmination of traumas made his combat experience more difficult to handle:

Anna: 'Do you think this is related to what your father did to you? That his attention was on you when he assaulted you?'

P11: 'Um, I think [pauses] looking back at it in that light, I could see that being true, 'cause, you know, people who, I never got good attention really, so I just didn't like attention. Like the only positive reinforcement or attention I got was [from] my mum. You know, everything that's good in me is probably from her. Like, she's the only person that accepted me as who I was and allowed me to be honest. So, like, I never lied to my mum, which is awesome, because, like, I never lie to my wife, I don't lie to my kids. I'm just not a liar, and that one trait right there has allowed me to be successful. You know?'

'But yeah, from my dad, it doesn't matter what you did, like eventually, the attention he gives would turn negative. Um, yeah. So, I think it's connected.'

'I've talked to other people about this and the way it seems that like my childhood or adolescence was kind of sealed, and then what the military, what *my* military experience did was magnify it, so it took everything. It could have taken, I mean I think maybe, if I was a little bit different, maybe I could have taken that little positive that I had [relation with mother] and magnified it, but, in that type of environment, um, it's very easy to go down a bad path.'

P11's middle brother died of a drug overdose at 28. P11 discussed the abuse that his middle brother experienced from his father, and that this abuse intensified when P11 was away from home in the military as he could not care-take of his brother. P11 believed that his middle brother had a mental illness, but cannot be sure; he connected his middle brother's issues to the abuse and traumas inflicted on him by his father:

Um, I mean, we were very similar. But he was a little bit more outgoing. Um, the funny thing was, every time he got in trouble he'd always take a

nap, um, and he would just disappear from the situation. Like, he'd shut down, and just like, restart. And that's what he would always do. And he did that even through his, like, like, adulthood. Which we all thought was kind of funny, like if he had any stress, he would withdraw to sleep and then when he'd wake up, he'd start over, and usually he'd just do what he did.

Um, but I don't know as far as to call it by name [a mental illness, anxiety or depression, etc.], you know, um, 'cause I never really got to know him because I was gone for like eight years [military, school, etc.].

I know he didn't really turned out, he resented me for a while from me leaving him, so my, my, me leaving him I think negatively affected him because I was the one that was between him and Dad [when Participant P11 was the one his father assaulted, this prevented or saved his brother from being assaulted]. Um, you know, there was a couple of times when my dad's aggression would go over to [Participant P11's brother], and you know, as a natural [instinct of a] brother I would jump in, um, and you know we were always together, and the way that I was brought up I always watched my little brother.

'But I don't know how, I don't know if he [short pause] did or not [have a mental illness]. My best guess is he probably had some, something.'

P11 and his mother regularly experienced domestic violence. In the following extended interview excerpt, P11 discusses the frequency of his father's violent outbursts, the intrusiveness and controlling behaviour of his father towards his mother, including isolating her, and describes his home environment as chaotic and intense:

Anna: 'How frequently did your father assault you and your mum?'

P11: [Prolonged pause] 'I'd probably say once-a-month. I mean and that's being conservative. Um, mainly because it wouldn't always get physical, but something always got broken, if something didn't get thrown or broken out of anger, you know, yeah.'

'The options are: he'd either pass out, something would break, or somebody would, you know, would put their hands on another person, usually him. There's only one time I remember where he [father] really got my mum going, where I had to stand up for him, but realistically when you're a kid you only see the, you take things at face value, when they're right in front you, you don't see or know what goes on behind the scenes, so she [mother] was probably justified, maybe protecting herself even, I don't know.'

Anna: 'Was he psychologically abusive as well, towards you and your sibling and your mum?'

P11: 'Yeah, I'm not really sure between the difference of psychological and emotional abuse ...'

Anna: 'Oh, emotional abuse, yeah, yep.'

P11: 'But yeah, he definitely played mind games and [pauses] um, you know, yeah.'

Anna: 'Did he ever isolate you?'

P11: 'He did that with my mum, a lot. Like if anything happened, he'd take her keys. I mean, back then there was no cell phone, and he'd unplug the phone off the wall [pauses]. So, he was very possessive like that over my mum, he definitely favoured my brother, um [pauses] and he took it out a lot on me.'

Anna: 'Was he ever intrusive?'

P11: 'No, he was [pauses] he only really, not, not towards me. I mean, to my mum, yeah, he was overbearing and controlling too much to the point of being intrusive ...'

'Oh, the other thing is, he ended up – and I only found this out years later – he off and on cheated on my mum, so now it makes sense why he was so suspicious, because he wasn't faithful himself.'

Anna: 'Going back to the question of what you would call your home environment. Was it scary; was it chaotic when you were still living with your father?'

P11: 'Because [long pause]. It was a really weird chaotic because you knew that, it was tense. I guess tense would be the best word because you knew something was going on, or the moment Dad brought alcohol home, because I mean you kind of knew it was there, because sometimes he wouldn't do it openly, you know? And even then it was very tense, there was a lot of underlying conflict that we only saw when he lost control, whether that was because he was drinking or maybe because he was just tired, because he wasn't always, it wasn't like he was always drunk, there were times when he was sober, but even then he was always short [in temper], and then it was really tense, and you were walking on eggshells [long pause].'

P12 described an emotional household, in which his father was violent and aggressive towards him, and aggressive towards his mother. P12 could not say for certain that his father physically abused his mother; he stated that he did not see this occur directly. Like P11, P12's experience of domestic violence was tied to his experience of child abuse, which is described in further detail in section 6.4.2 under P12. The following interview excerpt describes P12's household and the domestic violence presented as predominantly aggression; again, P12 notes in section 6.4.2 that some violence within a household, specifically against a child is okay, which might have skewed his responses in relation to domestic violence, and what he sees to be true domestic violence:

Anna: 'About what it was like to live with him? What was your family life like?'

P12: 'Hmm, [pauses] I consider that [pauses], everything is okay, as a whole it's okay, but his aggression, which was often aimed at his family and was within the family, this was difficult to digest for, in the first place, my mother. As I am a male it was a little easier for me to deal with ... the

love of a child is stronger for the mother than the father; you feel sorry for your mother [when she is abused] and this was difficult for me to deal with. But, if you take just me, it was reasonable.'

Anna: 'Were there moments where you feared your father?'

P12: 'Yes. [He said this is a matter of fact way, directly, without hesitation.]

'Ah, during his blowing up like a volcano [does a brief exhaled laugh while saying this], you know, if you get under his arm [Russian expression] at the wrong place and wrong time, then, yes, I was afraid of my father. Because, I didn't know what he was capable of doing [to me], that is, in that moment he was very heated, ah, and in reality, it was very scary.

'Now that I have grown up and become bigger [physically] it now doesn't scare me as much, but then it was very frightening, to the point of trembling.'

Anna: 'What was your relationship like with your mother and father?'

P12: [Pauses briefly] 'I was always closer to my mother; I always feared my father and respected him. [Pauses]. [He was] always setting an example.'

Anna: 'What was their [P12's parents] relationship like?'

P12: 'In the period of an emotional outburst it was very difficult, but on a whole, ah, everything works itself out through humour. That is, ah, you know, [say] the right joke and everything is okay.'

6.4.5 Feelings of injustice and unjustness (Community backlash)

The theme of 'Feelings of injustice and unjustness (Community backlash)' presented in three observations, including from P1, P3, and P6. All three participants are veterans of

the Soviet–Afghan war. Participants connected community backlash, and their unjust treatment by the community and government upon their return from the war, to their trauma and development of mental-health issues. It is vital to note that this theme is related to the theme of ‘Misconceptions of trauma and PTSD’, in that the misunderstanding of the cause of PTSD and trauma, and the ongoing correlations that these participants made between their mental-health issues and the reactions of their community and government are linked.

A common phrase made to these veterans by both community and members of government was ‘we did not send you there’ (described during my interviews as a ‘a phrase that every Afghan vet knows’), suggesting that these men entered the war voluntarily; therefore, any issues they faced during and following the war are of their own making, and all responsibility is placed on their shoulders. This comment is related to the former Soviet Union’s treatment of the invasions into Afghanistan as a hidden, or secret war (the conflict was presented and marketed as a peaceful, ‘brotherly’ mission to help the people of Afghanistan and their country. This attempt to hide the war was also evident as, until 1985, it was forbidden to write on a veteran’s headstone that the person perished in Afghanistan). This ban was lifted during perestroika. There is a possibility that this flippant remark is connected to the war having no purpose, and those in the military not knowing why they were in Afghanistan, potentially suggesting that the attitude of the public makes the veterans see themselves as doubly disposable and unnecessary.

P1 spoke about the difficulty in maintaining mental stability upon his return because his community persistently stated that they ‘did not send him’ to Afghanistan. This was done in conjunction to what he described as a lack of understanding from his community in relation to what he had recently experienced, that being traumatic events during combat. P1 connected this to his experiences of trauma, and that he believed that his trauma and PTSD was a result of this treatment by his community:

P1: ‘You understand, when you are there you absolutely do not think about this. You absolutely do not think about this, and what you see there you simply digest it and it remains somewhere inside of you, and it, I think it leaves an imprint after, when you come back, when you return to, for

example, normal life to the Soviet Union, and you understand that you, so much, so much of what happened there, and you expect from people, from peaceful people, I wouldn't say their respect, but at the least their understanding, yes, and when people start saying, "We didn't send you there," this is when you begin to lose your mind ...'

Anna: 'Who said this?'

P1: 'The majority – "We didn't send you there." [pauses] All of it [impact of trauma/negative reactions] comes through after, it absolutely does not develop there [in the war]. Understand, that there [the war] develops anger, develops hatred, develops [pauses] desire for revenge.'

P3 discussed the hurt he felt when returning to the Soviet Union because his community viewed him as an outsider, and an enemy of the people. P3 had been diagnosed with PTSD and suggested that this mistreatment exacerbated his mental-health issues:

'There was hurt, because we were looked at as outsiders/strangers, as if we, like we were enemies of the people/state, as if [everyone/people said] "We didn't send you. Who do you think you are?"

'You felt hurt.

'We left [during the Soviet era], and when we came back, it was almost a new country, and no one wanted us ...

'The attitude was: "We didn't send you."'

P6 connected his feeling of unjust treatment to the way the war had changed his perceptions of the world and people, specifically, that he became hyperaware of injustices, specifically those related to him or to other veterans (of any war). In the

following interview excerpt, P6 shared a scene in which the government did not support him as a veteran of the Soviet–Afghan war, and that the situation turned violent:

Anna: ‘You said your attitude to life changed following Afghanistan. Can you elaborate?’

P6: ‘I’m alone in the regiment. And I am planning on getting married. Therefore, I need an apartment. By law, I am owed an apartment immediately. I write to my [at that time fiancée] and find out that I am second in line [for an apartment]. I am first, but they say I am second. In any other situation, I would be “Well, second so second.” But this, who dared? So, I go to fight for my rights. I might not be a hero, but I am due to be first. I know my rights and I am brave ... I am told that I am first, remember that apartments are one-room, two-room, three-room apartments, but the captain who has a wife and a child, second child just born, he is going for a two-room apartment. So, [they tell P6] you’re first for the one-room apartment, and he is first for the two-room apartment. He is ahead by alphabet. I tell them they are wrong, because you don’t do this in the military. I had a conflict with a senior commander.

‘I came from Afghanistan, a place where no soldier just laid in bed.’

The situation became physical.

‘Maybe if I did not serve in Afghanistan, maybe I wouldn’t have reacted like this. But here, I wasn’t giving up. This hardness, rigidity came from there [the war].

‘Especially when someone is wrong ...

‘I now see unjustness that I didn’t notice before.’

6.4.6 Finding belonging: seeking approval, and control

The theme of 'Finding belonging; seeking approval, and control' presented in four observations, including from P1, P3, P11, and P12. Two participants are veterans of the Soviet–Afghan war; the other two are children of veterans of the Soviet–Afghan war. Differences in thematic detail between the four participants related to upbringing, if discussed during interview, and their treatment by their community. Specifically, P1 and P11 sought approval and belonging, partly to escape a turbulent and unhealthy home environment, both leaving their homes as children (teenagers); P3 sought approval from his community by reiterating that combat-related trauma does not create monsters; P11 and P12 emulated their fathers to seek their approval, the former subconsciously, and the latter consciously.

The latter sought approval from their fathers and communities and attempted to achieve this by joining the military themselves. This instance of seeking approval is related to the theme of 'Machismo/patriarchy', which will be discussed in section 6.4.7.

P1, as noted in section 6.4.4, left home at 15 to join a military academy, and to escape a turbulent home environment, inclusive of domestic violence. P1 sought a space to belong within the military by joining one of the prestigious Suvorov military schools – which were considered better-than-average schools because all teachers in Suvorov were Honoured Teachers of the USSR [Заслуженные учителя республик СССР]. A military career also offered a good salary. There is potential that this stringent environment offered a space of control; the choice to join the academy signified P1's control over his life, a difference in experience from his turbulent and unsafe home life. This space was an escape from a difficult home life and is linked to themes of Patriotism (to be discussed in section 6.4.10) and Machismo (section 6.4.7).

P3 presented the theme of 'Finding belonging: seeking approval and control' in relation to how the community saw him and other veterans of the Soviet–Afghan war, as 'strangers' and 'enemies' (see section 6.4.5 for further details). P3 used this space of discussion to state repeatedly that the veterans who returned are human. This repetition suggested a specific message that P3 wanted reiterated and sent out, enabling him to have a voice in a discussion in which voices of veterans are seldom heard or listened to. This repetition additionally suggests a strong need for belonging

within his community as a veteran with PTSD, and to not be viewed as a 'monster' because of his diagnosis (P3's misconception of how trauma occurs and to whom will be discussed in section 6.4.9):

After all this trauma, after all the loss, after all the blood. It's important to say: the human remained a human, he did not turn into a beast, a man-eater. He remained a human, and he returned a human.

The war might [damage us] psychologically, but if the person is mentally healthy going there, he will return mentally healthy. You leave a human and you return a human.

P11's finding belonging and seeking control and approval is linked to his family upbringing and turbulent home life, his refugee experience in the United States, and an attempt to seek the approval from his father by emulating him. P11 described his lack of control and stability in childhood, connecting this experience to his and his deceased middle brother's issues with substance abuse, and a want for a sense of control and stability in life:

I'm living being anxious of what's going to happen, and the lack of control, stability – like, we did not have a stable home. And as a kid, everybody wants to be able to have some measure of control in their environment, even if it's just – like, kids love routine – even if it's just being a routine. We had a chaotic routine and a tense environment where you're kind of [pauses] anxious. That's why I think both me and my brother went into substance abuse because we just wanted to not deal with it, [wanted to] escape or put it on pause. We were never taught healthy coping mechanisms 'cause we lived in an unhealthy environment.

P11 explained that his joining the military was influenced by his father, in that P11 wanted to gain the approval of his father, as well as his status as a refugee in the United States. His emigration from Ukraine aged seven years caused a rift in his sense of belonging to a country or culture, and his being continually reminded of his immigrant

status (through high school bullying) made the military seem to be a way to pay a debt to the US as his adoptive country and to become 'wholly' American, to fit in:

I really looked up to him on that. Um, and I think, he had a, I think he had a big part to do [with it]. Whether it, um, I don't know if like subconsciously I wanted his approval and that was like the only thing that was good to actually, you know, something that he'd be proud of, um, but besides that it was, you know, we were refugees, you know 'serve your country', 'American pride' that type of stuff. 'Cause when we emigrated, I didn't really associate myself as Ukrainian ... So, I felt that, and I really did not, um I got bullied, you get bullied as being an immigrant, you know, and I really hated not ever being able to fit in, if that makes sense, because you're never truly American so that was truly one of the ways to, I guess maybe pay a debt to be like, 'Hey, yeah, we were given the privilege to come here,' but I don't want to be in debt, and just being a productive member paying taxes and doing my nine to five and just living didn't seem right.

P11's final reason for joining the military aged 17 was to gain a sense of routine and control over his life, by removing himself from a turbulent home environment, which he described as toxic and depressing. The environment at home continued in this negative position even after his father was removed from their home life, as by that stage P11 began having issues with alcohol.

Another reason is that I wanted to run away from home. Um, this was shortly after we kicked out my dad [from their home]. Um, and, I just didn't like the home environment, it was very toxic and depressing, and I was like you know drinking off and on and just partying. I was doing teenager stuff, I wasn't really focusing on going to school even though I had a good GPA, I was an honours student. I bombed in my senior year because I signed up to the military while I was still in the eleventh grade. I was seventeen years old and I convinced my parents to sign me away. My dad was for, he was like, 'Yeah, it'll teach him to be a man,' which was kind of, it was a double-edged sword, 'cause it's like, 'What were you doing this

whole time? Why do I have to be sent off to learn to be a man?' That was kind of confusing, at the time I didn't realise what he meant by that, and I told my mum that, 'If you don't sign me up now, in a year I will be an adult and I will just do it. At least give me a year's head start.'

P12's approval-seeking is related to his father and his military history. P12 joined the military following his father's example, despite stating that they do not have a good relationship. He additionally made comments suggesting that he is of a lower worth than his father, which can potentially be tied in with the abuse P12 experienced during his childhood from his father:

I think that yes, because my father is my example, yes, this definitely influenced [me]. Because I am in everything ... we don't have a very good relationship, perhaps you know about problems of fathers and sons, and you can definitely say this about us ...

Um, [long pause], ah, like, my father is an example to me [pauses] but it's an example I can never reach [pauses]. I will never be able to reach his example because a father can do everything, um, but this is already a new topic.

6.4.7 Machismo/patriarchy

The theme of 'Machismo/patriarchy' presented in seven observations, including from P1, P2, P3, P7, P8, P11, and P12. Four participants are veterans of the Soviet–Afghan war; two participants are children of veterans of the Soviet–Afghan war; and one participant is a widow of a veteran of the Soviet–Afghan war.

A postulate/cognitive principle in the former Soviet Union, which persists today, is that men are superior to women, both physically and mentally. This position is highlighted in the following remarks from veterans, including 'war is a boys' game' and war is a 'male job'. This machismo suggests that these men have been culturally conditioned to see

violence as part of a true masculine existence; that men are born and naturally set-up for combat and the conditions of war – these views show a heteronormative and patriarchal view of the world, and present as examples of cognitive dissonance on the part of the participants whose interviews highlighted the theme of ‘machismo/patriarchy’. Though children of veterans showed similar views to veterans, they were more open to admitting the problematic nature of this position and seeing its illogicality. This machismo might also suggest why veterans were averse to admitting and/or accepting their trauma, as discussed in section 6.4.3.

P1 referred to entering the war with a romantic outlook, part of a ‘man’s job’:

All of us who were there, came into the war with a romantic mood, that is, how all the guys felt: a war, shoot some guns, we’re set up like this, men, that was male job. And this euphoria holds on until the moment you see for the first time a person’s dead body. [pauses] After this, you begin to understand that the games have stopped, and you begin to think about different things, how you need to live, survive.

P2 suggested that his combat experience provided him with a stronger male outlook on the world, without elaborating on what a ‘male outlook’ is:

Well, as I’ve said, [I became] more fair, more kind of a male outlook/gaze on life. It changed, my relationship, of course. More orderly in friendship, mutual support with comrades. All of this that you go through there, a friend in need is a friend in deed or in extreme situations. This means that I can tell people apart immediately, to keep company or not.

When asked if there was regret in participating in the invasion in Afghanistan, including the loss of comrades that this participant witnessed during the war, P2 continued to state that he did not feel regret, his comments suggesting that this experience was part of a true masculine experience:

[Pauses, and softly says] No. What is there to regret, it is one of the stages of my life, my service. How do I say, I am, not that I am glad, but I am satisfied that I ended up there with my military comrades, and I do not regret this at all. Such is fate.

P3 stated during the interview that all military personnel who were called upon to fight in Afghanistan went of their own volition. These comments are linked to the subtheme of bravery, and the male-hero. P3's comments suggest a mythologised description of events because, in reality, those called to enter the war did not have a true choice in the sense of the word, that is, to abstain from military service or to disobey an order meant prison time, or being sent regardless by force:

Everyone who was called on; they all went voluntarily into Afghanistan. Not under duress [or coercion]. That is an important moment, I am telling you. Not under gun fire [we decided to go], but with bravery.

P3, similarly to P2, explained that he did not regret being in the war, despite his trauma which led to PTSD; he also stated that the war changed him by making him into a man, suggesting that a man is not a man until he has been in combat:

[Pauses] How do I say [pauses] ... my perceptions. After Afghanistan, when you came back, alive, you look at many things differently. We left as eighteen-year-old boys without facial hair, without brains, just wind in our heads. And you come back a totally different person. More grownup, more, how do I say, like a man. You look at things, at life, at relationships to people differently. More grownup, more serious relations, at life, at relationships, at male friendship [pauses], and the most, most, [looking for words], most real male friendship comes in difficult, hard conditions in the war. Your heart comes though, you either become someone or become no one. The war either surfaces the best in people, or their worst. There is no mother and father, it's just war, and you.

The theme of machismo additionally resurfaced during the conversation regarding P3's children, at which point P3 stated that he would like his son to be in the military, and

that he believed that his alleged good relationship with his children was due to his being a veteran of the Soviet–Afghan war:

I believe this [is so] because they grew up with parents leading as an example. I believe this is the case for all families whose father fought in Afghanistan, that all children took his example.

P7 stated that he was proud to be part of the war, despite the physical and mental impact that combat had had on him, suggesting that men are raised to participate in combat to be ‘war heroes’. Attention should be paid to the comment of ‘We weren’t weak’, which suggests that combat experience is part of the true masculine experience, and that to be a real man, a man must participate in a war. P7 also echoed the position, that ‘war is a boys’ game’:

I am proud that I was there. We weren’t weak. We were raised to be war heroes. War is a game for boys.

P8 is a widow of a Soviet–Afghan war veteran. The theme of machismo/patriarchy was noted during her interview in relation to her son and is closely tied in with the theme of ‘Patriotism’, which will be discussed in section 6.4.10. The following quote from P8 suggests an ingrained belief that the military creates real men, and that her son’s absence from the army was related to his issues in life today, cumulative with the death of his father:

[The government] made a huge mistake; they did not take my son into the army.

P11 is a child of a Soviet–Afghan veteran, and openly stated that machismo might have had an influence on him joining the military and not having interest in another vocation:

Um, maybe it was the whole 'macho' thing that had something to do with it, probably.

P11 described a scene where his father reiterated the position that the military teaches men to be 'real men', when P11 announced that he will join the army aged 17:

I was seventeen years old and I convinced my parents to sign me away. My dad was for [it], he was like, 'Yeah, it'll teach him to be a man,' which was kind of, it was a double-edged sword, 'cause it's like, 'What were you doing this whole time? Why do I have to be sent off to learn to be a man?' That was kind of confusing, at the time I didn't realize what he meant by that.

P12 is a child of a Soviet–Afghan veteran, and the theme of machismo/patriarchy was highlighted during his interview in his seeing his father as an example to him, despite his father's physical abuse of P12, and his describing that, as a child, he handled his father's abuse better than his mother because he is a male, suggesting that his abuse was 'reasonable':

Hmm, [pauses] I consider that [pauses again] everything is okay, as a whole it's okay, but his aggression, which was often aimed at his family and was within the family, this was difficult to digest for, in the first place, my mother. As I am a male, it was a little easier for me to deal with ... the love of a child is stronger for the mother than the father; you feel sorry for your mother [when she is abused] and this was difficult for me to deal with. But, if you take just me, it was reasonable.

6.4.8 Makeshift group therapy

The theme of 'Makeshift group therapy' presented in seven observations, including from P2, P3, P4, P6, P7, P8, and P10. Five participants are veterans of the Soviet–Afghan

war; one participant is the wife of a veteran of the Soviet–Afghan war; and one participant is the widow of a veteran of the Soviet–Afghan war.

The interviews showed a prevalence of group meetings created by veterans that mimic group therapy. The interviews highlighted that these makeshift therapy groups were valued by veterans as a space to find resonance and meaning in relation to their traumatic experiences. Run on a regular basis, primarily coinciding with dates of memorials and remembrance, these spaces are not seen as group therapy, despite their setup as a space of sharing and listening mimicking that of group therapy. No one with therapeutic training facilitates these sessions.

This theme is related to the theme of ‘War and identity formation’, because their identities as veterans continue to impact their interactions with peers.

P2 stated that his makeshift therapy group meets annually on 15 February, a Memorial Day in Russia, established in the former Soviet Union (Day of Memory of Soldiers–Internationalists). P2 stated that their discussion revolves around the war and their experiences in the war, recounting events during combat:

We know every grave of the fallen. We lay flowers. A lot of snow, stomp out a path [through the snow], lay flowers, raise our cups and mugs, we remember them. And only after this we return and go to a café, and we sit and we continue. This is our tradition. There are twenty, twenty-five, or thirty people. Every year, we fill up a full bus. For us, this is a holy day.

P3 stated that his group also meets annually on 15 February and that, each time they meet, it feels that the war was only yesterday. Like P2, P3 explained that the sharing of stories is situated around their experiences in the war:

Practically every time we meet it feels like we’ve come from the war just yesterday ...

Yes, yes, yes. Twenty-eight years have gone by, and on 15 February we meet with other veterans, to remember [the war and the lost] and it was a feeling that we had come back from the war just yesterday.

P4 explained that his makeshift therapy group began via a social network, Odnoklassniki (OK.ru), where he rediscovered comrades he served with in Afghanistan. His makeshift therapy group congregates online to share stories of combat and take trips to visit comrades in other parts of the country and region.

P10 is P4's second wife; she stated that these groups and their discussions triggered memories of war in P4. She added that, outside of his group of veterans, he does not speak about the war:

You know what is most interesting, when we first met he said very little about [the war]; didn't say much.

It all started with the advent of the internet, Odnoklassniki, when he found his comrades [from the war]. And here it started. Started the memories, and we went to visit his friends [the people he served with] ... even found a friend here in Ulyanovsk, they didn't know that they lived in the same city. And here the memories started.

Of course, he doesn't like to remember the bad, as he had to bury his companions ...

Talking about [the war] he doesn't particularly like. With friends, or in Odnoklassniki, then he will [talk about the war], but at home ...

P6's group continues to focus on discussing events from the war, as he noted that, during their group get-togethers, they attempt to remember the good events in the war. His interview additionally made the inclusion of alcohol being present during these

sessions; alcohol may be viewed as a placeholder for a therapist to guide the therapy sessions:

Sometimes, when we're drinking, making a toast to those who died, we usually just remember how we were running around, smoking, all the good things you remember. So, when we get together, we try to remember these things, the cheerful good things. How we went fishing.

P7 noted that his group gets together on important Memorial Days, including 15 February and 9 May. P7 expressed that his group continued their connection by participating in the parade, and going to school and colleges to give talks to students:

Between us there is friendship. We celebrate all important dates together. February fifteen, ninth of May. We all get together. Walk in the parade. We get called into school and technical colleges, and we go.

P7 stated that speaking about the war continues to be difficult but that, in their safe group space, alcohol is used to support and guide the conversation; speaking about the war is difficult while sober. P7 again echoed that the talking points are focused on the war and events of the war, including from newcomers to the group:

Of course. Every time [it's difficult]. I am telling you now so that you can write about this, but generally, when we get together for a celebration [with other vets] we will drink, and it starts. Some start crying. Sometimes a new vet joins us, and he starts telling us about himself first, about the war, and it builds on from this. But sober, it is very hard [to talk about]. No matter how many years have passed. There is a saying: 'Would be better if I were there, it was easier there, and quick.'

P8 is the widow of a veteran of the Soviet–Afghan war. In 1989 she began a local organisation in support of widows and families of war dead, called the 'Union of families of war dead in Afghanistan and local military conflicts'. P8 uses this group as a support

or therapy group, including financial and bureaucratic support for members. In 1990 she had found 40 mothers and widows who had lost their sons or husbands in the Soviet–Afghan war, who were united by the organisation and began to support one-another. The group continues to do volunteer work, fundraising for members and hosting meetings from families and widows of war dead. The local government does not financially support the ‘Union of families of war dead in Afghanistan and local military conflicts’.

6.4.9 Misconceptions of Trauma and PTSD

The theme of ‘Misconceptions of trauma and PTSD’ presented in seven observations, including from P1, P2, P3, P5, P6, P7, and P9. Six participants are veterans of the Soviet–Afghan war; one participant is the mother of a veteran of the Soviet–Afghan war.

Linked with the theme of ‘Denial of trauma’, discussed in section 6.4.3 – as some of the veterans who discussed trauma during their interviews presented specific instances, suggesting they continued to experience symptoms of PTSD, although conflictly, did not believe that they were traumatised – this theme specifically focuses on illogical instances of total or partial misunderstanding of the basics of what trauma is and how it arises presented by the participants during their interviews. This thematic analysis suggests that the lack of mental-health education in Russia is an ongoing, detrimental issue. Further, this theme suggests that the government’s neglect of their veterans, soldiers, and family members in relation to the Soviet–Afghan war further plays into their misunderstanding of trauma and posttraumatic stress disorder because there is an overwhelming lack of resources and adequate support for this community of people.

P1’s comments on trauma and PTSD suggested that combat and war leave an imprint on a veteran after they return home – that is, the imprint is only felt upon return. P1 suggested that combat-related trauma does not develop in war, but only when the veteran returns home to people who do not acknowledge what the veteran experienced – that is that trauma occurs because of ill-treatment and/or lack of support from their community/family. This specific notion may highlight a confusion between not receiving support, which leads to a worsening of trauma symptoms, and placing all of the blame

of the trauma experienced by the veteran on people at home. P1 also suggested that the soldier does not feel hatred, malice, or cruelty while serving; instead, these emotions sit in the unconscious part of the mind until the veteran is home (these comments were contradicted in the interview by a passage in which he suggested that hatred is felt and grows in combat – both passages are included below). Overall, P1 did not believe that he experienced the effects of trauma during the war, but only felt their repercussion upon the conclusion of his combat experience:

P1: 'You understand, when you are there, you absolutely do not think about this. You absolutely do not think about this, and what you see there you simply digest it and it remains somewhere inside of you, and it, I think it leaves an imprint after, when you come back, when you return to, for example, normal life to the Soviet Union, and you understand that you, so much, so much of what happened there, and you expect from people, from peaceful people, I wouldn't say their respect, but at the least their understanding, yes, and when people start saying, 'We didn't send you there,' this is when you begin to lose your mind ...

[Pauses] 'All of it [impact of trauma/negative reactions] comes through after, it absolutely does not develop there. Understand, that there develops anger, develops hatred, develops [pauses] desire for revenge.'

Anna: 'Revenge against whom?'

P1: '*Duholm* [mujahedeen].

'There develops a desire for as many [long pause] of the Mujahedeen to destroy because of anger, it really [drifts off].

'When you start to lose your friends, close friends, acquaintances, those with whom you communicated, when you see the person with whom you literally three days ago drank vodka or played billiards, but today he is lying dead, that's when people develop malice and cruelty/brutality. It is in this exact moment, people begin to lose the margin between peace and war. People stop caring about anything. And it doesn't matter who is on the other side, even my godfather or whoever else, this malice is already

within you, and this spite and malevolence is introduced into your subconscious only with the death of your closest people.

'When hatred appears, when the thirst to destroy appears, and the more the bett— [drifts off] but this is more related to the infantry, the landing forces that are in battle, then that's it, you lose your head [makes the whoop sign and sound].

'But you do not feel this, you work, you serve, you do your thing ...

'How this impacts on peaceful life, you do not think about this. You see what is happening [around you] and you are constantly under stress, under stress, you never know when you are going on the next operation and how many people will be lost, or who will be lost. No one knows anything.

'Everything that was seen there, after it [pauses] begins to germinate, those seeds that were implanted, they then sprout in peaceful life. You start becoming aggressive, I don't know. The bulk goes through this. The majority drinks, the majority [pauses] ahh, in general there are very many people without jobs, and Chechen veterans who were in Chechnya, and those who were in Afghanistan, those who are unsettled, those who have problems in the family, lots of families were destroyed because of this.'

P2 suggested that veterans are only impacted by trauma if upon their return they do not have a family waiting for them; that is, that traumatised veterans simply did not have a network of support, or someone or something to return home to. These comments again suggest a confusion between not receiving support, which leads to a worsening of trauma symptoms, with placing the blame of trauma experienced by the veteran on people at home in totality:

'I didn't have this. I didn't notice anything. In terms of moral [psychological] trauma, my family waited for me ...

'One thing I do want to tell is, ah [pauses] everything depends on your state personally [what state you are in], I think. If your children, your wife welcome you [after the war], everyone is joyful, your parents welcome you, relatives welcome you, no one reproaches you – "Where were you? What did you do? You did the right thing, you were fulfilling your duty from the government." All of it is easily tolerated. I never noticed anything like this [trauma] with me.'

P3 has a diagnosis of PTSD, following his combat experience in the Soviet–Afghan war. P3 provided the most drastic comments in relation to trauma and PTSD during the fieldwork; specifically, he inadvertently placed blame on himself for experiencing trauma and developing PTSD by stating that only mentally unhealthy soldiers experience trauma during combat and develop PTSD, and that those with a healthy predisposition upon entry into war do not suffer from these issues. P3's comments provided a number of personally contradictory statements in relation to trauma and PTSD; much of the commentary read as apologetic and related to his experience of being looked at by the community as 'not human' due to his PTSD. This might explain the ongoing repetition of 'you return a human' and 'I do not regret being in Afghanistan' throughout his interview:

The war might [damage us] psychologically, but if the person is mentally healthy going there, he will return mentally healthy. You leave a human and you return a human. I do not regret being in Afghanistan. One thing however, is that it's painful, and you feel sorry that we lost many, many of our young men. The country lost some of the best young men, the best of the best. [The war] swept away many, many young. Good, healthy, young, a whole generation, generation, generation of these young men. This is very sad, very sad. But that I served there, I do not regret anything.'

P5 conceded that he likely is traumatised from the war, stating that he was wounded in his head, body, and heart; however, in the same paragraph, P5 goes on to contradict

this statement by suggesting that his trauma was in fact the effect of his current environment in Russia, including the injustices he experienced, and governmental corruption. These comments again suggest a confusion between not receiving support, which leads to a worsening of trauma symptoms, with placing all of the blame of the trauma experienced by the veteran on people at home:

Ah, most likely it exists. We were wounded in our heads, our bodies, and our hearts. The thing is, psychological trauma, it's, we were young and we didn't notice it, ah, psychological trauma we started to feel more because we vacuum the negativity in, the unrighteousness. Dishonesty is all around us, and theft and corruption. These traumas started now, with age. I, for example, am like a vacuum cleaner [sucking] in all the negative, all the bad things happening in the country. I take it all in and I feel unwell, and attacks begin. My heart, because of this, is not well.

P6, similarly to P1 and P2, suggested that veterans are only impacted by trauma and PTSD if, upon their return, they do not swiftly adapt to their environment, and that PTSD relies on the people around them, both in war and at home:

I didn't have problems, so to speak, related to posttraumatic stress syndrome. The question is, if the person adapts quickly [upon their return from combat], then the rule is there isn't PTSD. I was always busy. Then I married ...

First of all, there is friendship, you immediately spot fake people, therefore the syndrome [PTSD] relies on your surroundings. That is, what sort of collective did you end up in? And the rule is, if the lieutenant ended up with his comrades, it will be easier for him.

P7 states that he continues to experience symptoms of PTSD, including being triggered through war films. In his discussion around trauma, P7 echoed the views of P1, P2, and P6 that trauma is the result of an unwelcoming or a non-understanding environment

upon return home, including the impact of successful reintegration into peaceful life. These comments again suggest a confusion between not receiving support, which leads to a worsening of trauma symptoms, with placing all of the blame of the trauma experienced by the veteran on people at home:

[Pauses] In the first years, as I've said, we considered ourselves such heroes, and, how do I say, such an unfair life didn't exist. Then [in Soviet times] everyone lived the same way ...

When Afghanistan ended, the Soviet Union ended, too, and there was a moment when some didn't know what to do. I went outside to trade, pretty much the whole community went to trade [sell things]. Not everyone was able to get through this [some died].

P9 is the mother of a veteran of the Soviet–Afghan war, killed in action. P9 echoed the comments of P6, suggesting that only mentally unhealthy soldiers experience trauma during combat and develop PTSD, and that those with a healthy predisposition upon entry into war do not suffer from these issues. Further, P9 commented that reintegration into home life is an important part of trauma effect, though her discussion suggested that trauma only occurs if that reintegration is not successful, despite traumatic experiences in war:

... and didn't find yourself, didn't find the strength to change [pauses], yes, [life] in a good direction.

6.4.10 Patriotism

The theme of 'Patriotism' presented in six observations, including from P1, P2, P3, P6, P7, and P8. Five participants are veterans of the Soviet–Afghan war; one participant is the widow of a veteran of the Soviet–Afghan war.

This theme was overwhelmingly presented by veteran participants through their discussion of participating in the military and war as part of their duty as men of the former Soviet Union; that is, that they 'had to serve their duty' to the homeland, the motherland. Participants additionally spoke to this theme in discussions around their feelings of joining the war effort – their wanting to serve, or not. In all discussions related to this question, veteran participants were unable to give a laconic answer in relation to their feelings about going into combat; instead, they all regarded their military service as part of their duty, and that their opinion did not matter. At times, as some participants came close to criticising the war, potentially suggesting that they felt it was, at least, problematic to be part of the war, they recoiled into participation being part of their duty to the former Soviet Union. This commentary may be an example of a 'cultural contradiction', that is 'the official "image" people seek to project of themselves' (Spradley 1980, p.152), as well as a result of social control – the control of behaviour in a society, with its members conforming to values and norms in that community. Such a mention of 'we were fulfilling our duty' can also be viewed as a way to remove responsibility from themselves. However, this cannot be viewed from a Western democratic perspective, because the political system surrounding the Soviet–Afghan war was a socialist dictatorship; additionally, this removal of responsibility can be viewed from a psychological perspective for these veterans to not have to continue to analyse their actions in a war now known as an invasion.

P1, when asked if he felt that the war was unnecessary, began to speak about the issues he had experienced in considering what the war was for and its impact. However, he concluded his positing with his participation as part of his duty to the former Soviet Union. The following interview excerpt suggests that P1 felt hurt now knowing that he was likely exploited when he was told and believed that he was doing the right thing:

It's hard to say what I think because any war is a politician's game. To say if we did the right thing or the wrong thing, I think we did the wrong thing ... of course there were errors, this is obvious now. But to say that we were lied to, frankly, we were always deceived, no matter where, here in Russia, the Soviet Union, the United States. It's politics and you can't live outside of politics ... officers, soldiers, they are just pawns, meat

[Participant P1 continually referred to people as 'meat' throughout the interview], and that's it. From this perspective, I do not understand, but in terms of did they lie to us or did they not lie to us? Well, they probably did lie. We were fulfilling our duty.

P2's interview suggested a blind patriotism, in which his comments reiterated the common notion presented during the fieldwork data analysis that veterans of the Soviet–Afghan war did not seem to comprehend that they can have feelings in relation to combat and entering a war, falling back on the idea that their participation was part of their duty to the motherland:

How do you mean if I 'wanted to?' I was ordered to go. In those times, we didn't even think about it or discuss it ...

When you go into war, you are setting yourself up for one thing: either you kill or you be killed. It's not a fistfight where you fight and walk away, wash blood off your face. When you go into war, you must psychologically ready yourself for that you need to serve your duty, which was handed to you by your motherland, by your government. It could be the interests of your motherland, or it could be your motherland.

P2's patriotism was also evident in discussing more recent conflicts, as he suggested that veterans of the Soviet–Afghan war are to be feared; they are viewed as better than others:

Anyone who wants to attack Russia, or wants to fight with her, they must not forget that we have Afghan vets.

P3 also spoke about his military service as a duty to his country, paying a debt to the international community, and presenting a romanticised notion of patriotism and fighting for the motherland:

We went there voluntarily, because, hmm, that's how we were brought up, how we were taught. Our homeland said that we needed to fulfil an international debt, and we went to fulfil our debt, and, what I want to say is, it wasn't done by coercion, but by our hearts. Because that is how we were brought up, that was our generation. A generation of eighteen-year-old young men ...

No one stayed in the Soviet Union ...

To life, to people, [our attitude] did not change because we were that Soviet generation. We were made from a different dough, from a Soviet dough. Young people don't understand this. This is how we were raised, how we were brought up.

Later in the interview, P3's comments aligned with delusion when his patriotism presented a completely different outlook on what occurred in Afghanistan and what was done to Afghans:

I do not regret that I was in the war, that I was in Afghanistan, what I went through, and so that no one said anything or repeated after me. For me personally, I will never say a bad word about Afghanistan. For me personally, like everyone else, it was a good school, a good, good. What I want to say is, many, many years have gone by, the men who have gone back there as tourists, and the Afghan people, simple Afghan people, remember us, and remember us positively. We left a good memory. We left a good memory for them, and when they remember us there is no iniquity or evil feelings.

P6 spoke about participating in the war as a protector of the motherland, despite his fear:

One of my friends, he says: 'Only a fool is not afraid to die.' In this, he doesn't lose anything. I am afraid of losing my life, homeland, and mother, but for their sakes, I cross over.

P7 discussed the shame that was brought on men who were not in the military in the former Soviet Union, suggesting a communal view that the military was equated with support of the motherland and its people, and not being part of that institution, as a man, meant that you were not a real man. P7 additionally echoed the views of P3's comments around the Soviet Generation being raised as patriots, as opposed to current or previous generations. The following interview excerpt again highlights the inability of veterans to position their feelings as worthy in relation to joining the war, instead supposing that, if their feelings were valid, they must have been asked about them prior to joining the war:

Anna: 'Did you want to go to Afghanistan?'

P7: 'Then, no one asked [if you wanted to go or not] ...

'Those who didn't serve in the army then, they were ashamed.'

'It was a Soviet upbringing ... we were [bred as] patriots.'

Anna: 'Do you regret having been in this war?'

P7: 'I, I can't say this. The government had its interests there, and we just followed an order. It was my fate.'

P8 is the widow of a veteran of the Soviet–Afghan war, killed in action. P8 showed one instance of patriotic thought during the interview, specifically related to her son. P8 stated that the government 'made a huge mistake; they did not take my son into the army', suggesting that it is still part of a man's duty in the former Soviet Union to join the military, despite her traumatic experience of losing her husband in the Soviet–Afghan war.

6.4.11 Silence, secret-making, and isolation

The theme of 'Silence, secret-making, and isolation' presented in eight observations, including from P1, P2, P3, P8, P9, P10, P11, and P12. Three participants are veterans of the Soviet–Afghan war; one participant is the widow of a veteran of the Soviet–Afghan war; one participant is the mother of a veteran of the Soviet–Afghan war; one participant is the wife of a veteran of the Soviet–Afghan war; and two participants are children of veterans of the Soviet–Afghan war.

Veterans reported difficulty in speaking about the war, particularly with anyone outside of the war. This led them to turn events of the war into secrets. Children of veterans reported a secretive household during their upbringing, in which not only were the events of the war not discussed, but their veteran fathers engaged in isolating themselves from their family members. These households were homes of silence as, eventually, all personal stories morphed into secrets, including lack of emotional sharing and discussion, which led to these children not learning healthy coping mechanisms, mimicking these traits from their fathers, and developing into adults who also isolated and kept secrets from their closest people.

P1 never spoke about the war, his childhood, or his upbringing with his family, except in one instance when he had made a partial and overly brief remark about the war to one of his children. This suggests that P1 has a history of secret-making, in which events related to trauma and/or abuse are not divulged or spoken about, even with close family members.

P2 stated that, outside of this interview and his makeshift therapy group, he does not talk about events of the war, as he does not see the point in sharing his experience of war. This position contradicts an earlier statement made by P2, as he discussed the importance of sharing knowledge and the experience of war with younger generations – however, this group of people is always part of the military, preparing to enter combat.

P2 commented that it is difficult to talk about the Soviet–Afghan war, and that he still does not divulge all that occurred in combat:

Anna: 'Is it easy for you to speak about the war?'

P2: 'About the war? We practically never talk about it. You're interviewing me now, but after this, no one will ask me about it. And if they do ask, I do not tell them anything.'

Anna: 'Why do you not tell them?'

P2: 'What's the point of sharing this?'

Anna: 'Is it difficult to talk about?'

P2: 'I don't know, how do I say, [pauses], to purposefully sit down and talk about Afghanistan [pauses]. If my grandchildren ask me, I will tell them. If one of my brothers asks me something, then yes, I will tell them, but, of course, I do not give them all the information.'

P3 is diagnosed with PTSD and could not yet speak about the traumatic events of losing comrades in battle; these scenes continue to be kept secret. The following interview excerpt is the only instance in which we attempted to discuss this trauma:

Anna: 'When you were in Afghanistan, did you lose any of your comrades?'

P3: [Pause; his voice is sombre and quieter.] 'Yes, situations like that occurred.'

Anna: 'Can you speak about this?'

P3: 'No.'

P8 is the widow of a veteran of the Soviet–Afghan war and spoke about the forced isolation she has experienced as a widow. Subthemes related to this forced isolation include government deception (her husband’s coffin was empty; repetitive statements of ‘We didn’t send them there,’ directed at her; lack of support/assistance; and danger and compromised safety):

They [the government] remember the mothers, but they’ve forgotten the widows.

P8 additionally explained that her former husband did not tell her that he was going to Afghanistan; she only discovered where he was in his first letter from Afghanistan. Only in the second or third letter from him, did he tell her that ‘here sometimes they shoot’, and only in this moment did she realise the reality of where he was.

P9 is the mother of a veteran of the Soviet–Afghan war, killed in action. Similarly to P8, P9 spoke about the forced isolation she has experienced due to lack of support and government deception (she did not see her son in his coffin).

P10 is the second wife of a veteran of the Soviet–Afghan war. During her interview, P10 discussed the silence and secrets around events of the war experienced by her husband, commenting that her husband never spoke about the war, or said very little about it to his family members, and dislikes the topic generally. Her interview suggested that her husband additionally developed communication issues following combat, specifically in communicating with friends. Her husband also uses humour as a buffer when discussing traumatic events; this suggests that humour is a tool of isolation, used as a wall to not allow people to get too close, forcing people to be at a distance:

Talking about [the war] he doesn’t particularly like. With friends [comrades], or in Odnoklassniki, then he will [talk about the war], but at home ...

He's told the stories of being in shelling and under fire and being caught in crossfire. He talked to me of these things, but not of terrifying events.

P11 is the child of a veteran of the Soviet–Afghan war. He commented that his father never talked about the war when sober, and only talked about the war when there was a need to share specific incident. P11's middle brother developed a habit of isolating himself in all stressful situations, by removing himself from the space and retreating to his bed to sleep. Despite being described as mentally healthy, P11's youngest brother also shuts down easily – he stops communicating, talking. P11, too, isolates himself from his closest people. These habits suggest that the three children of one veteran have mimicked the use of isolation as a coping mechanism from their veteran father.

P11 commented on his father's habit of withdrawing and isolating himself, connecting this to his own inclination to withdraw from people and situations:

He was withdrawn, he was depressed, he kept to himself mostly, you know. Very rarely did we do family things together. I could probably count, you know, on one hand how many family trips we took, and I don't think that's because I have a bad memory.

The impression that I got, as long as the lights were on, there was food and you had clothes, like, 'What else do you need?' ...

Um, but even then, like, looking back now, it seemed like he just tried to stay busy [pauses], to be good and provide for the family, but it was always like, 'I need to get this done so I can finally get to me.' You know what I mean? It's like he was there but he was just like, 'Okay, what do I need to do to be left alone?' And I've noticed that that, kind of, when I deal with stress, I still [pauses] have responsibilities and I kind of get in that mode like, 'What's the minimum so I could just be left alone?' And I've noticed, like, my biggest thing is I withdraw like crazy. I will, I mean in the military did not help with this, but yeah, if things don't go like my way or if things don't work out, I kind of reach my breaking point, like I just disappear. Like I'll just be by myself, just being withdrawn. And even then,

if you have to do something, you just kind of keep to yourself, just get it done and then do you [your thing/your time] or do whatever.

In 2005, P11 was hospitalised from a drug overdose; he connects his withdrawal from family and friends as part of the reason for his drug use:

I was more withdrawn and didn't want to deal with things. And the way I did it was pills ... they make you very happy, very social. And it helped me to just forget things.

P11 described scenarios in which his father would isolate himself from the family with alcohol:

Our Fridays and Saturdays were always the same: Dad comes home, he gets drunk [on Friday]. Saturday he's continuing [drinking] and that's a really crappy day, so I remember a lot of day trips that we went [on] by ourselves [with mother and his middle sibling] so Dad could do his own thing, and Sunday we'd go to church and he'd [dad] would sleep in, and Sunday afternoon, we'd come back and it's a fifty-fifty, 'cause Dad could be happy because, you know, he has to sober up, he knew that, 'cause he has to go to work, so: 'Is he going to be happy, or is he going to be grouchy?' 'Cause you know he's either hungover or the events of the weekend are just not to his satisfaction.

P11's isolation spilled over into the isolation of his family members, namely his former wife, and possessiveness of his former wife (this particular instance is also linked with the theme of 'Domestic violence' discussed in section 6.4.4):

Anna: 'Did he ever isolate you?'

P11: 'He did that with my mum, a lot. Like if anything happened, he'd take her keys. I mean, back then there was no cell phone, and he'd unplug the phone off the wall [pauses]. So, he was very possessive like that over my mum ...'

P12 is the child of a veteran of the Soviet–Afghan war. P12’s discussion highlighted the theme of silence and secret-making in his comments about his father’s dislike to discuss the war, having shared about combat minimally, with little detail:

As my father wasn’t wordy about this topic, when I was younger, I tried unsuccessfully to get more information, but as I didn’t have the communication skills needed to speak with someone who had been in a hot point [combat] ... he doesn’t like to talk about this [the war], and if he does tell anything, it’s very brief and in sparing detail.

I do not know much.

P12 was only able to get detail about the impact of the war on his father from his godfather, who commented on his change in personality and demeanour, suggesting trauma impact:

I think trauma wasn’t present, but [the war] left a very strong imprint [on him], because in how this looks to me, [pauses], as the service was contiguous with ongoing danger, he, again, in a few words would talk about a situation when the neighbouring outpost ... [drifts off to describe the type of warfare the Mujahedeen undertook with the Soviets] ... my godfather [his father is the youngest in the family, and his godfather is his father’s older brother] would tell me that, after the army, [my] father became, he changed in the direction of where everything became sharper, stricter, everything punctual; that is, [the war] influenced him in a way that became – not that it was under constant threat – but in imaginary or a possible threat, and this impacted him from the perspective that he became serious, he matured by a lot and very quickly. Not by two years [the time he was there] but his psychological age became some-thirty years.

6.4.12 Trauma (including subthemes of intergenerational trauma transmission)

The theme of 'Trauma' presented in 12 observations, across all interviews, including from P1, P2, P3, P4, P5, P6, P7 P8, P9, P10, P11, and P12. Seven participants are veterans of the Soviet–Afghan war; one participant is the widow of a veteran of the Soviet–Afghan war; one participant is the mother of a veteran of the Soviet–Afghan war; one participant is the wife of a veteran of the Soviet–Afghan war; and two participants are children of veterans of the Soviet–Afghan war. This section of the chapter includes a theme sub-section for clarity between instances of trauma and PTSD experienced by the veterans (and their trauma discussed by family members, including the trauma experienced by family members directly due to the loss of sons and husbands in the conflict), and content evidencing intergenerational trauma transmission from veteran to child. The latter will be discussed in section 6.4.12.1 'Intergenerational trauma transmission'.

Several veterans described traumatic scenarios; however, they did not concede that they were traumatised. These veterans additionally shared symptoms of PTSD, which continue; however, again they did not concede that these were related to PTSD or their trauma. These instances are related to the theme of 'Denial of trauma', which is discussed in more detail in section 6.4.3. The theme of 'Trauma' will not focus directly on these inconsistencies and will instead provide a more detailed account of the trauma experienced by all interview participants. Trauma triggers will also be presented as discussed by participants.

P1 shared several scenarios in which he was exposed to the deaths of comrades, torture, and executions. P1 is diagnosed with PTSD; however, he does not fully believe that he is traumatised, presenting a kind of oscillating from between complete denial to understanding and acceptance of his symptoms and diagnosis. P1 stated that he has vivid memories of the war, and experiences flashbacks and triggers that revert him back into combat, including specific smells, sounds, and images:

Quote one:

In Shindand, this occurred very rarely, thank God, though we did get caught in shelling, in my line died three or four people, but this was very rare for one-and-a-half years.

But when I came to serve in Kabul, there it was different. There were no games there; that is, when I served in Shindand it was, it was normal there, you were caught in shelling, people died, but very few. In my column, for example, only one person died right in front of me. We were caught in an ambush in a storm. One soldier died then.

Quote two:

I [pauses] when I served in Kabul, I saw many corpses, [pauses] I transported them to the morgue by helicopter, and, you [are supposed to] get used to it, to this day I cannot get used to it.

For me this is a scary thing, no matter how banal that sounds, for me it is scary. It was a shock, the first time, of course. It was a person, and then he is lying in blood, and then the person isn't there anymore. [Long pause] The first time I saw this – but this didn't happen a lot – I threw up the first time. I was sick. Then the shock. When we came back to Shindand, we drank vodka for a long time.

Quote three:

But usually, when a regiment went on an operation, we were with the armour. Our job was security and provisions. I looked after foodstuffs, water, organisation of ammunition, collected the wounded and killed, transported them to the morgue in Kabul, or Bagram, whatever was closer.

Interview excerpt:

P1: 'We were once caught in a bombardment; thank God we were not that close. Our artillery started shelling us. In fifteen minutes we had twenty-four corpses, our people. In fifteen minutes, twenty-four human lives. The

Soviet artillery gave the wrong coordinates, a chief who is now a big man in the Russian army, but I don't remember his last name, some general.'

Anna: 'Did you know immediately it was your own attacking you?'

P1: 'Of course, the mujahedeen didn't have artillery.'

Anna: 'What was going through your head, knowing it was your own?'

P1: [pauses] 'What goes through your head? 'Fools, morons.' That chief, he was immediately removed after this. He aimed fire at our coordinates, it was his fault. They immediately expelled him from Afghanistan, so that he wouldn't go to prison [for this error].'

Anna: 'Do you remember the first time you killed someone?'

P1: [Very long pause] 'I cannot say to you that I killed anyone. [pauses] That is, I saw how others killed, I saw how others cut off ears of people ...

'The feelings are bad, terribly bad. I am telling you, after what you see there, you do not come back to your senses immediately.

'How this impacts on peaceful life, you do not think about this. You see what is happening [around you] and you are constantly under stress, under stress. You never know when you are going on the next operation and how many people will be lost, or who will be lost. No one knows anything.

'Everything that was seen there, after it [pauses] begins to germinate, those seeds that were implanted, they then sprout in peaceful life. You start becoming aggressive, I don't know. The bulk goes through this. The majority drinks, the majority [pauses] ahh, in general, there are very many people without jobs, and Chechen veterans who were in Chechnya, and those who were in Afghanistan, those who are unsettled, those who have problems in the family, lots of families were destroyed because of this.'

P2 spoke about his traumatic experiences in war; however, he does not believe that he was or is traumatised. Participant P2 noted examples of triggers that remind him of combat:

You remember the most extreme situations, and the funniest, and the initial [ones].

The initial memories, these are when we arrived there. Everything was not native, the heat is forty or fifty degrees, even in the shade, the smell was completely different, the air, too.

The smell was very specific, maybe the mountains, maybe the desert. The smell was the first thing that stayed in my memory.

Then you have difficult moments. Moments of losing your comrades are remembered. Success is remembered, when you destroy the enemy. War is a difficult thing; you young people don't understand this.

When you go into war, you are setting yourself up for one thing: either you kill or you are killed.

Interview excerpt:

Anna: 'Did Afghanistan leave an imprint on you?'

P2: 'Of course. Individually on each person ... frankly speaking, we dulled [memories and pain] with vodka.'

Anna: 'Did this go on for a long time?'

P2: [pauses] 'How long, it's not a secret, but when your comrades perished, it was very difficult to handle. When you collected them yourself, bone by bone. Saw all of this yourself, what blood is, what bones are. Such things you only experience yourself, and it's very difficult for your psyche to handle/cope with this.'

When asked if the war had changed him, P2 described triggers of fear and his changing temperament:

In my character, I became, how do I say, more judicious [sensible, reasonable], more mature, more tough [hard]. Any softness that remained in me disappeared. War hardens a person. He becomes stern [severe] just [fair] ...

I was afraid of cars. The year that I was there, I became unaccustomed to cars, because they practically don't exist on airfields. And when I was crossing the road, when I came [back] for a vacation [leave] to see my parents, and if a car was breaking for pedestrians. This scared me, it was something savage, I would turn around in fear. I didn't fear bullets as much as I feared the screech of a breaking car.

P3 is diagnosed with PTSD. P3 stated that all men were traumatised by the war, supporting the position that some veterans are in denial about their experiences and trauma. P3 was not able to discuss any traumatic events during our interview, and at one point dissociated before breaking down in tears.

P4 echoed the position of P3, that psychological trauma remains with all veterans. P4 experienced traumatic events, including the loss of a friend in battle. The following interview excerpt includes a discussion between P4 and his current wife, P10:

P4: 'It [psychological trauma] remains with anyone [everyone].'

P10: 'But pronounced [trauma]?'

P4: 'Of course it's pronounced. I yell at [P10] every day [he jokes; P10 laughs].'

P10: [laughing] 'Leave the jokes and humour for later.'

P4: 'What trauma? After the war, all of us went through alcoholism, through anxiety [nerves], through everything.'

Anna: 'You went through this, too?'

P4: 'What, this?'

Anna: 'Alcoholism?'

P4: 'Nerves. Nerves. Nerves. Alcoholism, we didn't have. But vodka, we did drink quite hard.'

Anna: 'What emotions come up when you think back to Afghanistan?'

P4: 'Tears flow.'

P10 is the second wife of P4 and stated that P4 did, in fact, go through a prolonged period of alcoholism (for a detailed discussion, refer to section 6.4.1). P10 further stated that she cannot be sure if his psychological welfare is the result of his traumatic experiences at war or if it is hereditary:

He is a very emotional person, so to say what was influenced by Afghanistan, I cannot say, because I didn't know him before the war, and his whole family is quite emotive. [Laughs] They are stubborn like I don't know who else [laughs while saying this].

P10 described a scene in which flashbacks and nightmares resulted in P4 physically attacking her:

I think in the whole time we have been together, I remember two or three times when he awoke at night [from nightmares]. In the whole time, fifteen to twenty years we're together, once, I woke up from him strangling me [laughs]. He dreamed of Spirits (Mujahedeen) [continues to laugh].

P5 stated that his traumatic experiences impact him now rather than when he was younger, and are partially related to the negative socio-political climate in Russia:

Ah, most likely it exists. We were wounded in our heads, our bodies, and our hearts. The thing is, psychological trauma, it's – we were young, and we didn't notice it.

P6 commented that he does not believe he is traumatised, but that Afghanistan remains in him. Despite this, P6 conceded that he sometimes breaks down, does not notice his aggression, and that he does have triggers ('Sometimes, an association happens, I don't know, sometimes something happens, and you remember') and he reverts back to a combat space. These include triggers such as sounds:

Anna: 'Artyom Borovik wrote that Afghanistan stayed in everyone's blood that fought there. Do you feel that Afghanistan is in your blood?'

P6: 'You know, I think, that if you take not just Afghanistan, but any conflict, I, you know, broke my arm as a child and things like that, to forget is impossible. You always remember. Some say that you forget the bad, and only keep the good. This isn't the truth. Everything remains.'

'Everyone who was in Afghanistan remembers Afghanistan. This is the same for Syria, and Chechnya, and Vietnam – everyone remembers.'

'But does it stay in your blood? That's a different question. I can speak for myself, if before, when my children still lived with us, I tried to hold myself together – I didn't see them often, I would come home and they were asleep and I would leave in the morning and they were asleep – now I live with my wife as my kids have their own homes, and sometimes I break. Even though I understand that I might not be right, but sometimes [my wife] may say something and I will answer, and to her my answer seems aggressive, but to me I think I am responding well, perhaps a bit emotional. But she says, "You are yelling; you are arguing, you are quarrelling with me." I don't notice this.'

Anna: 'So, something is left?'

P6: 'Of course, something is left.'

P7 discussed the traumatic events he experienced during the war, including the loss of friends and comrades in battle. P7 further suffered a traumatic physical injury during the war. P7 stated that he believes he was traumatised by the war, and that all veterans of combat are traumatised. P7 attends a veteran's hospital for physical and psychiatric treatment, and notes that triggers revert him back to a combat space:

Anna: 'After the war, have you had moments of intense anxiety, bad sleep anything like that?'

P7: 'Oooh, yes, there was [says this in almost a singsong fashion, stretches out the words a bit]. After watching movies [pauses], and the wife said, "We are not going to see any more movies about Afghanistan," ... after these movies, always something happened at night to me.'

Anna: 'Has your wife ever said that she notices your trauma?'

P7: 'I never drove her to that. But she has said that after certain [war] movies that we will not see such movies again because in the night I was screaming.'

P8 is the widow of a veteran of the Soviet–Afghan war, killed in action. P8 spoke how the trauma of losing her husband impacted her life – stating that all was lost; describing it as 'You were killed there only once, but here we are killed every day'; P8 stated this is 'a key phrase about our life' – and how the children of fathers lost in the war experience an unsettled life, compared to those whose fathers have returned from combat:

Our children, our Afghanistan's children, children whose fathers died [in Afghanistan], are the most unfortunate, unlucky, unhappy children in the world ...

[P8 states that those children who lost their fathers in Afghanistan before the age of five, have the most frightening lives, including her son.] ‘They are practically unsettled in life. They do not have families, practically none of them ...

‘Imagine this, Anutka [‘Anutka’ is a Russian diminutive of ‘Anna’]: my son missed having a father so much, no child went with their mother to a tavern to find himself a father. “Why don’t I have a father? Let’s find a dad. Let’s get a dad.”

After our first interview, P8 and I spoke again. She stated that our first discussion distressed her into a state of insomnia:

Everyone has different reactions to this. Some people don’t sleep at night. After my conversation with you, I didn’t sleep for two nights.

P9 is the mother of a veteran of the Soviet–Afghan war, killed in action. P9 commented that she is still in a state of denial and shock following her son’s death and continues to speak with him in her apartment. P9 spoke about the communal trauma perpetrated by the war, in which a generation of young men were killed:

Anna: ‘[Name redacted] said that he still lives with you?’

P9: ‘He is in my heart. I do not feel that I buried him. Firstly, I did not see him in the coffin. They only showed me his things in a bag. Ah, since I saw him off in 1985 [after the hospital], I am still waiting for him. I go to his grave, I go to the obelisk. I know it is documented, but in my heart, he is alive.

‘I speak with him. I wake up, “Good morning, my sunshine, I am awake.” Going to sleep, I pray to God and ask him for a blessing for us, and tell [my son] “Sonny, good night.” I speak with him. I tell him stories at his grave, tell him what is happening in the family.’

Anna: ‘Are you still waiting for him to come home?’

P9: 'Yes. Yes, I am waiting.'

Anna: 'What would you say was the impact of this war on the former Soviet Union, on the men and women who were there, and on the people back home?'

P9: 'Swept away a whole generation in thirteen years, all the young. The best of the best, the best. The hooligans and monsters stayed alive [because they didn't go in the war], but our boys who made themselves, my son, he made himself who he was, he fought to be who he was; he fought to be there.'

P11 is the child of a veteran of the Soviet–Afghan war. P11 described a violent, abusive home life, in which his father physically assaulted him, his sibling, and his mother. P11 shows signs of intergenerational trauma transmission, which will be discussed in detail in section 6.4.12.1. The following excerpt highlights why P11 believes that his father was traumatised during the war in Afghanistan:

Anna: 'Do you believe that your father was traumatised by his time in Afghanistan?'

P11: 'I think so. He never talked about it sober. We could never have a good conversation about it, he would always get emotional, [long pause] and I, ah [exhales] I never really understood it until you go through it, where you just kind of don't wanna talk about it and, even then, when you do talk about it, like, you don't really need to, because you understand. The only time you really talk about it is with people when you share specific incidences, but, but really, my curiosity [about his father's time in Afghanistan] faded after I had experienced it for myself.'

'But in short, I think he, I think he was.'

Anna: 'Did your father ever get an official diagnosis of PTSD or trauma, or is it more your observations?'

P11: 'It's my observations because, as far as medical, I don't know of anything he may have received service-wise before we moved [back to Ukraine], and then he never sought it here [US]. I think it's more of a culture, you just man up and you just keep moving on.

'Even here in America, PTSD is kind of taboo. I'm fifty per cent disabled and I did not put PTSD down, because of the sti— [interrupts himself before finishing word "stigma"] I didn't want to be labelled. I want to keep my options open and I want to be in law enforcement eventually, um, right now I work security at a hospital and I enjoy what I do. That's why I haven't moved on.

'I just could imagine that anybody would probably look negatively at a veteran who has posttraumatic stress, as more of like a bomb with a short fuse. So, I didn't want that. I never sought it. So, I can't imagine how he [father] felt because we're raised to be tough: crying wasn't an option; complaining wasn't either. You just do.'

Anna: 'Do you feel there was a denial on your father's behalf about what he was going through?'

P11: 'I don't think he'd ever admit that it was linked to that [his behaviour, alcoholism linked to trauma from war or experiences at war]. Um, [pauses] he didn't really have any other traumatic or anything crazy happen in his life, besides those two years [during Afghanistan service]. Besides his father dying early, it seemed like he had a normal childhood, from what I remember, his siblings and his mum, they were normal people for what normal is, or was, in the nineties when my memories were formed. That's why I'm pretty certain that the main stressor in his life that kind of made him, I don't know, not be living, I guess, positively is that [service in Afghanistan].'

P12 is the child of a veteran of the Soviet–Afghan war. P12 does not believe that trauma was present in his father during or following his service, instead suggesting that

the war left an imprint on his father. However, in the interview, he describes scenes of traumatic triggers experienced by his father and paranoia, suggesting a hyper-alertness, and PTSD-like symptoms:

I think trauma wasn't present, but [the war] left a very strong imprint [on him], because in how this looks to me, [pauses] as the service was contiguous with ongoing danger ... my godfather would tell me that, after the army, [my] father became, he changed in the direction of where everything became sharper, stricter, everything punctual, that is, [the war] influenced him in a way that became – not that it was under constant threat – but in imaginary or a possible threat, and this impacted him from the perspective that he became serious, he matured by a lot and very quickly.

In the following interview excerpt, P12 elaborates on his belief that an imprint was left on his father during the war:

Anna: 'You said that you don't think your father has PTSD, but do you think that there is any trauma?'

P12: 'Yes, I think that, ah, that there is a definite imprint, on his memory ... When you fall asleep, somebody can kill you, so, you can't sleep, because there is now always a perceived danger.'

Anna: 'Did you ever notice any signs of PTSD – did he ever shows signs of anxiety, or looking out for an attack, or trying to isolate you or your mother?'

P12: 'One time, we were on holidays, ten or eight years ago, in Crimea, and I noticed a clear sign of this. Near us, a gas cylinder exploded, a very loud explosion, and in this moment, it was very clear. Immediately, in one movement, he grabbed my mother, and in the next movement, grabbed me and immediately removed us from the wave of the explosion, so to speak. I then heard that this instinct came from his service. This was the clearest sign.'

'Accordingly, he set many examples for me: you always must be assembled and collected, you always must be ready for everything. And I think that this is an imprint of what had happened on the border during his service.'

Anna: 'Was your father aggressive?'

P12: 'Yes, yes, yes. I believe ... but, I'm not ready to concede one hundred per cent that this was an influence of the army. Perhaps, this was just his character. So, to say, this is definitely because he was in the service in the war, and that is why he was very aggressive, I do not think that is the case. Again, [the army] left its imprint [on him], however, not totally. I believe this.'

6.4.12.1 Intergenerational trauma transmission

The 'Trauma' subtheme of 'intergenerational trauma transmission' presented in three observations, including from P1, P11, and P12. One participant is a veteran of the Soviet–Afghan war; two participants are children of veterans of the Soviet–Afghan war. It is important to note that the evidence presented here cannot be viewed wholly as causative, because this small sample-size cannot be generalised. Instead, these are presented as strong correlates between the trauma experienced by veterans and the trauma experienced by their children during childhood, including ongoing mental-health issues today. Participants who stated they believe that their father's trauma was transmitted intergenerationally will be presented as such. It is further vital to note that, given the sensitive nature of the topic, the majority of veterans stated that their relationship with their children is good or positive – again, this might suggest that their answers are related to the image that participants want to project of themselves, and that participants might be disinclined to admit to a negative relationship with their children as a result of their treatment of their children following combat.

P1 is diagnosed with PTSD and has three children, all of whom have or continue to deal with mental illness. P1's children experienced and witnessed physical and psychological abuse perpetrated by the father during their childhood.

P11 believes that his father's combat-related trauma was transmitted to him and his siblings through a violent and abusive upbringing. Domestic violence and child abuse were a common occurrence in their family home, with P11 experiencing physical and psychological abuse, and witnessing the abuse of his sibling and mother. P11 has himself served in Afghanistan and Iraq, after which he was diagnosed with PTSD. Despite this, he believed the trauma he experienced during childhood had a more negative impact on him and his development.

The following quote shows P11 comparing these deaths and his own trauma to the impact his father had on him as being easier to work through, while the trauma from his father's impact on him was much worse and difficult to deal with:

'So, like dealing with just that aspect of it, and dealing with my own injuries and my own traumas, that's the simple part compared to going so deep as to my adolescence, my young age, where the influence that my dad had on me kind of made me who I was.

'And honestly, it did make this a lot [more] difficult, because here I am, maybe not dealing with things that are coming at me in life [in a] healthy [way]. I'm wondering, "Why is that? Oh, I was never taught," you know? I never had an older brother, unfortunately, you still kind of look up to people whom you find as role models, I hung out with, I was fortunate enough to have fifty-fifty, you know, good and bad influences ...

'The main difference between me and my dad is [pauses] I can ask for help. Honestly though, if it wasn't for my wife and kids, I probably would not have a reason, you know. I went through a suicidal phase for a long time [pauses] realistically, [pauses] um, if it wasn't for my kids – because even a spouse can't save you if you don't want to be saved – I mean kids can't either, but if you have something to live for, then the main reason I

didn't want to, you know, end it – and I'm fine now. Please don't call the police, I'm not going to do anything [small laughter] – is because I realised I don't want to have a negative effect on my kids as much as my dad did on me. So as much as I can help it, I will continue to keep going.'

P11 has a history of drug and alcohol abuse, and mental illness. P11's middle brother died of a drug overdose, aged 28. He also exhibited signs of anxiety and mental illness:

Anna: 'Do you think your father's trauma transmitted to you?'

P11: 'Yeah. I believe so.'

Anna: 'More the family environment, more the nurturing side, or do you think you also had symptoms that mimicked his illness [trauma] like anxiety, for example?'

P11: 'Yeah, I mean, anxiety's the first one, um [pauses], like probably depression as well, because after every incident, you're kind of withdrawn yourself and depressed, because it takes such an emotional toll on you that once you're up here [gestures the "up-to-here" move with hand], you're going to crash and, coupled with that and the fact of what's going on, I could definitely see how the depression was there. [long pause] The main two I would probably say: anxiety and depression.'

'I think the levels of PTSD I've experienced, the traumatic stress that he caused from him [father], like, is dwarfed, if that makes sense. Like, I don't even think about because I've had to deal with other things, and I can definitely draw a direct link from my experience now or who I am now to how he affected me then.'

'I'm living being anxious of what's going to happen, and the lack of control, stability – like, we did not have a stable home [when he was growing up]. And as a kid, everybody wants to be able to have some measure of control in their environment, even if it's just – like, kids love routine – even if it's just being a routine. We had a chaotic routine and a tense environment when you're kind of [pauses] anxious. That's why I

think both me and my brother went into substance abuse, because we just wanted to not deal with it, [wanted to] escape or put it on pause. We were never taught healthy coping mechanisms 'cause we lived in an unhealthy environment.

'I would say that there is a direct link with him [father] transmitting the trauma.'

Anna: 'Do you think your childhood traumatised you?'

P11: [Long pause] 'Yeah. I mean, I think I kind of answered this question with the other question. Because the way he treated us was my childhood.'

'Ah, yes or no? Yes.'

P11 stated that he sees himself in his father, and is consciously working hard to not become him within his own family and with his children:

Anna: 'Do you see yourself in your father; do you see some of his characteristics?'

P11: 'Yeah, unfortunately yes. Very [pauses] very close, like very similar. Um [pauses] ...'

'I have to be very conscious to *not* be him. So, if I, like yeah, I have to be very conscious and intentional [not to be like his father], otherwise I revert to just that way of thinking. It's been three or four years since I've kind of, since I've had my OD.'

'I overdosed, had a hard time from [serving in the] military, where I actually started actively dealing with my issues. Most of that I've [done] on my own. Even though, VA, Veteran Affairs, the US government, they provide you with resources and, uh, stuff like that, I tried saying I had anxiety, you know, thinking that PTSD won't be flagged, but in trying to do that I don't like the way they're doing things, it's going to make me crazy. And of course, they prescribed you pills, mostly like benzos or downers,

um, because I had a couple of surgeries after I got out, on my hip and on my chest, that's how I got addicted to Vicodin and Oxycodone and stuff like that. [Long pause]'

Anna: 'Is you trying not to be like your father, is that coming from you being his son and that influence, or is it also related to your own trauma from serving in warzones?'

P11: 'If it was one or the other, it would definitely be [pauses] my dad. Because the military, all it did, it was kind of like the concrete, you know, but the barrier that I was born into was kind of set. And even now, going through my experiences, all I have to do is just kind of put them on a shelf; I had to deal with friends dying. After the military, I had people who've killed themselves, who've Oded, who've killed their family and then themselves [murder suicides], believe it or not.'

P11 continues to have a distant relationship with his father.

P12 experienced physical and emotional violence during his childhood, perpetrated by his father. P12 described instances where, as a child, his fear of his father was so intense that he began to physically tremble and was doubly afraid, because he did not know what his father was capable of doing to him. P12 discussed the influence that his father's violence and aggression had on him in his childhood, the impact of which he continues to feel, including his own issues with controlling temper and aggression. P12's interview suggested the transmission of trauma via a familial environment, with P12 specifically commenting that he believes the imprint the war had on his father was transferred to him:

Anna: 'Do you think this influenced you and your character?'

P12: 'I think that, yes, because my father is my example. Yes, this definitely influenced [me]. Because I am in everything ... we don't have a very good relationship. Perhaps, you know about problems of fathers and sons, and you can definitely say this about us.'

Anna: 'Do you think the problems you've had and have with your father are related to his service?'

P12: 'Not one hundred per cent; not wholly, but partly it can be, I agree with that. That likely part of it is, but not the whole reason.'

Anna: 'Were there moments where you feared your father?'

P12: 'Yes. Ah, during his blowing up like a volcano [does a little exhale laugh while saying this], you know, if you get under his arm [Russian expression] at the wrong place and wrong time, then, yes, I was afraid of my father. Because, I didn't know what he was capable of doing [to me]; that is, in that moment he was very heated, ah, and in reality, it was very scary.'

'Now that I have grown up and become bigger [physically], it now doesn't scare me as much, but then [when he was a younger kid, a little child] it was very frightening, to the point of trembling.'

Anna: 'Do you have any psychological or emotional issues?'

'I, likely, am like my father, that is, I easily get wound up. Again, after the army [P12's time in the army, not his father's], I don't know why, my close friends told me about this, that I became abruptly hot-tempered. That moment, when you explode like a volcano, when the match lights up, all in a split second – before the army, I never noticed this in myself. That is, something was there [in terms of aggression] but not to this extent.'

Anna: 'So, there was something like this before the army, too?'

P12: 'A little. Yes, a little.'

Anna: 'Do you think this is a character trait you've inherited from your father?'

P12: 'I think so, yes. Because, [my] mother is calm, very calm. My father is different, he is angry [pauses] and I think that this is that influence, which you are looking at for your work. Probably yes.'

Anna: 'Do you see yourself in your father, or your father in yourself?'

P12: 'Mmm, [pauses] partly, [exhales; short pause] only partly.'

Anna: 'And you don't like that?'

'Um, [long pause] ah, like, my father is an example to me [pauses] but it's an example I can never reach. [Pauses] I will never be able to reach his example because a father can do everything, um, but this is already a new topic.'

'Do I see myself in him? Partially, not in everything.'

'In a lot, I do not see myself in him.'

Anna: 'What about your character/nature?'

P12: 'Yes. [says this frankly]'

Anna: 'What about your mindset?'

P12: [Pauses] 'Mindset, no.'

Anna: 'Emotionally?'

P12: 'Emotionally, yes.'

Anna: 'Would it be right to say that that imprint you spoke about, which he has from the war, that this translated to you?'

P12: 'Yes, yes. Yes, I believe so, yes.'

6.4.13 Violence outside the home

The theme of 'Violence outside the home' presented in two observations, including P1 and P11. P1 is a veteran of the Soviet–Afghan war; P11 is the child of a veteran of the Soviet–Afghan war. This theme presented during interviews, with participants recounting scenes in which a veteran was known to be violent with strangers, or friends, outside of the home environment. Both veterans who demonstrated this violence also showed violent actions within the home, by physically and psychologically assaulting their children and partners.

P1 has been arrested and attended court for a violent physical assault of a stranger.

P11 described scenes in which his father would get into physical altercations with others, including friends, when intoxicated.

6.4.14 War and identity formation

The theme of 'War and identity formation' presented in five observations, including from P2, P3, P7, P8, and P9. Three participants are veterans of the Soviet–Afghan war; one participant is the widow of a veteran of the Soviet–Afghan war; one participant is the mother of a veteran of the Soviet–Afghan war.

Five participants in this study showed that their everyday identities were based around the Soviet–Afghan war, those of veteran, widow, or mother of the dead. Their existence and their work revolve around this identity, and includes community outreach, support groups, fundraising, and education. These identities also show a level of status within the community. Spradley discusses the acquisition and maintenance of status, stating that symbols of status are part of every society and cultural scene, and that 'people often strive to achieve and to maintain [symbols of status] once they are achieved' (1980, p.153). This identity formation may be part of a status symbol within a community.

This theme is partially linked to the theme of 'Makeshift group therapy' (discussed in section 6.4.8), because the veterans and family members of veterans continue to gather in support of each other, to remember, and to speak about the war.

P2 showed a slight relationship to this theme in his discussion of the impact of Afghanistan, and that the war is still part of him. He additionally discussed the support and training he provides to younger men in the military: 'Of course, it will be with me my whole life! Of course.'

P3 spoke about his identity being changed by the war because he has become hyper-aware of how people view him as a veteran with PTSD. The war shaped his identity as a veteran, who continues to work on showing the community that a veteran with PTSD 'is a human; not a monster' [the following excerpt is taken from a join interview with P3 and P9]:

P3: [Pauses] 'How my life changed? Of a surety, appeared a craving for life. I began to appreciate life more. Stopped consuming unnecessary things, like narcotics, drunkenness, because after the war, you start appreciating [life] differently, looking at things very differently, and you feel sorry. Life is only bestowed once, and you don't want to destroy it, waste it on all sorts of nonsense. You want to live humanly, so that you are not ashamed yourself, or in front of your children, grandchildren, in front of your family, your family, so that they would not say, 'Came back from Afghanistan [overly long pause] ...

P9: 'and didn't find yourself, didn't find the strength to change [pauses], yes, [life] in a good direction.'

P7 commented that he lives the war on a daily basis, and that it influences all parts of his life and work, from attending schools and colleges with comrades to giving talks on

the war to students. When asked if he feels that the war occurred 'just yesterday', P7 further showed how the war formed his current identity by stating that the experience is his, and that no one can take it away from him:

No one can take it away from us. I live only it ...

That is how it is, and that is how it will be. And we will die feeling this way. It was yesterday, and I can't live without it. It's mine, and you can't take it away.

P8 is the widow of a veteran of the Soviet–Afghan war. Following his death, P8 established a local organisation in support of widows and families of war dead in 1989, 'Union of families of war dead in Afghanistan and local military conflicts'; the organisation continues their work to this day. P8's identity is intertwined with the death of her husband, and she has become the 'widow of a veteran killed in action in Afghanistan' as well as a 'saviour' in her dedication to helping others impacted by conflict. P8 briefly commented on people within the community who attempt to capitalise on their loss by encompassing the identity of widow, or parent of the dead, supporting Spradley's discussion around maintenance of cultural status (1980, p.153).

Not always do the living understand the dead ... There are mothers who live in their grief, and there are those who profit from their grief. Such categories also, unfortunately, exist.

P9 is the mother of a veteran of the Soviet–Afghan war, killed in action. P9's identity has become intertwined with the death of her son in 1985, and continues to this day through her community outreach and education.

CHAPTER 7: DATA ANALYSIS AND RESULTS: QUANTITATIVE ANALYSIS – QUESTIONNAIRES

7.1 Introduction

The quantitative analysis of survey data focuses on 15 valid survey responses collected in 2017. Responses were coded numerically and data are presented in a mixture of text, table, and chart form. For a detailed review of the survey response rate, refer to section 7.2.2.

7.2 Analysis and findings

7.2.1 Respondents' age and frequencies

- The mean age of survey respondents was 33.07 (Table 3).
- The median age of survey respondents was 32 (Table 3).
- The youngest survey respondent was 23 (Table 3).
- The oldest survey respondent was 45 (Table 3).

Table 3. Age of respondents

Number	Valid	15
	Missing	0
Mean		33.07
Median		32.00
Mode		26 ^a
Standard deviation		6.408
Minimum		23
Maximum		45

^a Multiple modes exist. The smallest value is shown.

Table 4. Age of respondents – frequency

		Frequency	%	Valid %	Cumulative %	
Valid	23	1	6.7	6.7	6.7	
	26	2	13.3	13.3	20.0	
	27	1	6.7	6.7	26.7	
	29	1	6.7	6.7	33.3	
	31	1	6.7	6.7	40.0	
	32	2	13.3	13.3	53.3	
	33	1	6.7	6.7	60.0	
	35	1	6.7	6.7	66.7	
	37	1	6.7	6.7	73.3	
	38	1	6.7	6.7	80.0	
	40	1	6.7	6.7	86.7	
	42	1	6.7	6.7	93.3	
	45	1	6.7	6.7	100.0	
	Total		15	100.0	100.0	

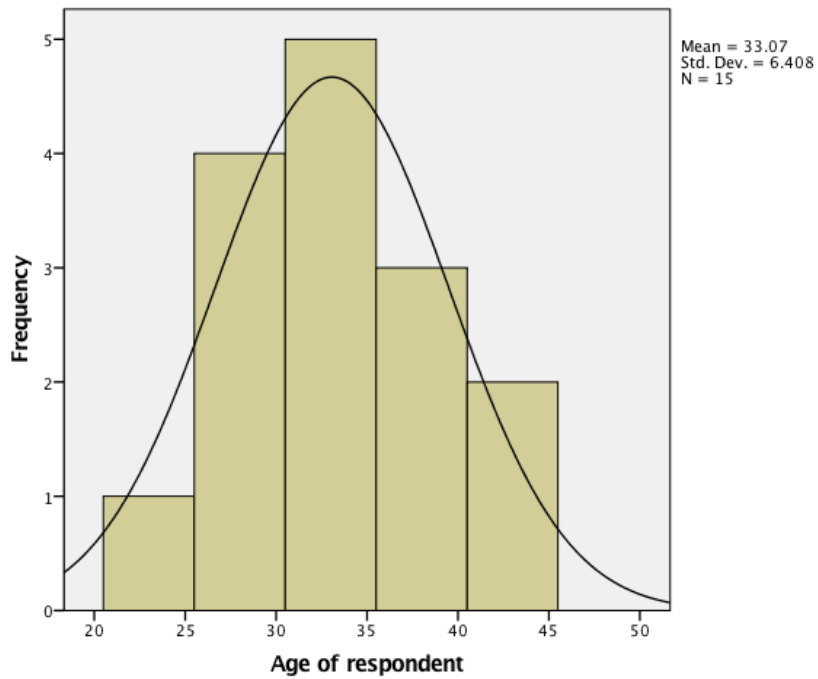


Figure 1. Frequency histogram

7.2.2 Respondents' gender and frequencies

- 80% of survey respondents identify as male (Table 5).
- 20% of survey respondents identify as female (Table 5).

Both Russian language and English language surveys offered the options of 'non-binary', 'other', and 'prefer not to say'.

Table 5. Gender of respondents

		Frequency	%	Valid %	Cumulative %
Valid	Female	3	20.0	20.0	20.0
	Male	12	80.0	80.0	100.0
	Total	15	100.0	100.0	

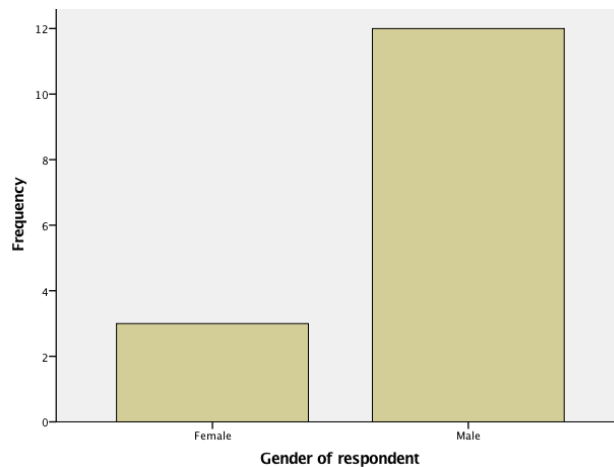


Figure 2. Gender of respondents

7.2.3. Respondent location and nationality, frequencies

- Survey respondents' country of residence included Australia, Ukraine, United States, Russia, and Kazakhstan (Table 6).
- 26.7% of survey respondents were from the West (Australia and United States) (Table 6).
- 26.7% of survey respondents were migrants (emigrated from Eastern Europe to the West) (Table 6 and Table 7).
- 73.3% of survey respondents were from the former Soviet Union (Ukraine, Russia, and Kazakhstan) (Table 6).
- Survey respondents' nationalities included Australian, Russian, Russian-Ukrainian, Ukrainian, and Lithuanian (Table 7).
- 6.7% of survey respondents reported a Western nationality (Australian) (Table 7).
- 93.3% of survey respondents reported a nationality from the former Soviet Union (Russian, Russian-Ukrainian, Ukrainian, and Lithuanian) (Table 7).

Table 6. Respondents' country of residence

		Frequency	%	Valid %	Cumulative %
Valid	Australia	3	20.0	20.0	20.0
	Ukraine	3	20.0	20.0	40.0
	United States	1	6.7	6.7	46.7
	Russia	7	46.7	46.7	93.3
	Kazakhstan	1	6.7	6.7	100.0
	Total	15	100.0	100.0	

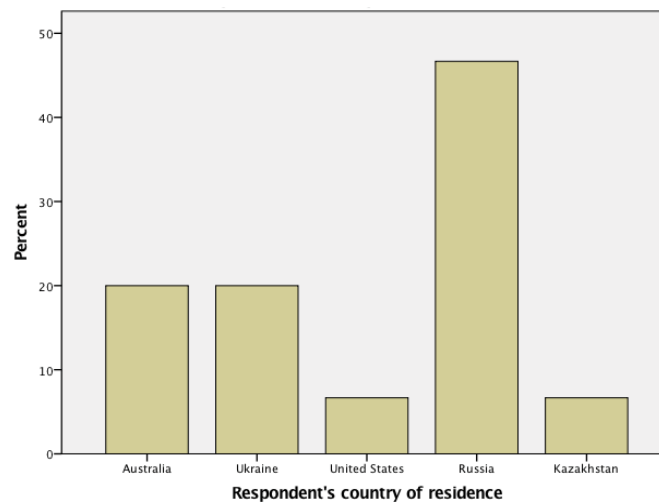


Figure 3. Respondents' country of residence

Table 7. Respondents' nationality

		Frequency	%	Valid %	Cumulative %
Valid	Australian	1	6.7	6.7	6.7
	Russian	9	60.0	60.0	66.7
	Russian-Ukrainian	1	6.7	6.7	73.3
	Ukrainian	3	20.0	20.0	93.3
	Lithuanian	1	6.7	6.7	100.0
	Total	15	100.0	100.0	

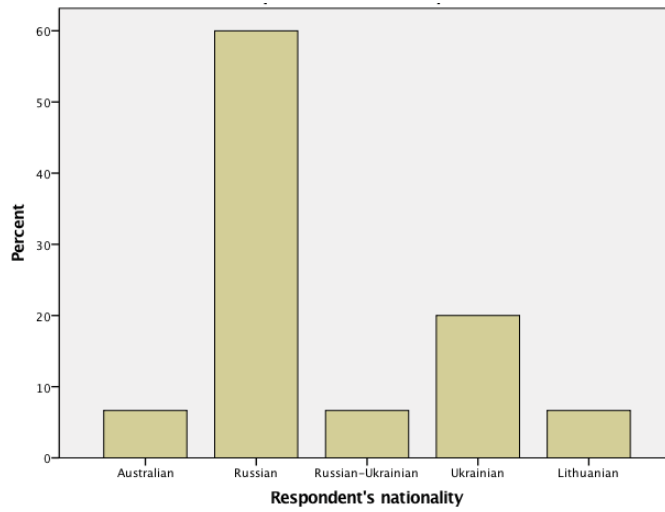


Figure 4. Respondents' nationality

Table 8. Does respondent reside in the 'West'?

		Frequency	%	Valid %	Cumulative %
Valid	Yes	4	26.7	26.7	26.7
	No	11	73.3	73.3	100.0
	Total	15	100.0	100.0	

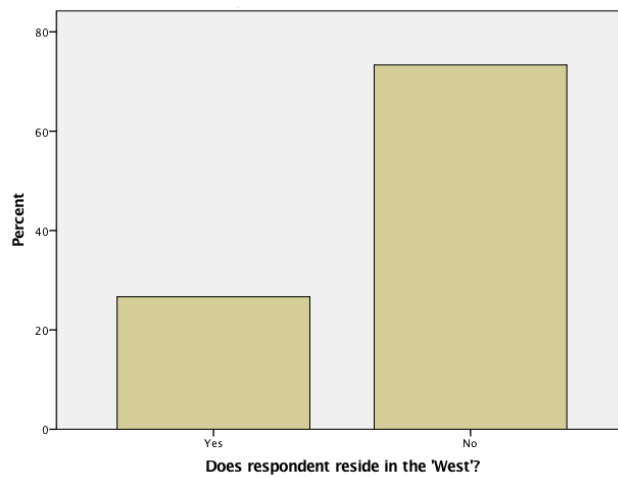


Figure 5. Does respondent reside in the 'West'?

7.2.4 Respondent relative served in Soviet–Afghan war (any period between and including 1979 and 1989)

A qualifying question confirming relative served in Soviet–Afghan War was used as the first question in the study.

- Survey participants’ veteran relatives varied from Father, Mother, Uncle, Brother, and Great Uncle (Table 10).
- Father was the highest value for veteran, at 11 (61.1%); Great Uncle was lowest value for veteran at 1 (5.6%); Mother, Uncle, and Brother were all at 2 (11.1% each) (Table 10).
- A total of 18 veterans were reported from 15 survey respondents (Table 10).
- Participants who reported relatives other than Mother or Father qualified for this study as the relative was part of the respondents’ upbringing and participated in their parenting and childrearing (Table 10).

Table 9. Case summary

	Cases					
	Valid		Missing		Total	
	N	Percent	N	Percent	N	%
Served frequencies (qualifying)	15	100.0%	0	0.0%	15	100.0

a. Dichotomy group tabulated at value 1.

Table 10. Relative served frequencies

		Responses		% of Cases
		N	%	
Respondent relative	Father	11	61.1	73.3
	Mother	2	11.1	13.3
	Uncle	2	11.1	13.3
	Brother	2	11.1	13.3
	Great uncle	1	5.6	6.7
Total		18	100.0	120.0

a. Dichotomy group tabulated at value 1.

7.2.5 Mental-health diagnosis for veteran relative and frequencies

One survey respondent (6.7%) selected 'yes' to the question 'Was relative medically diagnosed with any mental-health condition (including PTSD or war-related trauma) following their service in the Soviet–Afghan war?' The positive response related to the father of the respondent, who was medically diagnosed with PTSD following his service in the Soviet–Afghan war of 1979–89 (Table 11 and Figure 6).

Out of 13 valid responses, eight survey respondents (53.3%) believed that their relative was traumatised by their combat experience (selecting 'yes' to question 'Do you believe this relative had PTSD or war-related trauma, but was not diagnosed?') compared to five survey respondents (33.3%) who did not (selecting 'no' to the same question) (Table 12 and Figure 7).

Table 11. Was relative medically diagnosed with any mental-health condition (including PTSD or war-related trauma) following service in the Soviet–Afghan war?

		Frequency	%	Valid %	Cumulative %
Valid	Yes	1	6.7	7.1	7.1
	No	13	86.7	92.9	100.0
	Total	14	93.3	100.0	
Missing	NA	1	6.7		
Total		15	100.0		

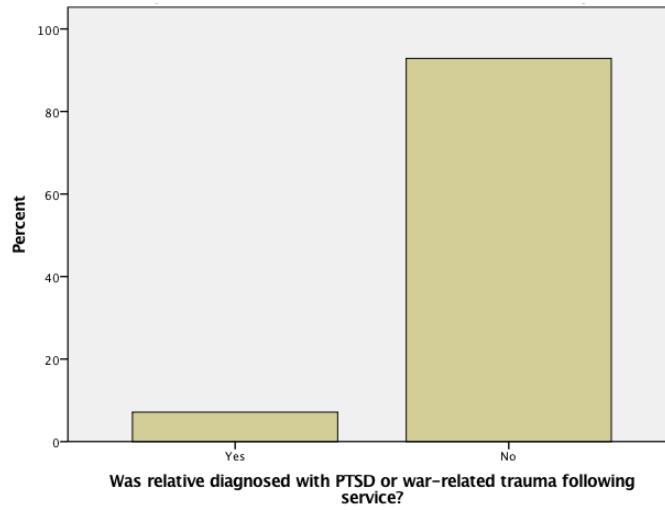


Figure 6. Was relative diagnosed with PTSD or war-related trauma following service?

Table 12. If NO, do you believe they had PTSD or war-related trauma, but were not diagnosed?

		Frequency	%	Valid %	Cumulative %
Valid	Yes	8	53.3	61.5	61.5
	No	5	33.3	38.5	100.0
	Total	13	86.7	100.0	
Missing	NA PTSD Diagnosed	1	6.7		
	NA	1	6.7		
	Total	2	13.3		
	Total	15	100.0		

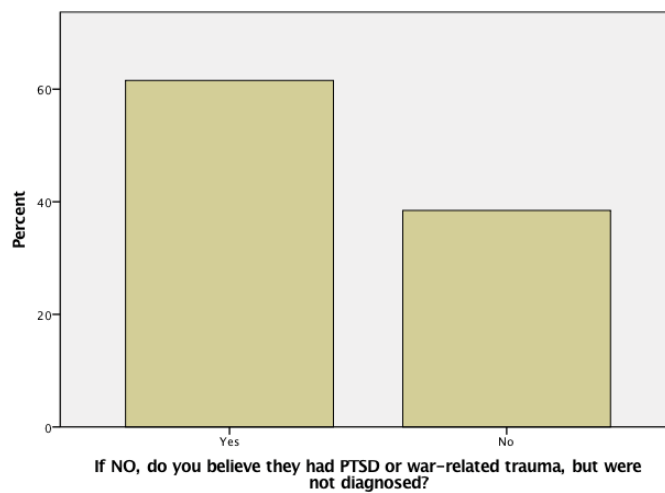


Figure 7. If NO, do you believe they had PTSD or war-related trauma, but were not diagnosed?

7.2.6 Relative who respondent believed was undiagnosed with mental-health condition (including PTSD)

Out of eight valid responses, Father was selected seven times (77.8%) as a veteran undiagnosed with a mental-health condition related to combat experience; Uncle and Great Uncle were both selected once (11.1% each) (Table 14).

Table 13. Case summary

	Valid		Cases Missing		Total	
	N	%	N	%	N	%
	Undiagnosed Trauma ^a	8	53.3	7	46.7	15

^a Dichotomy group tabulated at value 1.

Table 14. Undiagnosed trauma frequencies

		Responses		% of Cases
		N	%	
Respondent Believes Relative Undiagnosed, by type ^a	I believe Father has PTSD or war-related trauma	7	77.8%	87.5%
	I believe Uncle has PTSD or war-related trauma	1	11.1%	12.5%
	I believe Great Uncle has PTSD or war-related trauma	1	11.1%	12.5%
Total		9	100.0%	112.5%

^a Dichotomy group tabulated at value 1.

7.2.7 Comparison of survey respondents currently residing in the West versus former Soviet Union countries, and their response to the question ‘Do you believe veteran relative had PTSD or war-related trauma, but was not diagnosed?’

- Out of 13 valid responses, all survey respondents (30.77%) who have emigrated out of the former Soviet Union and now reside in a Western country, selected ‘yes’ to the question (Figure 8Figure 9).
- 30.77% of survey respondents who reside in a former Soviet Union country selected ‘yes’ to the question (Figure 8Figure 9).
- 38.46% of respondents who reside in a former Soviet Union country selected ‘no’ to the question (Figure 8Figure 9).

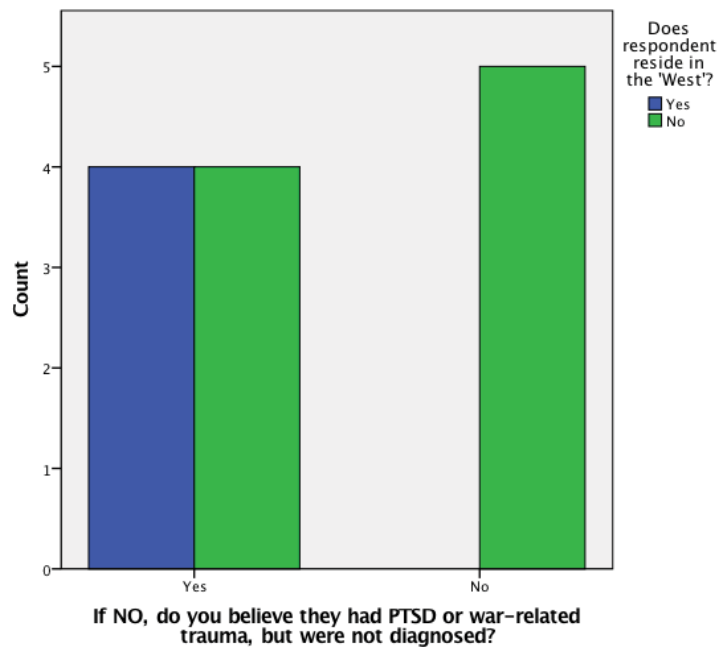


Figure 8. Number of respondents with relatives who had undiagnosed PTSD or war-related trauma

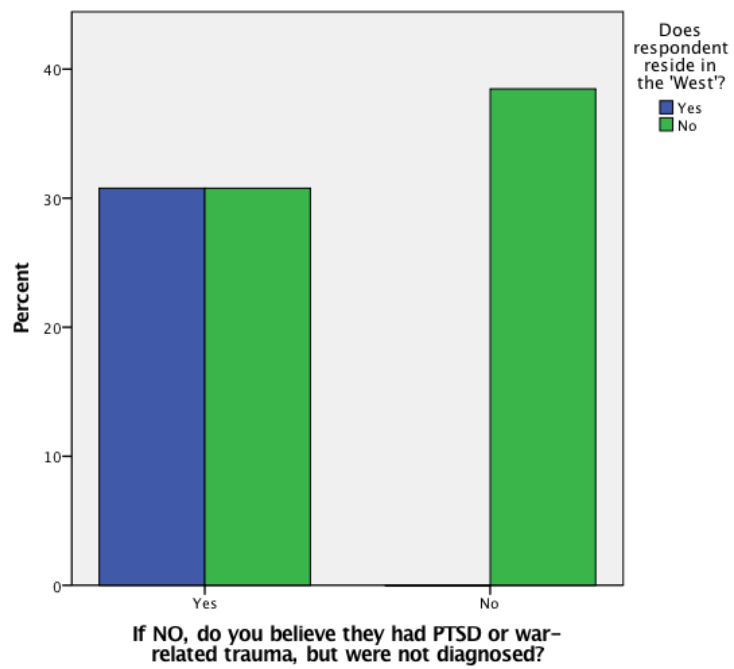


Figure 9. Percentage of respondents with relatives who had undiagnosed PTSD or war-related trauma

Table 15. Does respondent reside in the 'West'?* If undiagnosed, do you believe Veteran Relative had PTSD or war-related trauma, but is undiagnosed? – cross tabulation

			If Undiagnosed (NO), do you believe they had PTSD or war-related trauma, but were not diagnosed?		Total
			Yes	No	
Does respondent reside in the 'West'?	Yes	Count	4	0	4
		Expected count	2.5	1.5	4.0
		% within Does respondent reside in the 'West'?	100.0%	0.0%	100.0%
		% within If NO, do you believe they had PTSD or war-related trauma, but were not diagnosed?	50.0%	0.0%	30.8%
		% of total	30.8%	0.0%	30.8%
	No	Count	4	5	9
		Expected count	5.5	3.5	9.0
		% within does respondent reside in the 'West'?	44.4%	55.6%	100.0%
		% within If NO, do you believe they had PTSD or war-related trauma, but were not diagnosed?	50.0%	100.0%	69.2%
		% of total	30.8%	38.5%	69.2%
Total	Count	8	5	13	
	Expected count	8.0	5.0	13.0	
	% within does respondent reside in the 'West'?	61.5%	38.5%	100.0%	
	% within If NO, do you believe they had PTSD or war-related trauma, but were not diagnosed?	100.0%	100.0%	100.0%	
	% of total	61.5%	38.5%	100.0%	

7.2.8 Survey respondent self-reported mental illness

Out of 15 valid responses, seven survey respondents (46.7%) selected 'yes' to the question 'Do you have any emotional or mental health issues?' compared to eight survey respondents (53.3%) who selected 'no' to the same question (Table 16 and Figure 10).

**Table 16. Do you have any emotional or mental health issues?
(including substance abuse problems)**

		Frequency	%	Valid %	Cumulative %
Valid	Yes	7	46.7	46.7	46.7
	No	8	53.3	53.3	100.0
	Total	15	100.0	100.0	

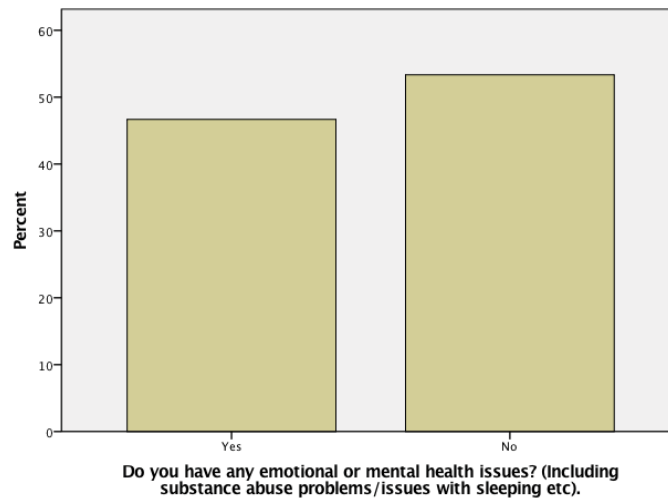


Figure 10. Do you have any emotional or mental health issues?

7.2.9 Comparison of survey respondents reporting personal mental-health issues and their responses to question ‘Do you believe veteran relative had PTSD or war-related trauma, but was not diagnosed?’

The following analysis is based on 13 valid responses (see Table 12 and Figure 7).

- Of the 46.15% of survey respondents who self-reported a mental illness, 38.46% answered ‘yes’ to the question ‘Do you believe veteran relative had PTSD or war-related trauma, but was not diagnosed?’, compared to 7.69% of respondents who answered ‘no’ (Figure 11).
- Of the 53.85% of survey respondents who did not self-report a mental illness, 23.08% answered ‘yes’ to the question ‘Do you believe veteran relative had PTSD or war-related trauma, but was not diagnosed?’, compared to 30.77% of respondents who answered ‘no’.
- Survey respondents who reported undiagnosed mental-health issues in their veteran relative were five times more likely to report personal mental-health issues than those who did not report undiagnosed mental-health issues in their veteran relative ($x=38.46/7.69$) (Figure 11).
- Survey respondents who did not report undiagnosed mental-health issues in their veteran relative were 1.3 times more likely to report that they did not have personal mental-health issues than those who reported undiagnosed mental-health issues in their veteran ($x=30.77/23.08$) (Figure 11).

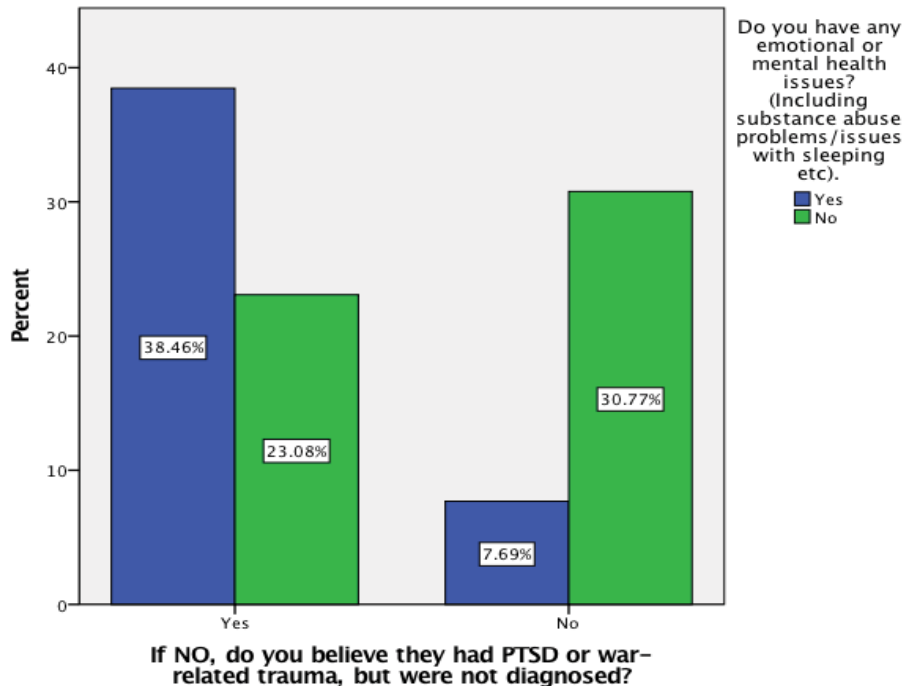


Figure 11. Cross tabulation

7.2.10 Comparison of reported veteran personality traits and respondents' self-reported mental-health issues

- Survey respondents who described their veteran relative's personality traits as Nervous, Anxious, Traumatized, Angry, Physically violent, Verbally violent, Abusive, and/or scared, were more likely to report personal mental-health issues than participants who did not select these traits to describe veteran (Table 18).
- Survey respondents who described their veteran relative's personality traits as Happy, Kind, and/or None of the above, were more likely to report an absence of personal mental-health issues than participants who did not select these traits to describe veteran (Table 18).
- Standout variable: Verbally violent, reported by 71.4% of respondents with self-reported mental-health issues (Table 18).

Table 17. Reported vet personality trait frequencies

		Responses		% of Cases
		N	%	
Respondent reported vet personality trait ^a	Happy	3	5.6	20.0
	Unhappy	1	1.9	6.7
	Loving	2	3.7	13.3
	Hateful	2	3.7	13.3
	Kind	3	5.6	20.0
	Nervous	4	7.4	26.7
	Anxious	6	11.1	40.0
	Traumatised	3	5.6	20.0
	Angry	5	9.3	33.3
	Physically violent	3	5.6	20.0
	Verbally violent	6	11.1	40.0
	Abusive	5	9.3	33.3
	Scared	3	5.6	20.0
	Mentally ill	2	3.7	13.3
	Crazy	2	3.7	13.3
	None of the above	4	7.4	26.7
	Total		54	100.0

^a Dichotomy group tabulated at value 1.

Table 18. Comparison self-reported mental health and reported vet personality trait

		Do you have any emotional or mental health issues?			
		Yes		No	
		Count	Column N %	Count	Column N %
Participant-reported vet personality trait	Happy	0	0.0	3	37.5
	Unhappy	1	14.3	0	0.0
	Loving	1	14.3	1	12.5
	Hateful	1	14.3	1	12.5
	Kind	0	0.0	3	37.5
	Nervous	3	42.9	1	12.5
	Anxious	4	57.1	2	25.0
	Traumatised	3	42.9	0	0.0
	Angry	4	57.1	1	12.5
	Physically violent	3	42.9	0	0.0
	Verbally violent	5	71.4	1	12.5
	Abusive	4	57.1	1	12.5
	Scared	3	42.9	0	0.0
	Mentally damaged	0	0.0	0	0.0
	Mentally ill	1	14.3	1	12.5
	Crazy	2	28.6	0	0.0
None of the above	1	14.3	3	37.5	

7.2.11 Comparison of reported vet emotion and behavioural traits and respondents' self-reported mental health issues

- Survey respondents who described their veteran relative's emotion and behavioural traits as Irritability, Always being on guard for danger, Self-destructive behaviour (suicidal tendencies, alcoholism, drug use), Angry outbursts, Aggressive behaviour, and/or Possessive of others in immediate family were more likely to report personal mental-health issues than participants who did not select these traits to describe veteran (Table 20).
- Survey respondents who described their veteran relative's emotion and behavioural traits as None of the above were more likely to report an absence of personal mental-health issues than participants who did not select these traits to describe veteran (Table 20).
- Marginal variable: survey respondents who described their veteran relative's emotion and behavioural traits as Controlling behaviour shown towards you, and/or Controlling behaviour shown towards others in immediate family were equally likely to report either a presence or absence of personal mental-health issues (Table 20).
- Self-destructive behaviour in veteran relative was 4.6 times more like to be reported by participants who reported personal emotional or mental-health issues than participants who reported an absence of emotional or mental-health issues ($x=57.1/12.5$) (Table 20).
- Standout variable: Angry outbursts was reported by 71.4% of survey respondents with self-reported mental-health issues (Table 20).

Table 19. Reported vet emotional behavioural trait frequencies

		Responses		% of Cases
		N	%	
Participant-reported vet emotional behaviour ^a	Irritability	5	9.3%	33.3
	Always being on guard for danger	3	5.6	20.0
	Overwhelming guilt or shame	2	3.7	13.3
	Self-destructive behaviour (suicidal tendencies, alcoholism, drug use)	5	9.3	33.3
	Trouble sleeping	2	3.7	13.3
	Easily startled or frightened	2	3.7	13.3
	Angry outbursts	6	11.1	40.0
	Aggressive behaviour	4	7.4	26.7
	Possessive of you	3	5.6	20.0
	Possessive of others in immediate family	4	7.4	26.7
	Controlling behaviour shown towards you	6	11.1	40.0
	Controlling behaviour shown towards others in immediate family	6	11.1	40.0
	Isolation or withdrawal from people and situations	2	3.7	13.3
	None of the above	4	7.4	26.7
	Total		54	100.0

^a Dichotomy group tabulated at value 1.

Table 20. Comparison self-reported mental health and reported vet emotional behavioural traits

		Do you have any emotional or mental-health issues?			
		Yes		No	
		Count	Column N %	Count	Column N %
Participant-reported vet emotion and behaviour traits	Irritability	4	57.1	1	12.5
	Always being on guard for danger	3	42.9	0	0.0
	Overwhelming guilt or shame	2	28.6	0	0.0
	Self-destructive behaviour (suicidal tendencies, alcoholism, drug use)	4	57.1	1	12.5
	Trouble concentrating	0	0.0	0	0.0
	Trouble sleeping	1	14.3	1	12.5
	Easily startled or frightened	2	28.6	0	0.0
	Angry outbursts	5	71.4	1	12.5
	Aggressive behaviour	3	42.9	1	12.5
	Possessive of you	2	28.6	1	12.5
	Possessive of others in immediate family	3	42.9	1	12.5
	Controlling behaviour shown towards you	3	42.9	3	37.5
	Controlling behaviour shown towards others in immediate family	3	42.9	3	37.5
	Isolation or withdrawal from people and situations	1	14.3	1	12.5
	None of the above	1	14.3	3	37.5

7.2.12 Comparison of reported vet personality traits and if vet received diagnosis; if no diagnosis, does respondent believe they had an undiagnosed combat-related mental illness (PTSD, trauma)?

- Survey respondents with a veteran relative who had received a combat-related mental-health diagnosis reported positive personality traits in their veteran, including Happy, and Kind (Table 21).
- Survey respondents with a veteran relative who had not received a combat-related mental-health diagnosis reported personality traits aligned with trauma in their veteran (Table 21).
- Survey respondents who reported that their veteran relative exhibited unhealthy personality traits also believed that their veteran was undiagnosed with a mental illness related to their combat experience, whereas respondents who did not believe that their veteran relative had a mental illness reported that this veteran exhibited healthy personality traits (Table 22).
- Exception of trait: Nervous – which was reported equally (50%) in both groups (Table 22).
- Standout variables: Verbally violent; Angry; Abusive, with 100% of participants reporting that their veteran relative was undiagnosed with war-related trauma (Table 22).
- These results suggest that veterans did not receive adequate medical or psychiatric treatment or assessment post-conflict and were potentially undiagnosed with a mental-health condition related to their service.
- Note to Table 22: As only one veteran was reported to have received an official medical diagnosis (PTSD), this table does not necessarily provide much useful information in terms of looking at connections between reported veteran personality traits and diagnosis or non-diagnosis of a mental illness in that veteran.

Table 21. Comparison between reported vet personality traits and if vet received diagnosis

		Was relative diagnosed with PTSD or war-related trauma following service?			
		Yes		No	
		Count	Row N %	Count	Row N %
Participant-reported vet personality trait	Happy	1	33.3%	2	66.7
	Unhappy	0	0.0	1	100.0
	Loving	0	0.0	2	100.0
	Hateful	0	0.0	2	100.0
	Kind	1	33.3	2	66.7
	Nervous	0	0.0	4	100.0
	Anxious	0	0.0	6	100.0
	Traumatised	0	0.0	3	100.0
	Angry	0	0.0	5	100.0
	Physically violent	0	0.0	3	100.0
	Verbally violent	0	0.0	6	100.0
	Abusive	0	0.0	5	100.0
	Scared	0	0.0	3	100.0
	Mentally damaged	0	0.0	0	0.0
	Mentally ill	0	0.0	2	100.0
	Crazy	0	0.0	2	100.0
	None of the above	0	0.0	3	100.0

Table 22. Comparison between reported vet personality traits and if no diagnosis, does respondent believe they had an undiagnosed combat-related mental illness (PTSD, trauma)?

		If NO, do you believe they had PTSD or war-related trauma, but were not diagnosed?			
		Yes		No	
		Count	Row N %	Count	Row N %
Participant-reported vet personality trait	Happy	0	0.0	2	100.0
	Unhappy	1	100.0	0	0.0
	Loving	1	50.0	1	50.0
	Hateful	2	100.0	0	0.0
	Kind	0	0.0	2	100.0
	Nervous	2	50.0	2	50.0
	Anxious	6	100.0	0	0.0
	Traumatised	3	100.0	0	0.0
	Angry	5	100.0	0	0.0
	Physically violent	3	100.0	0	0.0
	Verbally violent	6	100.0	0	0.0
	Abusive	5	100.0	0	0.0
	Scared	3	100.0	0	0.0
	Mentally damaged	0	0.0	0	0.0
	Mentally ill	2	100.0	0	0.0
	Crazy	2	100.0	0	0.0
	None of the above	1	33.3	2	66.7

7.2.13 Comparison between reported vet behavioural and emotional traits, and if vet received diagnosis; if no diagnosis, does respondent believe they had an undiagnosed combat-related mental illness (PTSD, trauma)?

- Survey respondents with a veteran relative who had received a combat-related mental-health diagnosis reported controlling behaviour shown towards them and their family members by the veteran (Table 23).
- Survey respondents with a veteran relative who had not received a combat-related mental-health diagnosis reported behaviour and emotional traits aligned with trauma in their veteran (Table 23).
- Survey respondents who reported their veteran relative exhibiting behavioural and emotional traits aligned with PTSD overwhelmingly believed that their veteran relative was undiagnosed with a mental illness related to their combat experience, compared to respondents who did not believe their veteran was undiagnosed (Table 24).
- Standout variables: Angry outbursts; Irritability; Self-destructive behaviour (suicidal tendencies, alcoholism, drug use); Controlling behaviour shown towards you; Controlling behaviour shown towards others in immediate family – with 100% of reporting from participants who believed that their veteran relative was undiagnosed with war-related trauma (Table 24).
- These results suggest that veterans did not receive adequate mental-health treatment or assessment post-conflict and were potentially undiagnosed with a mental-health condition related to their service.

Table 23. Comparison between reported vet behavioural and emotional traits and if vet received diagnosis

		Was relative diagnosed with PTSD or war-related trauma following service?			
		Yes		No	
		Count	Row N %	Count	Row N %
Participant-reported vet emotion and behaviour traits	Irritability	0	0.0	5	100.0
	Always being on guard for danger	0	0.0	3	100.0
	Overwhelming guilt or shame	0	0.0	2	100.0
	Self-destructive behaviour (suicidal tendencies, alcoholism, drug use)	0	0.0	5	100.0
	Trouble concentrating	0	0.0	0	0.0
	Trouble sleeping	0	0.0	2	100.0
	Easily startled or frightened	0	0.0	2	100.0
	Angry outbursts	0	0.0	6	100.0
	Aggressive behaviour	0	0.0	4	100.0
	Possessive of you	0	0.0	3	100.0
	Possessive of others in immediate family	0	0.0	4	100.0
	Controlling behaviour shown towards you	1	16.7	5	83.3
	Controlling behaviour shown towards others in immediate family	1	16.7	5	83.3
	Isolation or withdrawal from people and situations	0	0.0	2	100.0
	None of the above	0	0.0	3	100.0

Table 24. Comparison between reported vet behavioural and emotional traits and if no diagnosis does respondent believe they had an undiagnosed combat-related mental illness (PTSD, trauma)?

		If NO, do you believe they had PTSD or war-related trauma, but were not diagnosed?			
		Yes		No	
		Count	Row N %	Count	Row N %
Participant-reported vet emotion and behaviour traits	Irritability	4	80.0	1	20.0
	Always being on guard for danger	3	100.0	0	0.0
	Overwhelming guilt or shame	2	100.0	0	0.0
	Self-destructive behaviour (suicidal tendencies, alcoholism, drug use)	4	80.0	1	20.0
	Trouble concentrating	0	0.0	0	0.0
	Trouble sleeping	1	50.0	1	50.0
	Easily startled or frightened	2	100.0	0	0.0
	Angry outbursts	6	100.0	0	0.0
	Aggressive behaviour	4	100.0	0	0.0
	Possessive of you	3	100.0	0	0.0
	Possessive of others in immediate family	4	100.0	0	0.0
	Controlling behaviour shown towards you	4	80.0	1	20.0
	Controlling behaviour shown towards others in immediate family	4	80.0	1	20.0
	Isolation or withdrawal from people and situations	2	100.0	0	0.0
	None of the above	1	33.3	2	66.7

7.2.14 Respondent self-reported mental illness, correlation to veteran

Self-reported mental-health issues: 7 reported mental-health issues; 8 reported absence of mental-health issues (Table 26).

- Of 7 respondents self-reporting a personal mental-health issue, 71.5% reported that their mental-health issues were directly or somewhat related to their veteran relative (Table 27 and Figure 13).
- Of 7 respondents self-reporting a personal mental-health issue, an equal number of respondents reported that their mental-health issues were directly related or unrelated to their veteran, at 28.6% for both groups (Table 27 and Figure 13).
- Note on Table 27 and Figure 13: Response *Somewhat* = survey respondent could not say with certainty that their mental-health issues were totally related to their veteran relative, as they had experienced external events that may be deemed traumatic.

Table 25. Statistics

		Do you have any emotional or mental health issues? (Including substance abuse problems/issues with sleeping etc).	Do you believe that your emotional or mental-health issues are directly or in part related to the war-related trauma or PTSD of your relative?
N	Valid	15	7
	Missing	0	8
Std. deviation		.516	.900
Minimum		1	1
Maximum		2	3

**Table 26. Do you have any emotional or mental-health issues?
(including substance abuse problems/issues with sleeping, etc.)**

		Frequency	%	Valid %	Cumulative %
Valid	Yes	7	46.7	46.7	46.7
	No	8	53.3	53.3	100.0
	Total	15	100.0	100.0	

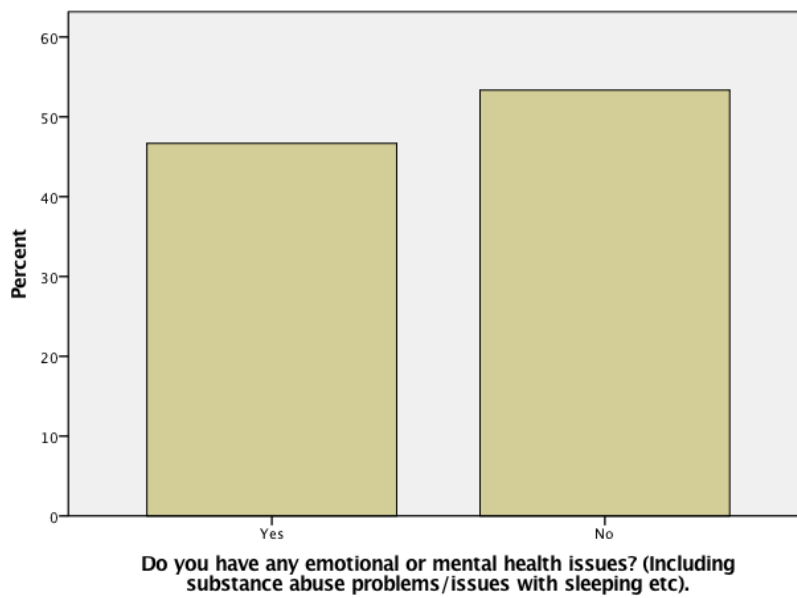


Figure 12. Do you have any emotional problems or mental-health issues?

Table 27. Do you believe that your emotional or mental-health issues are directly or in part related to the war-related trauma or PTSD of your relative?

		Frequency	%	Valid %	Cumulative %
Valid	Yes	2	13.3	28.6	28.6
	No	2	13.3	28.6	57.1
	Somewhat	3	20.0	42.9	100.0
	Total	7	46.7	100.0	
Missing	NA	8	53.3		
Total		15	100.0		

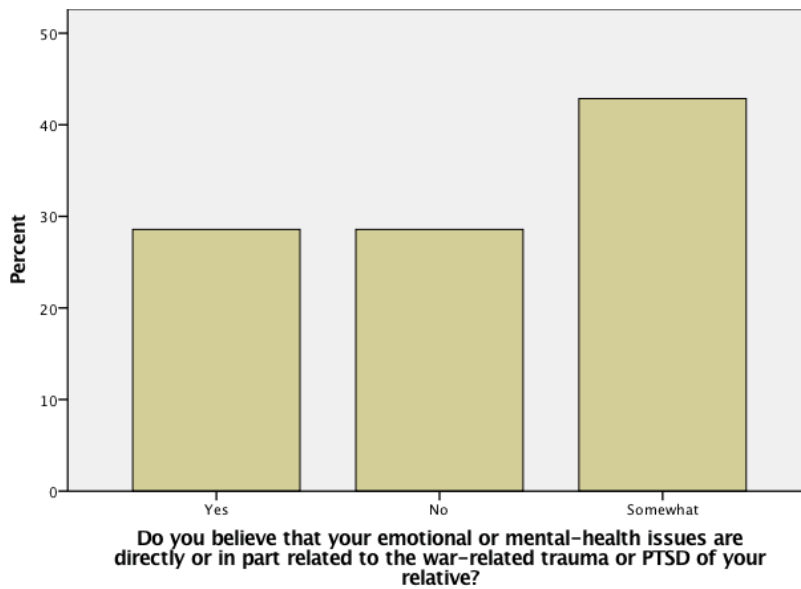


Figure 13. Do you believe that your emotional or mental-health issues are directly or in part related to the war-related trauma or PTSD of your relative?

7.2.15 Comparison of reported vet personality traits and if respondent resides in the west (no = respondent resides in the former Soviet Union)

- Respondents: 11 resided in the former Soviet Union (68.75%); 4 resided in the West (25%) (Table 8).
- Survey respondents who resided in the West reported a marginally greater amount of negative personality traits in their veteran that aligned with mental-health issues, reporting 25 instances of these traits, compared to 21 reports of these traits in the respondents who resided in the former Soviet Union (Table 28).
- The West-residing respondent group was 3.3 times more likely to report personality traits aligned with mental-health issues in their veterans than the respondents who resided in the former Soviet Union ($x=(100/4 \times 25)/(100/11 \times 21)$) (Table 28).
- Survey respondents who resided in countries making up part of the former Soviet Union reported a greater amount of positive personality traits in their veteran, reporting 7 instances of these traits, compared to 1 report of these traits in the West-residing respondent group (Table 28).
- The former Soviet Union–residing respondent group was 2.5 times more likely to report positive personality traits in their veterans than the West-residing group ($x=(100/11 \times 7)/(100/4 \times 1)$) (Table 28).
- Survey respondents who resided in the West reported a greater amount of personality traits related to physically and verbally violent and/or generally abusive behaviour (marked with asterisk in table) by their veteran relative. The West-residing group reported 10 instances of these traits, compared to 4 reports of these traits in the former Soviet Union–residing respondent group (Table 28).
- West-residing respondent group was 6.9 times more likely to report emotional and behavioural traits related to physically and verbally violent and/or generally abusive behaviour in their veteran than the former Soviet Union–residing group ($x=(100/4 \times 10)/(100/11 \times 4)$) (Table 28).

- These results suggest that the West-residing respondent group may have been more responsive to and more aware of traits aligned with mental-health issues than the former Soviet Union–residing group.
- These results also suggest that the West-residing respondent group may have been more responsive to and more aware of traits aligned with physically and verbally abusive and/or violent behaviour in a relative than the former Soviet Union–residing group.
- These results might point to a disparity between understanding and identifying domestic violence between the two responding groups. They might also point to a disparity between mental-health education between the two responding groups.

Table 28. Does respondent reside in the ‘West’? – participant-reported vet personality trait

		Does respondent reside in the ‘West’?			
		Yes		No	
		Count	Row N %	Count	Row N %
Participant-reported vet personality trait	Happy	0	0.0	3	100.0
	Unhappy	1	100.0	0	0.0
	Loving	1	50.0	1	50.0
	Hateful	2	100.0	0	0.0
	Kind	0	0.0	3	100.0
	Nervous	0	0.0	4	100.0
	Anxious	3	50.0	3	50.0
	Traumatised	2	66.7	1	33.3
	Angry	4	80.0	1	20.0
	Physically violent *	2	66.7	1	33.3
	Verbally violent *	4	66.7	2	33.3
	Abusive *	4	80.0	1	20.0
	Scared	1	33.3	2	66.7
	Mentally damaged	0	0.0	0	0.0
	Mentally ill	1	50.0	1	50.0
	Crazy	1	50.0	1	50.0
	None of the above	0	0.0	4	100.0

7.2.16 Comparison of reported veteran behavioural and emotional traits, and if respondent resides in the West (no = respondent resides in the former Soviet Union)

- Respondents: 11 resided in the former Soviet Union (68.75%); 4 resided in the West (25%) (Table 8).
- Survey respondents who resided in the West reported a greater amount of negative emotional and behavioural traits in their veteran that aligned with mental-health issues, reporting 29 instances of these traits, compared to 21 reports of these traits in the former Soviet Union–residing respondent group (Table 29).
- The west-residing respondent group was 3.8 times more likely to report emotional and behavioural traits aligned with mental-health issues in their veterans than the former Soviet Union–residing group ($x=(100/4 \times 29)/(100/11 \times 21)$) (Table 29).
- Survey respondents residing in the West reported a greater amount of emotional and behavioural traits related to possessive and/or controlling behaviour (marked with an asterisk in the table) by their veteran relative (aimed at the respondent and/or at other family members). The West-residing group reported 15 instances of these traits, compared to 4 reports of these traits in the former Soviet Union–residing group (Table 29).
- The West-residing respondent group was 10.3 times more likely to report emotional and behavioural traits related to possessive and/or controlling behaviour in their veterans than the former Soviet Union–residing group ($x=(100/4 \times 15)/(100/11 \times 4)$) (Table 29).
- Self-destructive behaviour was marginally more likely to be reported by the former Soviet Union–residing group, at 60% of 5, than the West-residing group, at 40% (Table 29).
- These results suggest that the West-residing respondent group may have been more responsive to and more aware of traits aligned with mental-health issues than the former Soviet Union–residing group.
- These results suggest that the West-residing respondent group may have been more responsive to and more aware of traits aligned with possessive and/or controlling behaviour in a relative than the former Soviet Union–residing group.

- These results might point to a disparity between mental-health education between the two responding groups.

Table 29. Does respondent reside in the 'West'? – Participant-reported vet emotion and behaviour traits

		Does respondent reside in the 'West'?			
		Yes		No	
		Count	Row N %	Count	Row N %
Participant-reported vet emotion and behaviour traits	Irritability	2	40.0	3	60.0
	Always being on guard for danger	1	33.3	2	66.7
	Overwhelming guilt or shame	0	0.0	2	100.0
	Self-destructive behaviour (suicidal tendencies, alcoholism, drug use)	2	40.0	3	60.0
	Trouble concentrating	0	0.0	0	0.0
	Trouble sleeping	0	0.0	2	100.0
	Easily startled or frightened	0	0.0	2	100.0
	Angry outbursts	4	66.7	2	33.3
	Aggressive behaviour	3	75.0	1	25.0
	Possessive of you *	3	100.0	0	0.0
	Possessive of others in immediate family *	4	100.0	0	0.0
	Controlling behaviour shown towards you *	4	66.7	2	33.3
	Controlling behaviour shown towards others in immediate family *	4	66.7	2	33.3
	Isolation or withdrawal from people and situations	2	100.0	0	0.0
	None of the above	0	0.0	4	100.0

7.2.17 Likert scale statistics

15 valid responses (100% of participants) were recorded across all seven Likert scale questions in the survey (Table 30).

Table 30. Likert scale statistics

		On a scale of 1 to 10, do you agree that your relative's service negatively impacted your family life?	On a scale of 1 to 10, do you agree that your relative's service negatively impacted your own upbringing?	On a scale of 1 to 10, do you agree that your relative's service disrupted a healthy relationship between you and that relative?	On a scale of 1 to 10, do you agree that your relative's service and their trauma left an impact on you into your adulthood?	On a scale of 1 to 10, do you agree that the impact of your relative's service and their war-related trauma is still felt by you?	On a scale of 1 to 10, do you agree that the impact of your relative's service and their war-related trauma is still felt by your family?	On a scale of 1 to 10, do you agree that your relative's mental health issues impacted on your mental health development?
N	Valid	15	15	15	15	15	15	14
	Missing	0	0	0	0	0	0	1
Mean		5.00	4.67	4.93	4.13	3.33	3.73	3.71
Median		5.00	5.00	5.00	2.00	2.00	2.00	2.50
Mode		1	1	1	1	1	1	1
Std. deviation		3.625	3.677	3.863	3.502	3.352	3.474	2.998
Minimum		1	1	1	1	1	1	1
Maximum		10	10	10	10	10	10	10

7.2.18 Likert scale frequencies

The Likert scale responses were overwhelmingly skewed towards 'Totally disagree' across all seven questions related to the impact of the relative's service on the respondent's familial environment, childrearing, adulthood, and mental health. However, each question had a spread of responses throughout the scale (see Table 31 to Table 37 and Figure 14 to Figure 20).

Table 31. On a scale of 1 to 10, do you agree that your relative's service negatively impacted your family life?

		Frequency	%	Valid %	Cumulative %
Valid	Totally agree	3	20.0	20.0	20.0
	Agree	2	13.3	13.3	33.3
	Somewhat agree	1	6.7	6.7	40.0
	Slightly agree	1	6.7	6.7	46.7
	Unsure	1	6.7	6.7	53.3
	Disagree	1	6.7	6.7	60.0
	Strongly disagree	2	13.3	13.3	73.3
	Totally disagree	4	26.7	26.7	100.0
	Total	15	100.0	100.0	

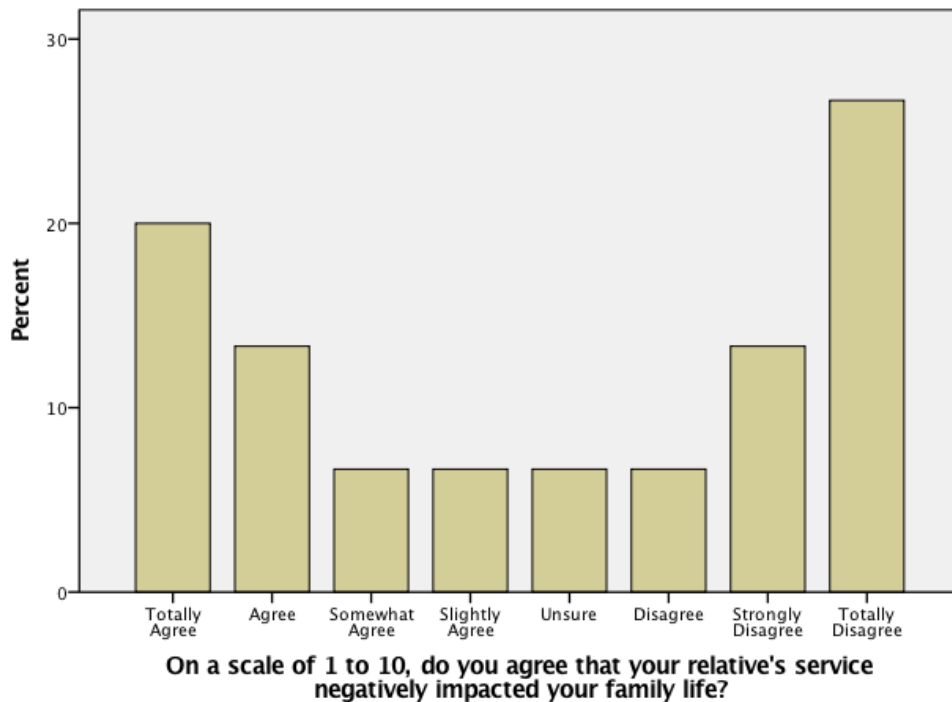


Figure 14. On a scale of 1 to 10, do you agree that your relative's service negatively impacted your family life?

Table 32. On a scale of 1 to 10, do you agree that your relative's service negatively impacted your own upbringing?

		Frequency	%	Valid %	Cumulative %
Valid	Totally agree	3	20.0	20.0	20.0
	Agree	2	13.3	13.3	33.3
	Unsure	3	20.0	20.0	53.3
	Strongly disagree	2	13.3	13.3	66.7
	Totally disagree	5	33.3	33.3	100.0
	Total	15	100.0	100.0	

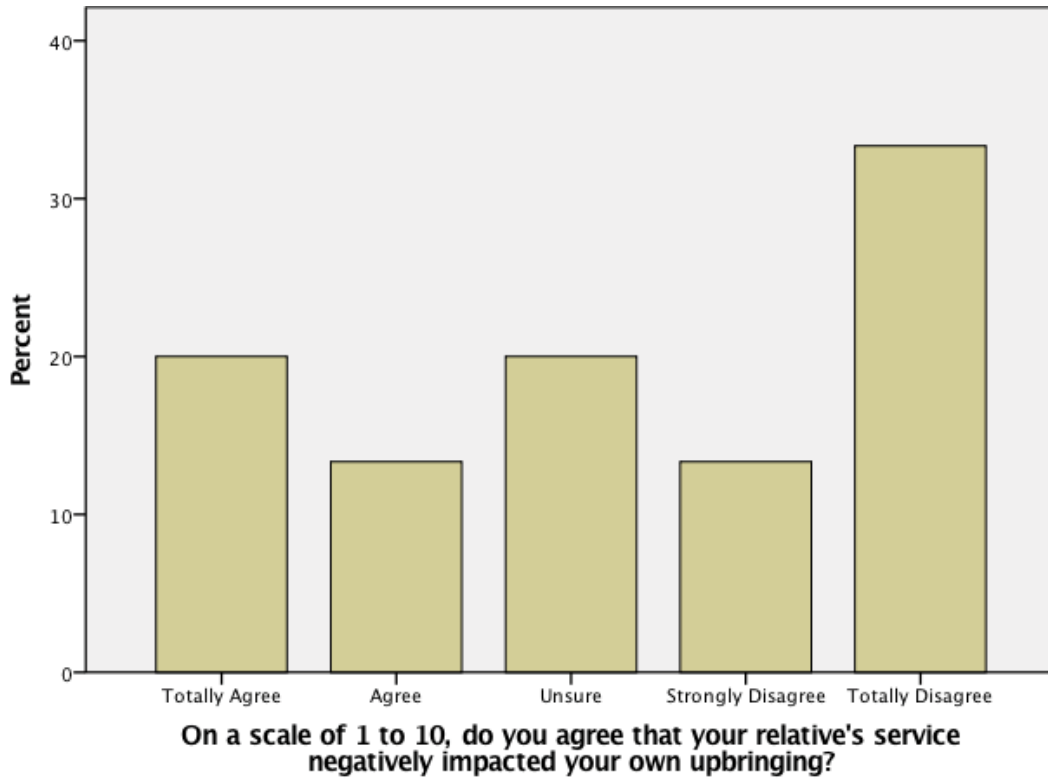
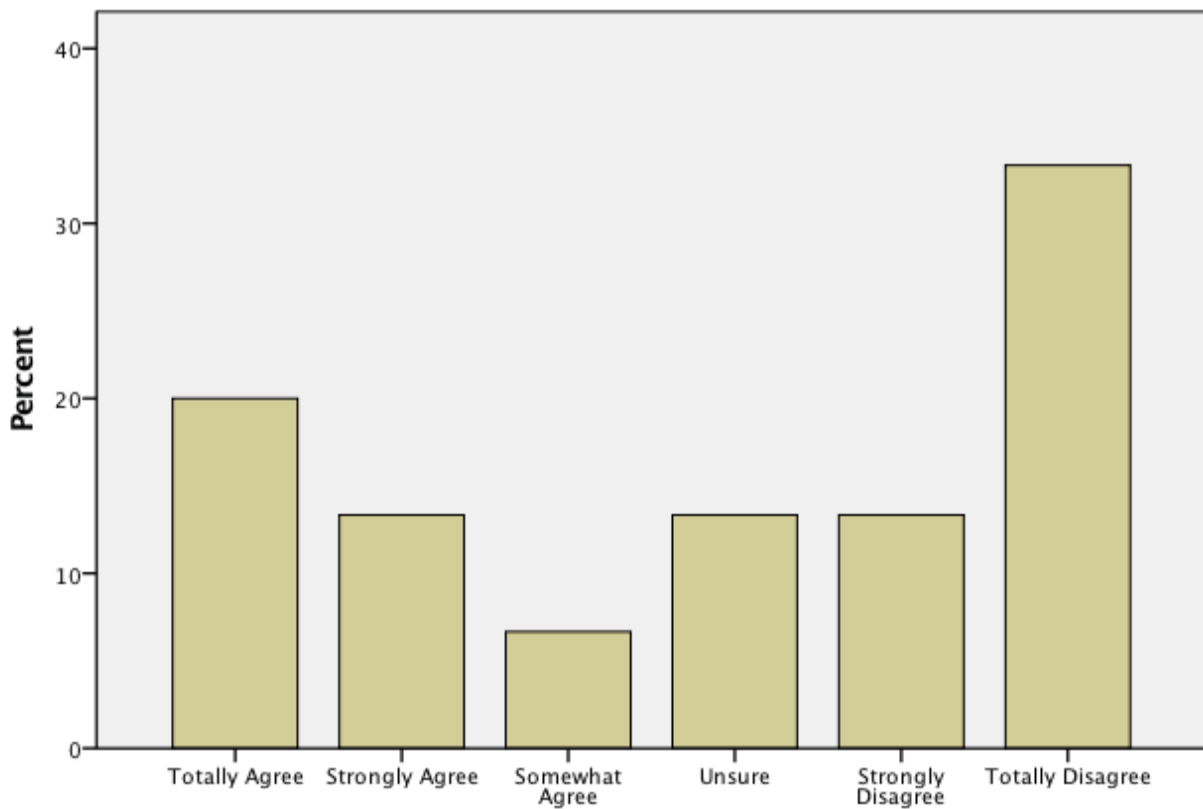


Figure 15. On a scale of 1 to 10, do you agree that your relative's service negatively impacted your own upbringing?

Table 33. On a scale of 1 to 10, do you agree that your relative's service disrupted a healthy relationship between you and that relative?

		Frequency	%	Valid %	Cumulative %
Valid	Totally agree	3	20.0	20.0	20.0
	Strongly agree	2	13.3	13.3	33.3
	Somewhat agree	1	6.7	6.7	40.0
	Unsure	2	13.3	13.3	53.3
	Strongly disagree	2	13.3	13.3	66.7
	Totally disagree	5	33.3	33.3	100.0
	Total	15	100.0	100.0	



On a scale of 1 to 10, do you agree that your relative's service disrupted a healthy relationship between you and that relative?

Figure 16. On a scale of 1 to 10, do you agree that your relative's service disrupted a healthy relationship between you and that relative?

Table 34. On a scale of 1 to 10, do you agree that your relative's service and their trauma left an impact on you into your adulthood?

		Frequency	%	Valid %	Cumulative %
Valid	Totally agree	2	13.3	13.3	13.3
	Strongly agree	1	6.7	6.7	20.0
	Agree	1	6.7	6.7	26.7
	Unsure	2	13.3	13.3	40.0
	Somewhat disagree	1	6.7	6.7	46.7
	Strongly disagree	3	20.0	20.0	66.7
	Totally disagree	5	33.3	33.3	100.0
	Total	15	100.0	100.0	

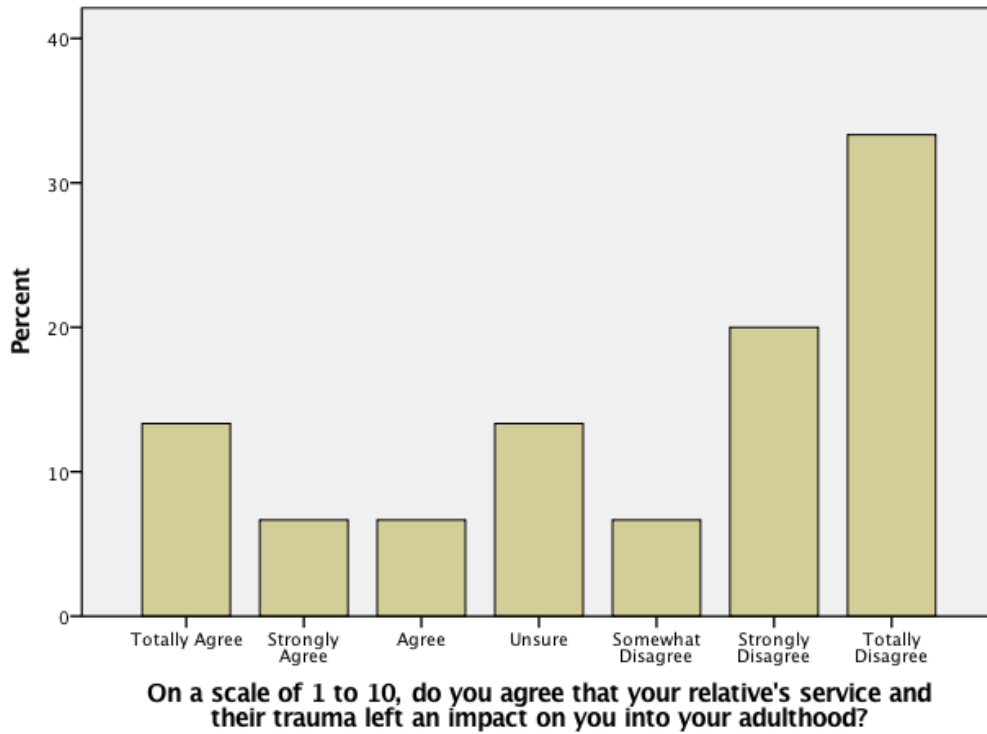
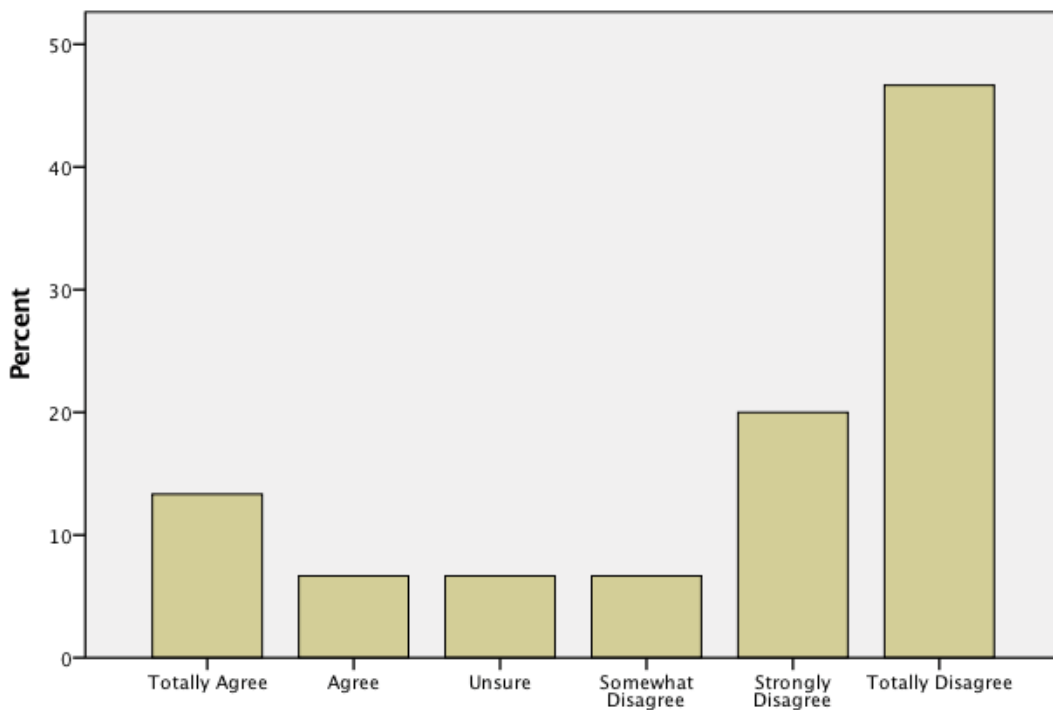


Figure 17. On a scale of 1 to 10, do you agree that your relative's service and their trauma left an impact on you into your adulthood?

Table 35. On a scale of 1 to 10, do you agree that the impact of your relative's service and their war-related trauma is still felt by you?

		Frequency	%	Valid %	Cumulative %
Valid	Totally agree	2	13.3	13.3	13.3
	Agree	1	6.7	6.7	20.0
	Unsure	1	6.7	6.7	26.7
	Somewhat disagree	1	6.7	6.7	33.3
	Strongly disagree	3	20.0	20.0	53.3
	Totally disagree	7	46.7	46.7	100.0
	Total	15	100.0	100.0	



On a scale of 1 to 10, do you agree that the impact of your relative's service and their war-related trauma is still felt by you?

Figure 18. On a scale of 1 to 10, do you agree that the impact of our relative's service and their war-related trauma is still felt by you?

Table 36. On a scale of 1 to 10, do you agree that the impact of your relative's service and their war-related trauma is still felt by your family?

		Frequency	%	Valid %	Cumulative %
Valid	Totally agree	2	13.3	13.3	13.3
	Strongly agree	1	6.7	6.7	20.0
	Slightly agree	1	6.7	6.7	26.7
	Unsure	1	6.7	6.7	33.3
	Somewhat disagree	1	6.7	6.7	40.0
	Disagree	1	6.7	6.7	46.7
	Strongly disagree	1	6.7	6.7	53.3
	Totally disagree	7	46.7	46.7	100.0
	Total	15	100.0	100.0	

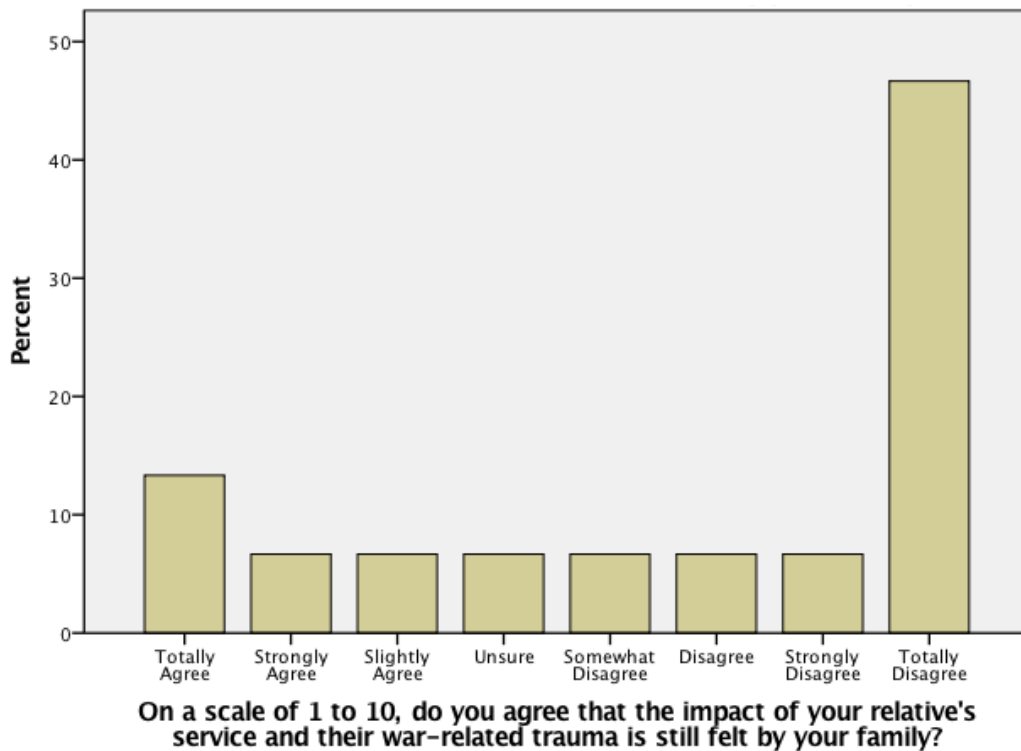


Figure 19. On a scale of 1 to 10, do you agree that the impact of your relative's service and their war-related trauma is still felt by our family?

Table 37. On a scale of 1 to 10, do you agree that your relative's mental-health issues impacted on your mental health development

		Frequency	%	Valid %	Cumulative %
Valid	Totally agree	1	6.7	7.1	7.1
	Agree	1	6.7	7.1	14.3
	Somewhat agree	1	6.7	7.1	21.4
	Unsure	3	20.0	21.4	42.9
	Disagree	1	6.7	7.1	50.0
	Strongly disagree	2	13.3	14.3	64.3
	Totally disagree	5	33.3	35.7	100.0
	Total	14	93.3	100.0	
Missing	NA	1	6.7		
Total		15	100.0		

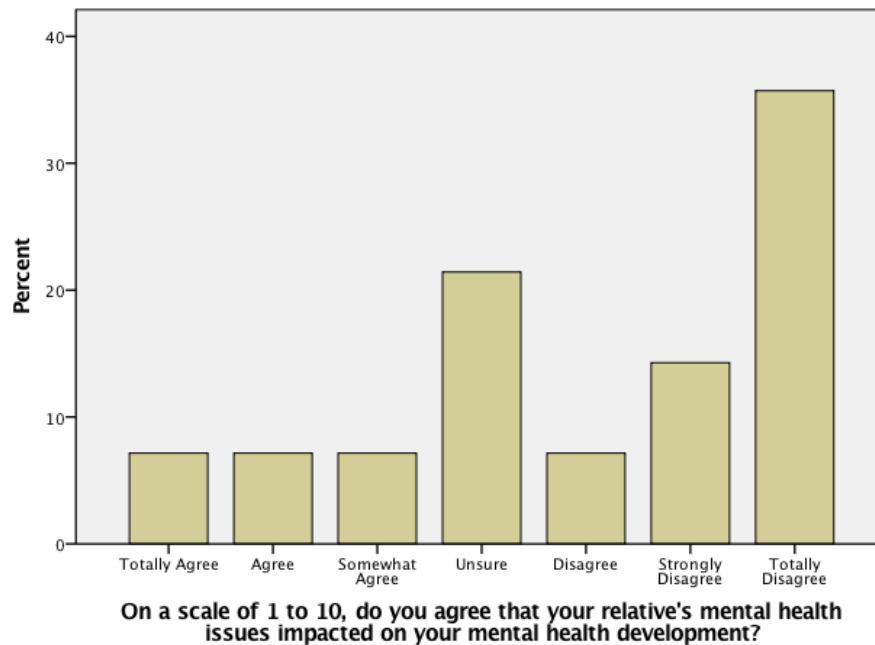


Figure 20. On a scale of 1 to 10, do you agree that your relative's mental-health issues impacted on your mental health development?

7.2.19 Likert scale comparison to residency of respondent

The following tables appear in corresponding order to the previous section 7.2.18.

- Respondents: 11 resided in the former Soviet Union (68.75%); 4 resided in the West (25%) (Table 8).
- Former Soviet Union–residency group: total possible responses 76 ($x=11 \times 7-1$) (Table 37).
- West residency group: total possible responses 28 ($x=4 \times 7$) (Table 37).
- Respondents in the former Soviet Union–residency group were overwhelmingly represented in the ‘Totally disagree’ response across all seven questions (Table 38 to Table 44).
- Respondents in the former Soviet Union–residency group were overwhelmingly represented in responses aligned with Disagreement to statements across all seven questions (Table 38 to Table 44).
- Respondents in the West residency group were strongly represented in the Agree and mid-range responses across all seven questions (Table 38 to Table 44).
- Respondents in the former Soviet Union–residency group appeared in the range between Totally agree to Slightly agree 14 times (18.2%) across the seven questions (Table 38 to Table 44).
- Respondents in the former Soviet Union–residency group appeared in the range between Unsure to Totally disagree 62 times (80.5%) across the seven questions (Table 38 to Table 44).
- Respondents in the West residency group appeared in the range between Totally agree to Slightly agree 18 times (64.3%) across the seven questions (Table 38 to Table 44).
- Respondents in the West residency group appeared in the range between Unsure to Totally disagree 10 times (35.7%) across the seven questions (Table 38 to Table 44).

- The West-residing respondent group was 3.5 times more likely than the former Soviet Union–residing respondent group to select Totally agree to Slightly agree across the seven questions concerning the relative’s impact on respondent ($x=(100/4 \times 18)/(100/11 \times 14)$).
- The former Soviet Union–residing respondent group was 2.3 times more likely than the West-residing respondent group to select Unsure to Totally disagree across the seven questions concerning the relative’s impact on respondent ($x=(100/11 \times 62)/(100/4 \times 10)$).
- Outlier: 1 former Soviet Union–residency group response was reported as Totally agree across six questions (Table 38 to Table 43).
- Outlier: 1 former Soviet Union–residency group response was reported as Totally agree across the full seven questions (Table 38 to Table 44).
- These results suggest that the West-residing respondent group may have been more responsive to and more aware of interfamily issues than the former Soviet Union–residing group.
- These results also suggest that respondents in the former Soviet Union–residency group judged the impact of their relative’s military service as being less than the West residency response group.

Table 38. On a scale of 1 to 10, do you agree that your relative's service negatively impacted your family life? – residential group variable

		Does respondent reside in the 'West'?			
		No		Yes	
		Count	Row N %	Count	Row N %
On a scale of 1 to 10, do you agree that your relative's service negatively impacted your family life?	Totally agree	2	66.7	1	33.3
	Strongly agree	0	0.0	0	0.0
	Agree	0	0.0	2	100.0
	Somewhat agree	0	0.0	1	100.0
	Slightly agree	1	100.0	0	0.0
	Unsure	1	100.0	0	0.0
	Somewhat disagree	0	0.0	0	0.0
	Disagree	1	100.0	0	0.0
	Strongly disagree	2	100.0	0	0.0
	Totally disagree	4	100.0	0	0.0

Table 39. On a scale of 1 to 10, do you agree that your relative's service negatively impacted your own upbringing? – residential group variable

		Does respondent reside in the 'West'?			
		No		Yes	
		Count	Row N %	Count	Row N %
On a scale of 1 to 10, do you agree that your relative's service negatively impacted your own upbringing?	Totally agree	2	66.7	1	33.3
	Strongly agree	0	0.0	0	0.0
	Agree	0	0.0	2	100.0
	Somewhat agree	0	0.0	0	0.0
	Slightly agree	0	0.0	0	0.0
	Unsure	2	66.7	1	33.3
	Somewhat disagree	0	0.0	0	0.0
	Disagree	0	0.0	0	0.0
	Strongly disagree	2	100.0	0	0.0
	Totally disagree	5	100.0	0	0.0

Table 40. On a scale of 1 to 10, do you agree that your relative’s service disrupted a healthy relationship between you and that relative? – residential group variable

		Does respondent reside in the 'West'?			
		No		Yes	
		Count	Row N %	Count	Row N %
On a scale of 1 to 10, do you agree that your relative’s service disrupted a healthy relationship between you and that relative?	Totally agree	2	66.7	1	33.3
	Strongly agree	0	0.0	2	100.0
	Agree	0	0.0	0	0.0
	Somewhat agree	0	0.0	1	100.0
	Slightly agree	0	0.0	0	0.0
	Unsure	2	100.0	0	0.0
	Somewhat disagree	0	0.0	0	0.0
	Disagree	0	0.0	0	0.0
	Strongly disagree	2	100.0	0	0.0
	Totally disagree	5	100.0	0	0.0

Table 41. On a scale of 1 to 10, do you agree that your relative’s service and their trauma left an impact on you into your adulthood? – residential group variable

		Does respondent reside in the 'West'?			
		No		Yes	
		Count	Row N %	Count	Row N %
On a scale of 1 to 10, do you agree that your relative’s service and their trauma left an impact on you into your adulthood?	Totally agree	2	100.0	0	0.0
	Strongly agree	0	0.0	1	100.0
	Agree	0	0.0	1	100.0
	Somewhat agree	0	0.0	0	0.0
	Slightly agree	0	0.0	0	0.0
	Unsure	1	50.0	1	50.0
	Somewhat disagree	0	0.0	1	100.0
	Disagree	0	0.0	0	0.0
	Strongly disagree	3	100.0	0	0.0
	Totally disagree	5	100.0	0	0.0

Table 42. On a scale of 1 to 10, do you agree that the impact of your relative's service and their war-related trauma is still felt by you? – residential group variable

		Does respondent reside in the 'West'?			
		No		Yes	
		Count	Row N %	Count	Row N %
On a scale of 1 to 10, do you agree that the impact of your relative's service and their war-related trauma is still felt by you?	Totally agree	2	100.0	0	0.0
	Strongly agree	0	0.0	0	0.0
	Agree	0	0.0	1	100.0
	Somewhat agree	0	0.0	0	0.0
	Slightly agree	0	0.0	0	0.0
	Unsure	1	100.0	0	0.0
	Somewhat disagree	0	0.0	1	100.0
	Disagree	0	0.0	0	0.0
	Strongly disagree	2	66.7	1	33.3
	Totally disagree	6	85.7	1	14.3

Table 43. On a scale of 1 to 10, do you agree that the impact of your relative's service and their war-related trauma is still felt by your family? – residential group variable

		Does respondent reside in the 'West'?			
		No		Yes	
		Count	Row N %	Count	Row N %
On a scale of 1 to 10, do you agree that the impact of your relative's service and their war-related trauma is still felt by your family?	Totally agree	2	100.0	0	0.0
	Strongly agree	0	0.0	1	100.0
	Agree	0	0.0	0	0.0
	Somewhat agree	0	0.0	0	0.0
	Slightly agree	0	0.0	1	100.0
	Unsure	1	100.0	0	0.0
	Somewhat disagree	0	0.0	1	100.0
	Disagree	1	100.0	0	0.0
	Strongly disagree	1	100.0	0	0.0
	Totally disagree	6	85.7	1	14.3

Table 44. On a scale of 1 to 10, do you agree that your relative’s mental-health issues impacted on your mental health development? – residential group variable

		Does respondent reside in the 'West'?			
		No		Yes	
		Count	Row N %	Count	Row N %
On a scale of 1 to 10, do you agree that your relative’s mental health issues impacted on your mental-health development?	Totally agree	1	100.0	0	0.0
	Strongly agree	0	0.0	0	0.0
	Agree	0	0.0	1	100.0
	Somewhat agree	0	0.0	1	100.0
	Slightly agree	0	0.0	0	0.0
	Unsure	1	33.3	2	66.7
	Somewhat disagree	0	0.0	0	0.0
	Disagree	1	100.0	0	0.0
	Strongly disagree	2	100.0	0	0.0
	Totally disagree	5	100.0	0	0.0

CHAPTER 8: DISCUSSION

This chapter reports on the key findings in the qualitative and quantitative analyses, synthesising the results of both the qualitative and quantitative data sets in order to draw a comparison between these results. This was done to provide deeper insight into the attitudes presented in the interviews and the quantitative results of the questionnaire. Each of the key findings was also discussed in terms of its relationship to literature on intergenerational trauma. This chapter presents the implications of these results on the field of intergenerational trauma transmission and the impact of the Soviet–Afghan war on the first post-Soviet generation, concluding with the implications of this study and recommendations for future research.

8.1 Key findings

8.1.1 Intergenerational trauma transmission

The qualitative analysis showed the presence of trauma in all participant interviews (n=12), including veterans, children of veterans, parents, and partners of veterans. This trauma included primary combat trauma (veteran participants who reported on their traumatic experiences during combat), primary trauma experienced through the loss of a relative in the war (as reported by a parent and a partner of a veteran), primary trauma experienced through abuse (reported by children of veterans who were physically and psychologically abused by their fathers), and intergenerational trauma effects.

The theme of intergenerational trauma transmission presented in three observations: in one veteran (P1) and two children of veterans of the Soviet–Afghan war (P11 and P12). The relationship between the father and child in all three of these scenarios showed physical and psychological abuse, with the data showing that each child experienced psychological and mental-health issues into adulthood. Furthermore, the interview data suggests that the abuse was a symptom of the trauma experienced by the fathers (veterans) during their time in combat. The connection between the reported abuses and the child’s mental health cannot be concretely viewed as causative; however, this information shows a strong correlate between trauma

experienced by the veterans and trauma experienced by their children during childhood, including ongoing mental-health issues into their adulthood.

Both participants who are children of veterans reported that they believe their father's trauma was transmitted intergenerationally to them via a range of processes, including violence and abuse within the home; experiencing physical and psychological abuse; witnessing the abuse of other family members; feelings of fear at not knowing when, and what shape, the abuse could take; and ongoing anticipation of abuse. As these abuses constituted primary trauma for the children of veterans, it is important to note that the ongoing mental-health issues in both participants cannot be compartmentalised into issues resulting exclusively from intergenerational trauma *or* exclusively from primary trauma.

The interview data from these participants also showed an absence of healthy coping mechanisms being taught to the child, something P11 reflected on specifically, suggesting that his inability to cope healthily with issues and emotions through childhood, adolescence, and into adulthood was a direct result of the unhealthy familial environment in which the participant was raised.

Literature on the processes of trauma transmission support these findings, including the process of neuroplasticity, meaning that because the 'brain is a use-dependent organ that changes in response to patterned, repetitive activity' (Ludy-Dobson & Perry 2010, p.29), it is formed in a use-dependent manner. All a child's experiences make a contribution to the 'emotional and perceptual map of the world that its developing brain creates' (van der Kolk 2015, p.56) – this activity forms the organ in a use-dependent manner, with the neurons of the organ that fire together during this process ultimately wiring together. This can lead to a default setting – creating a response most likely to occur – when the same circuit fires repeatedly, meaning that if a child feels 'safe and loved, [its] brain becomes specialized in exploration, play, and cooperation; if [a child] is frightened and unwanted, it specializes in managing feelings of fear and abandonment' (van der Kolk 2015, p.56). In other words, the child is forced to develop extraordinary capacities in order to adapt to the environment. This impact of repeated trauma in childhood forms what Judith Herman refers to as the formation and deformation of the personality (1992, p.96). The abuse and pathological environment trap the child, in which they 'must compensate for the failures of adult care and protection with the only means at [their] disposal, an immature system of psychological defences' (Herman 1992, p.96). The interview data shows that this process was likely to have occurred in both participants who are children of

veterans, as well as plausibly the three children of participant P1, due to the physical and psychological abuse that they experienced at the hands of their fathers during their childhoods. The impact of this abuse led to both participant P11 and P12 expressing that they have ongoing issues with mental health, management of emotions, and knowledge of healthy coping mechanisms, all of which the participants reported as connected to their abuse as children. Participant P1 reported that his three children have or continue to live with mental illness and emotional health problems.

Both P11 and P12 expressed a fear of the unknown and unpredictability in the family home. P11 referred specifically to anxiety about what would happen next in the home; lack of control and stability; and a chaotic routine within a tense familial environment. P11 contributed this dysfunctional environment as being partly responsible for him and his now-deceased sibling turning to substance abuse in order to escape the chaotic environment, a choice that was reportedly made due to neither child being taught healthy coping mechanisms by their parents. This finding is supported by literature concerning survivors of abuse, who consistently report a sense of helplessness:

In the abusive family environment, the exercise of parental power is arbitrary, capricious, and absolute. Rules are erratic, inconsistent, or patently unfair. Survivors frequently recall that what frightened them most was the unpredictable nature of the violence (Herman 1992, p.98).

One of the approaches to understanding the process of the intergenerational transmission of trauma includes the biological or genetic model (Kellermann 2001, p.263), which refers to the epigenetic transmission and inheritance (beyond the inheritance of DNA sequences) of information from parent to child. Changes in gene expression as a result of stressors (such as trauma) may be transferred from survivors to their children in utero and in the early stages of the child's life (Shmotkin et al. 2011, p.10; see also Yehuda & Bierer 2009). Furthermore, as other studies suggest that epigenetic modifications can also affect maternal behaviour in ways that produce the same behaviours in their offspring (Nestler 2011), despite these changes not being passed down through the germline, it is conceivable that the paternal behaviour can lead to a similar outcome. Hypothetically, this process means that, despite not being passed down through the germline, the epigenetic modifications produced in one generation – that is, the trauma of the veteran – can be passed on to the next generation – the children who

experienced physical and psychological abuse at the hands of their veteran fathers – due to the paternal behaviour altering the epigenetic markings in their offspring.

Other approaches to understanding the process of intergenerational trauma transmission are related to the familial environment. The data showed the presence of the Sociocultural and socialisation model (Danieli 1998) – which refers to the beliefs, behaviours, and routines that parents pass on to their children through childrearing – and the Psychodynamic relational model (Dekel & Goldblatt 2008) – which refers to the unconscious processes of emotional projection from the parent to child, making it difficult for the child to form a separate self, resulting in the child developing symptoms that replicate the disturbances of the father. These models were presented in the interviews provided by the children of veteran fathers, as the participants described feelings of being like their fathers and seeing themselves in their fathers through their behaviours (such as isolating themselves or erratic aggression), emotions, psychological health, and reactions to stimuli (such as daily stress or familial issues).

Both participants who are children of veterans expressed that they believed their fathers were traumatised in combat, with P11 stating that he believed his father does have PTSD, and P12 stating that he believed that the war left an imprint on his father. As noted above, both participants expressed that they believed this trauma and imprint translated to them. Some literature suggests that the effects of PTSD may have a larger influence on the intergenerational transmission of trauma than the condition itself, meaning that family violence resulting from a parent's combat-related trauma projected greater distress in children than did the PTSD in itself (Harkness 1993, p.635–643). This is evident in participants P11 and P12, both of whom report physical and psychological abuse during childhood, as well as witnessing the abuse of others in the family during this period, including siblings and mothers. Furthermore, both participants expressed the non-existent or strained relationship they have with their fathers, influenced by the abuse they experienced at their hands, and the abuse they were exposed to of their family members by their fathers. This is again supported by the literature, which has found that combat-related PTSD hinders the veteran's ability to parent a child, and interrupts 'the development of a positive parent-child relationship' (Galovski & Lyons 2004, pp.486–487).

Unlike normal memories, traumatic memories are re-experienced in the present 'as fragments of sensations, emotions, reactions, and images' (van der Kolk 2015, p.372). In addition to the feasible epigenetic modifications produced through childrearing, the data shows that the impact

of the primary abuse experienced by participants P11 and P12 as children was felt by these participants as traumatic memories of abuse, which continued into adulthood.

The quantitative data findings support these qualitative results in relation to the correlation between the veteran parent's participation in the war, and the now-adult child experiencing mental-health issues themselves:

- Survey respondents who reported undiagnosed mental-health issues in their veteran relative were shown to be 5 times more likely to report personal mental-health issues than those who did not report undiagnosed mental-health issues in their veteran (Figure 11).
- Survey respondents who did not report undiagnosed mental-health issues in their veteran relative were 1.3 times more likely to report that they did not have personal mental-health issues (Figure 11).
- Survey respondents who described their veteran relative's personality, behaviour, and emotional traits as those aligned with mental-health issues (PTSD), additionally were more likely to self-report personal mental-health issues (Table 18 and Table 20).
- Of 7 respondents who self-reported issues with personal mental health, 71.5% reported that their mental-health issues were directly or somewhat related to their veteran relative (Table 27 and Figure 13), which connects to the qualitative data in which the children of veteran fathers reported that their mental health and emotional issues were connected to their fathers' trauma, as well as to the primary trauma they experienced from the physical and psychological abuse in their childhoods.

These quantitative findings additionally show a similarity to a 2018 study, which found adult children of Australian veterans who had served in the Vietnam War have worse mental health than the children of men who had served in the Australian army at the time of the war but who were not deployed (Forrest, Edwards & Daraganova 2018). The authors of the study posit that the 'most plausible explanation for the results ... is that the higher rates of mental health problems found among the sons and daughters of Vietnam veterans are among the intergenerational effects of military service in the Vietnam War' (Forrest, Edwards & Daraganova 2018, p.7). Using the Biological/genetic, Sociocultural and socialisation, and Psychodynamic relational models, the qualitative data in this study suggests the presence of

intergenerational trauma transmission from parent to child; these results are further supported by the quantitative findings, which showed a higher presence of mental-health issues in respondents who reported mental-health issues in their veteran parent.

The outcomes of these studies show a strong likelihood that the correlation of mental-health issues between children and their veteran parents are a result of intergenerational effects of military service in the Soviet–Afghan war, and the transmission of combat-related trauma from parents to children of the first post-Soviet generation.

8.1.2 Domestic violence

Domestic violence incorporates the themes of ‘Child abuse’ and ‘Domestic abuse’, and is intrinsically connected to the key intergenerational trauma transmission findings presented in section 8.1.1. The qualitative analysis showed the presence of domestic and child abuse in seven participant interviews, including veterans, children of veterans, and partners of veterans. The themes of child and domestic abuse are grouped in the findings as they both form domestic violence. Participants described domestic violence within their homes, perpetrated by the veteran and aimed at the children and partners of the veteran; this violence included physical and psychological abuses.

Child abuse, and domestic abuse more generally, are not readily seen as violence within the former Soviet Union, specifically in Russia,² which does not have a legal definition of domestic violence nor a separate law on domestic violence (Gorbunova 2018), and where some forms of battery within the family were decriminalised in early 2017. In the same year, it was estimated that 36,000 women and 26,000 children faced daily violence within the home (Human Rights Watch, 2017). Domestic violence affects one in four Russian families, and two-thirds of all homicides in the country are linked to domestic violence (*Domestic Violence Against Women in the Russian Federation* 2015; ANNA – National Centre for the Prevention of Violence 2017). Annually, 14,000 Russian women are killed in domestic violence–related femicide (Crandall et al. 2005; Kay 2006; Denejkina 2018).

² The qualitative findings in this section are centred on Russia because the majority of data collection occurred in the country (11 out of 12 interviews).

The scope of the issue of domestic violence in Russia suggests that the violence reported by the participants in this study may not be unique to families with a veteran relative because such abuse is part of a larger social problem. However, statistics are not available to differentiate between how many of the perpetrators of these homicides and domestic violence–related abuses make up part of the veteran population, and how many make up part of the general population in Russia. Furthermore, it must be noted that military service makes up part of Russian society, where conscription of all eligible male citizens in the country, aged 18–27, is mandatory for a 12-month draft. This compulsory military service, however, does not guarantee that all conscripted men will participate in war and combat.

Given Russia's policies on domestic violence, the discrepancy between Eastern Europe and the West's relationship to domestic violence must be noted, because child and domestic abuse were presented as questions for all interview participants in the study. It is important to note that all the children of veterans in this study admitted that domestic violence was present in their home and was inflicted against them, whereas only two veterans and one partner of veteran did. Given the particularly sensitive nature of this theme, it can be a reality that not all perpetrators of physical and/or psychological violence against a child or partner would admit to this violence for an academic study. This can be seen as a cultural contradiction; that is, 'the official 'image' people seek to project of themselves' (Spradley 1980, p.152).

P11 and P12, both children of veterans, presented some differences in their relationships to their personal experience of child abuse, with P11 interpreting the violence as abuse throughout the interview, and P12 suggesting that some abuse is acceptable. However, both participants discussed their experience of child abuse at the hands of their fathers as perpetrated under the guise of discipline. It is important to note that P11 is US-based (he emigrated from Eastern Europe as a teenager with his family) and P12 is Russian-based. This information suggests that there is a difference of interpretation and acceptance of domestic violence as abuse between participants in the West and Eastern Europe. This hypothesis is supported by the statistical results of the quantitative study.

Survey respondents who reside in the West reported a greater amount of personality traits related to physically and verbally violent and abusive behaviour by their veteran relative. West-residing respondents were 6.9 times more likely to report emotional and behavioural traits related to physically and verbally violent and abusive behaviour in their veteran relative than the former Soviet Union–residing group (Table 28). The West-residing respondent group also

reported a greater amount of emotional and behavioural traits related to possessive and/or controlling behaviour by their veteran relative (aimed at the respondent and/or at other family members). West-residing respondents were 10.3 times more likely to report emotional and behavioural traits related to possessive and/or controlling behaviour in their veteran relative than the former Soviet Union–residing group (Table 29).

The qualitative and quantitative results of the study show a disparity between Western and Eastern European views of domestic violence and abuse, presenting data to highlight how issues around domestic violence in Russia may be overlooked. This information suggests that participants in the West were more responsive to and more aware of traits aligned with physically, psychologically, and verbally abusive and violent behaviour than the former Soviet Union–residing group, and highlights a disparity between understanding and identifying domestic violence between the two responding groups. It is feasible that the implications of these findings are related to the process of intergenerational trauma transmission discussed in section 8.1.1. The presence of psychological and physical violence might not be addressed within Eastern European households, leading to a higher likelihood of trauma transmission processes, including the Biological/genetic, Sociocultural and socialisation, and Psychodynamic relational models to progress uninterrupted within the home, leading to these negative experiences potentially traumatizing children and impacting the neuroplasticity of a child's brain to specialize in focusing and managing the feelings of fear created by domestic violence.

8.1.3 Collective trauma and mental health in the former Soviet Union

The qualitative analysis showed the presence of collective trauma and issues around understanding of mental health, including PTSD. These findings are the result of the thematic analysis related to 'Trauma'; 'Denial of trauma'; 'Silence, secret-making, and isolation'; and 'Misconceptions of trauma and PTSD'. These themes were reported across all (n=12) participants of the qualitative study.

The theme of 'Denial of trauma' is linked with the theme 'Misconceptions of trauma and PTSD'. This connection between the data suggests that denial may be a result of the misunderstanding of what trauma is and what it means. This is part of a larger problem in Russia, which has a lack of mental-health education, treatment, and understanding (Simon et al. 2004). This issue is part of the effect of collective trauma within the country: specifically, the collectivisation of trauma

and the disappearance of individual trauma in the former Soviet Union (Merridale 2000), the impact of which continues to be felt today, as this data shows.

The qualitative data showed three veteran participants and one child of a veteran focused specifically on denying the existence of trauma in their lives, despite describing specific traumatic instances and ongoing issues within their lives that suggested the presence of trauma. Denial of trauma was identified through the participants describing trauma that they had experienced and continued to experience the impact of; however, when questioned directly if they believed they were traumatised or living with the repercussions of trauma, they either stated that they were not, or avoided the question. These instances of active denial can be explained via two factors:

1. The denial is resultant from the image that participants want to project of themselves, a technique of social control that Spradley describes as 'a major problem in every society ... the need to get people to conform to the values and norms that make social life possible' (1980, p.152). This social control is part of Russia's ongoing issue with the understanding, acceptance, and treatment of psychological trauma, and is connected to the disappearance of individual trauma during the Soviet Union era (Merridale 2000).
2. The denial is resultant from a lack of education around mental health and trauma in Russia, an issue identified in the data through instances of total or partial misunderstanding of the basics of what trauma is and how it arises, as presented by seven participants during the interviews (including six veterans and one mother of a veteran).

Collective trauma is the shared traumatic effect experienced by a group of people. The data in this study showed the presence of collective trauma as resulting from the Soviet–Afghan war through interviews that reported the war impacting the former Soviet Union, specifically Russian society, through the war taking a generation of young men from the community; the government's lack of support for families of returning veterans, or veterans who perished in the conflict; and the government's attempts to hide the conflict. 'Complex situations that follow war and natural disasters have a psychosocial impact on not only the individual but also on the family, community and society' (Somasundaram 2007, p.1); this response and the psychological trauma can shift a society's cultural and social landscape. For post-Soviet Russian society, the concept of collective trauma related to life under a totalitarian dictatorship during the USSR

(which included a century of war, genocide, and famine), culminating in a decade-long war effort, further contributed to the collective trauma of the community.

The theme of 'Silence, secret-making, and isolation' was identified in the data, reported by veterans who described their difficulty in speaking about the war, particularly with anyone who is not also a veteran. This led these participants into a process of turning events of the war into secrets, internalising their experiences. These silences were further reported by the children of veterans, who described secretive households during their upbringing, in which not only were the events of the war not discussed, but also that their veteran fathers engaged in isolating themselves from their family members. Participants reported their family homes to be households of silence. This silencing eventually led to the privatisation of all personal stories, feelings, and emotions. Through the lack of emotional sharing and discussion by the parents, the participants who are children of veterans reported not being taught healthy coping mechanisms. Such patterns and the progression of interfamily silence and secret-making has been covered in detail by Francis Joseph Harrington, who shows evidence for this 'rigid privatism' moving intergenerationally (2018, p.20). Further, these participants described seeing themselves in their fathers through their emotional responses to stimuli, their behaviour, and their attempts of coping with negative issues – all lasting well into adulthood – which was to isolate (P11 added that his now-deceased brother also had a habit of removing himself from any uncomfortable situation by isolating himself and sleeping). This process is aligned with two models of intergenerational trauma transmission: the Psychodynamic relational model (Dekel & Goldblatt, 2008) and Family systems and familial communication (Kellermann, 2009).

The qualitative data supports the process of the Psychodynamic relational model, which deals with the projection of emotions onto the children of parents with combat-related PTSD. These emotions include social isolation and detachment, both of which children can unconsciously begin to replicate. Participants who are children of veterans reported these personal symptoms in the interview data.

The model of Family systems and familial communication was also evidenced in the interview data. This model focuses on the transmission of parental trauma that takes place within a family environment, leading to children living vicariously in the parents' trauma. This model suggests that '*communication* is the mediating agent', and that the trauma can become dangerous and harmful to the child if it is talked about with the child either too much or too little (Kellermann 2009, p.78). Participants who are children of veterans described the trauma and war

experiences of their parent as not being talked about within the household, or with them directly; instead, these experiences were silences and secrets. Likewise, veteran participants described that they internalised their war experiences and trauma by not discussing these events within the family, or with their children. This evidence suggests the likelihood of trauma transmission within the familial environment via the model of Family systems and familial communication.

Issues around mental-health education were supported by quantitative data, which showed a large disparity between Western and Eastern European respondents on all questions related to mental health.

In comparing the response rate by location (West/Eastern Europe) to the question 'Do you believe your veteran relative has undiagnosed PTSD or war-related trauma?', out of 13 responses, all participants who had emigrated out of the former Soviet Union and now reside in a Western country selected 'yes' (30.77%). Likewise, the same number of Eastern European-based participants selected 'yes' (30.77%); however, 38.46% of respondents who reside in a former Soviet Union country also selected 'no' to the question (Figure 8 and Figure 9).

Survey respondents who reside in the West were 3.3 times more likely to report personality traits aligned with mental-health issues in their veteran relative than the former Soviet Union-residing group, while respondents in the former Soviet Union group were 2.5 times more likely to report positive personality traits in their veteran relative than the West-residing group (Table 28). The West-residing respondent group was also 3.8 times more likely to report emotional and behavioural traits aligned with mental-health issues in their veteran relative than the former Soviet Union-residing group (Table 29). The overall outcome of this data suggests that participants in the West-residing respondent group may be more responsive and sensitive to, and more aware of traits aligned with mental-health issues than the former Soviet Union-residing group. This outcome could feasibly be a result of the disparity between mental-health education between the two responding groups and is connected to the removal of personal trauma from the former Soviet Union, something that countries in post-Soviet society continue to struggle with today (Merridale 2000).

During the Soviet Union, individual problems were described as 'egocentric' – both in civilians and in military personnel, and the erasure of individual pain and trauma from society placed society's focus on the collective struggle and aims of the State (Merridale 2000). This data shows how the impact of this erasure continues to be felt today.

The Likert scale responses additionally highlighted a disparity between Western and Eastern European participants, concerning questions related to the impact of their veteran relative's combat experience on their lives from childhood into adulthood. Respondents in the former Soviet Union–residency group were overwhelmingly represented in responses aligned with Disagreement to statements across all seven questions, while those in the West-residency group were strongly represented in the Agree and mid-range responses across all seven questions (Table 38–Table 44). Respondents in the West-residing group were also 3.5 times more likely than the former Soviet Union–residing respondent group to select Totally agree to Slightly agree across the seven questions, while those in the former Soviet Union–residing respondent group were 2.3 times more likely than West-residing group to select Unsure to Totally disagree across the seven questions. These results support previous data, showing that West-residing respondents may have been more responsive to, sensitive to, and more aware of interfamily issues, including mental health and trauma, than the former Soviet Union–residing group. Furthermore, these results show that respondents in the former Soviet Union–residency group judged the impact of their relative's military service as less impactful on the individual and familial environment than the West-residency response group. This outcome could feasibly be a result of the disparity in mental-health education between the two responding groups.

The disappearance of individual trauma in the former Soviet Union has led to a domino effect that continues to impact post-Soviet society. As Western psychiatric ideals were abandoned at the end of the 1920s by the Soviet government, this led to Stalinist psychiatrists branding shell-shock sufferers as egocentric, suggesting that 'men afflicted by shell-shock simply lacked social responsibility and were generally selfish and possessed a personal weakness' (Merridale 2000, p.40). The qualitative data in this study showed that the view of linking trauma to personal weakness and individualism persists today in some form, highlighting how the collective structures of the former Soviet Union are still being felt. As a result, mental-health treatment and awareness are not encouraged by the Russian military, which continues its orientation towards optimising the capacity of its men, rather than caring for their suffering and mental health (Sieca-Kozlowski 2013). The quantitative data supports this hypothesis by showing a stark disparity between Western and Eastern-European responses to the impact of trauma.

The results of this study show the culmination of traumatic experiences on an individual and collective levels, and an absence of a collective healing as the trauma continues to be unaddressed both at the individual and collective levels. The data showed some evidence for processes of intergenerational trauma transmission resulting from silence and secret-making,

which itself is connected to poor education and knowledge around issues of mental health. Russia's history of collective structures is still being felt today, and this may be useful in creating processes of addressing collective trauma in the country, in order to start interrupting the ongoing cycle of intergenerational trauma transmission.

8.1.4 Makeshift group therapy and substance abuse

The qualitative data showed evidence of substance abuse, specifically alcohol abuse, in six observations, including four veterans; the wife of a veteran; and the child of a veteran, all related to the abuse of alcohol by the veteran.

All four veterans described their use of alcohol in order to 'dull' the impact of their traumatic experiences during the war, which included loss of comrades. This finding is supported by the literature, which has found that alcohol distribution increased as the necessity to reduce general anxiety amplified during conflict (Grinker & Spiegel 1979, p.69; see also Herman 1992, p.44). Veterans expressed that issues with alcohol continued into civil life, reporting that the majority of veterans relied on alcohol in order to live through their experiences after war. This is further supported by first-person accounts of veterans of the Soviet–Afghan war, as reported by journalist Svetlana Alexievich in her book, *Boys in Zinc* (2017).

Use of alcohol was also presented in data related to 'Makeshift group therapy', where it was used in order for veterans to begin opening up about their traumas and experiences of war, and as a way of controlling these extremely uncomfortable emotions during makeshift group therapy events.

Interviews showed a prevalence of group meetings created by veterans, which mimic group therapy. Interviews highlighted that these makeshift therapy groups were valued by veterans as a space to find resonance and meaning in relation to their traumatic experiences. Run on a regular basis, primarily coinciding with dates of memorials and remembrance, these spaces are not seen as group therapy by veterans, despite their setup as spaces of sharing and listening mimicking that of group therapy. No one with therapeutic training facilitates these sessions. These spaces are populated by a community who are generally more averse to mental-health treatment or the idea of mental health more generally, as evidenced in section 8.1.3. However,

the spaces seemed to function more as somewhere to revisit trauma rather than to discuss issues the veterans continue to confront in their daily lives.

In his 2015 book *The Body Keeps the Score*, Bessel van der Kolk describes his attempt to set up a therapy group for combat veterans, in which the limitations of the group were highlighted when van der Kolk 'urged the men to talk about the issues they confronted in their daily lives; their relationships with their wives, children, girlfriends, and family' (2015, p.18). Van der Kolk notes that the response of the veteran participants was 'to balk and resist and instead recount yet again how they plunged a dagger through the heart of a German soldier in the Hurtgen Forest or how their helicopter had been shot down in the jungles of Vietnam' (2015, p.18). This scenario and limit of van der Kolk's therapy groups is echoed by the makeshift therapy groups described by veterans during their interviews: their topic of discussion continues to be the war and their combat experiences. Like van der Kolk's group members, they cannot 'bridge the gap between their wartime experiences and their current lives' (2015, p.18). Van der Kolk goes on to state that the traumatic event that has caused and continues to cause these veterans pain, has become 'their sole source of meaning' (2015, p.18). This position is further reflected in the interviews with veterans of the Soviet–Afghan war, and shows a stronger connection between the themes of 'Makeshift therapy groups' and 'War and identity formation'. The qualitative data showed how veterans' everyday identities were based around the Soviet–Afghan war. Their existence and their work revolve around this identity, which includes community outreach, support groups, fundraising, and education.

Quantitative data is not available on the theme of 'Makeshift group therapy' in this study; however, the survey did ask respondents about self-destructive behaviour exhibited by their veteran relative, including alcohol and other substance and abuse. Self-destructive behaviour in veterans was 4.6 times more likely to be reported by participants who reported personal mental-health issues than participants who reported an absence of personal mental-health issues (Table 20). These quantitative findings suggest a relationship between relative alcohol and/or substance abuse by the veteran and mental-health issues in the children. This relationship is supported by the literature, which has shown that parental substance abuse is associated with the risk of child abuse (Walsh, MacMillan & Jamieson 2003), and connects to key finding 8.1.1 of Intergenerational trauma transmission – specifically, to the effects of family violence on a child (Harkness, 1993, pp.635–643).

If veterans continue not to receive treatment for their mental health, the cycle of intergenerational trauma transmission cannot be interrupted. Data on makeshift therapy groups calls back to the collectivism of the Soviet Union, discussed in section 8.1.3. This collectivism, and the collective mindset in which post-Soviet society remains, can be used to enhance these makeshift therapy groups into fully fledged group therapy sessions, in which spaces the veterans will not see their traumas as individual, or egocentric.

8.2 Implications

This section presents the implications of the key findings of this study in the field of intergenerational trauma transmission; reviews the impact of the Soviet–Afghan war and combat-related trauma transmission on the first post-Soviet generation; and provides recommendations for future research and goals.

The results of this mixed-methods study show an ongoing impact of the Soviet–Afghan war (1979–89) on the first post-Soviet generation. The data suggests that this impact is a result of varied processes of intergenerational trauma transmission, including the Biological/genetic model, Sociocultural and socialisation model, Psychodynamic relational model, and Family systems and familial communication.

This study provides four key findings:

1. Intergenerational trauma transmission;
2. Domestic violence;
3. Collective trauma and mental health in the former Soviet Union; and
4. Makeshift group therapy and substance abuse.

The qualitative and quantitative data show how these key findings connect with each other and relate to the intergenerational transmission of trauma from veteran parents to their children, the first post-Soviet generation. Specifically, the results show that children of veterans are exposed to domestic violence and child abuse within the family environment; (adult) children of veterans exhibiting behavioural, personality, and emotional traits aligned with mental-health issues

(PTSD) are more likely to self-report mental-health issues than those children who do not report these symptoms.

The outcome of this research shows a strong likelihood that the correlation of mental-health issues between children and their veteran parents is a result of the intergenerational effects of military service in the Soviet–Afghan war, and the transmission of combat-related trauma from parents to children of the first post-Soviet generation. The implications of these key findings show the grave situation of mental health and trauma in the former Soviet Union, which continues to function as it did prior to the disbandment of the USSR in 1991: individual mental illness and trauma continue to be disappeared. This issue highlights the radical need for improvement in mental-health education and support within the former Soviet Union generally, and within the military specifically.

8.3 Recommendations and conclusion

The erasure of individual pain and trauma from Soviet society (in the Soviet Union, individual problems were described as ‘egocentric’ – both in civilians and in military personnel) placed society’s focus on the collective struggle and aims of the State. This impact on the cultural fabric of society continues to be felt today, as the collectivism of the former Soviet Union continues within post-Soviet society. Rather than fighting what has become a cultural ethic, mental-health professionals must utilise this collectivism to their advantage and to that of post-Soviet society, in how to best approach the healing of society, both in its collective and individual traumas, as there ‘can be no complete healing for anyone as long as the collective sources of trauma remain unaddressed’ (Kellermann 2007, p.9; see also Hamber 2009).

In the field of traumatic stress, Alexander McFarlane writes that there is a propensity ‘for periods of intense interest and periods where the lessons of the past are dramatically forgotten’ (2000, p.12), a phenomenon highlighted in 1947 by Kardiner and Spiegel, who wrote that neither the public nor the field of psychiatry sustains its interest in neurotic disturbances (1947, p.1). It is vital that research on intergenerational trauma transmission does not fall out of interest with the public, social scientists, or mental-health professionals and researchers.

Further research is urgently required on intergenerational trauma transmission within not just the former Soviet Union but globally, in order to:

1. Influence mental-health policy in the defence forces.
2. Implement safety nets and structures protecting the mental health of military personnel – for whom treatment and support includes their immediate family – in order to have the best chance of interrupting or stopping the cycle of trauma transmission through the familial environment and childrearing.

I recommend that this research be mixed-methods and longitudinal, with qualitative data providing first-person accounts of the impact of veteran trauma and trauma transmission onto their children, and a quantitative data sample to be at a generalisable level, so as to have the best chance of convincing policy-makers that part of military spending must include mental-health treatment and mental-health support of veterans and their families.

In this process, qualitative data is of vital importance because it gives voices to the participants and ensures that they remain people in the research, and not turn exclusively into quantifiable data. Harold Kudler writes:

There is a danger that the field of traumatic stress will move away from the basic humanism that initiated the study of psychological trauma in the first place ... If we continue to simply search for the traumatic 'germ' (be it a neurotransmitter, gene, brain process, or idea) that 'causes' PTSD so that we can develop the antibiotic against it and 'cure' the illness, we run the danger of forgetting that medicine is already moving beyond the germ model toward a multidimensional, holistic appreciation of disease and of health. It would be ironic if trauma workers jumped to a paradigm that is already being abandoned by our medical colleagues (2000, p.7).

As social researchers of traumatic stress, we must remember the basic humanism of the field; we must give space for the voices of the people we study to share their stories of trauma so as not to turn their voices into statistics without names or faces or humanity.

A 2016 review, looking at transmission of trauma in refugee families, highlighted the limited knowledge on intergenerational trauma more broadly, noting that a considerable amount of work is still needed to address the current gap in research (Sangalang & Vang 2016, p.10). The mixed-methods study in this dissertation has partially addressed this gap, adding new knowledge to the field of intergenerational trauma transmission. It is the first of its kind

concerning the Soviet–Afghan war, and the first of its kind investigating the impact of the Soviet–Afghan war on the first post-Soviet generation.

CHAPTER 9:
ЧЁРНЫЙ ТЮЛЬПАН
(BLACK TULIP)

'To this day, I still have Afghan dreams, from which I awaken in great pain and sadness.' – Tamarov 2001³

9.1 Preface

The creative portion of my dissertation is an example of exo-autoethnographic writing. The aims of this work are to gather silenced voices, walk the reader through the process of trauma transmission, and include my personal, autoethnographic relationship to my research on intergenerational trauma transmission. This text presents a narrative of my ethnographic work in Russia, where I was accompanied by my father as part of my research into his trauma and its impact on me during my formative years and into young adulthood. This writing explores our fraught connection and our trauma through the time we spent together in Russia during my fieldwork in 2017, as well as through memories of my childhood and teenage-hood, culminating in the conclusion of our relationship.

This text additionally narrativises the face-to-face interviews I conducted for my empirical research on intergenerational trauma transmission. The narratives of children of veterans, partners and parents of veterans, and veterans themselves are presented in their own voices, to privilege their voices. All interviews were conducted in Russian, with the exception of two interviews that were conducted in a mix of Russian and English languages. All transcriptions were completed by me, including all translations.

³ *Afghanistan: A Russian Soldier's Story*, p.4

9.2 Introduction

Abused children grow into adults, and they remember their abuser.

* * *

'You are my daughter, I can do whatever I want to you.'

He said these words to me when I was nine. By then we had already migrated to Sydney, Australia. We lived in a three-bedroom apartment in Chipping Norton, with cream-carpets, a communal tennis court and pool, and I thought we had *the life*. It wasn't until my late-teen years that I found out we were on the lower-socioeconomic spectrum. I was at university, doing an undergraduate degree I never really ended up using for anything, and my classmates had \$20 and \$50 notes and credit cards for beers; I had my Youth Allowance from the welfare office, and the below-minimum-wage I made selling CDs at one of the last independent record stores in Western Sydney.

But when I was nine and before university and before bars and records, I rode my scooter to Moorebank Village shops, and walked the aisles in the general store, amazed by the stationery: coloured markers; cute, cubed, colourful boxes of tissues; laminate cards for laminating things with a laminator I didn't have; coin boxes; and I never took much notice of the food bar and the colourful beverages in the fridge at the back near the check-out – such food and drinks were treats for special occasions, and there was nothing special about my trips to Moorebank Village shops. But I did buy a marker, and I bought a sheet of plastic laminate I stuck to my wall, and I bought one of those cute, cubed, colourful boxes of tissues with a brown puppy on its side – it was a prized possession that sat on my desk in the bedroom I shared with my sister, then my brother, and then my sister again as their ages changed and they grew and I was perpetually stuck in the middle. I felt guilty every time I pulled a tissue from that cute, cubed, colourful box with a brown puppy on its side. The laminate sheet ended up ruined after I belatedly figured out that not all coloured markers are dry erase markers like the ones my teacher used during class.

The world outside the apartment with cream coloured carpet was dreamlike. It was whimsical; it was safe. Inside, standing on that carpet, I was sinking. I didn't know it yet, but I did know fear, and I still remember realising the incongruence of that fear – the fear of someone who was my

parent. And so I acted out love, and I performed, and sometimes I even forgot that I was performing; and sometimes I know I was loving, but the fear took over, gradually, and one day he said that he could do anything he wanted to me, and that day I realised I had lost my agency. In fact, I realised I didn't have any at all from the moment I was born. To him, I was a possession; not inanimate, but not quite human, either. I was a thing perpetually stuck somewhere in between: I was living, I was breathing, but I was not my own. I was a doll with a heartbeat.

* * *

I began this research as part of my PhD study on intergenerational transmission of combat-related trauma in early 2015. We're raised as an individual part of a whole, raised with the idea of autonomy, of independence, of choosing our own and finding our own. But, despite thinking that I made the self-directed choice to begin this research project, and no other research project, perhaps it actually found me.

It started in 1985; my father's first deployment into Afghanistan. The war started in 1979, as the Soviet Union invaded Afghanistan, attempting to turn the independent country into its 16th republic. The war continued for another four years.

He was 23; today, I am 28.

As he stepped off the military plane into Kabul's sun and heat and dust, he carried a cake in one hand. He smiled, and his mind continued to amass memories. But the one thing that I am certain did not enter his mind in that precise moment was that a daughter he had yet to meet, or even consider (she would come five years later), would write about his first step onto Afghan soil some 30-years in the future: write about that first step he took into the Afghan-Soviet War; the same first step that set off a contagion that impacted our family for three decades.

Thirty years – for thirty years my father let the events that led to his PTSD sit on the inside, buried somewhere in the crevices of his mind. The war we read about, but *really* knew nothing about, followed my family for two generations. And as a third one began through my sister's children, my father finally began to speak of the events that led to this moment: he began to tell me about the war, what he saw and what he did, and what he smelt and felt and could never

forget. We're now at the beginning of trying to understand how that day in 1985 led to a family taunted by violence, and hate, and silence.

'War is romantic. But that romance fades away when you've seen your first two or three dead bodies. And whatever is left turns into hatred when you see bodies as torn, ripped apart, as masses of flesh,' he said to me in 2016.

'Returning home, no one waited for us,' he explained.

'Life continued while we were at war, and no one seemed to be aware of the carnage. Returning, we were not heroes, we couldn't get jobs. And so the Afghan war birthed many killers, drug addicts, alcoholics – it's all the same. You stopped seeing people as humans, after the war. If before the war killing a person was difficult, after the war it became nothing, because you didn't see them as people, you saw them as meat. This happened because we lost our humanity.'⁴

My father and Mother met in Afghanistan – she was a civil employee working in a warehouse laundromat in Shindand Air Base in Western Afghanistan. Her role was distributing fresh uniforms, linen and other textiles to Soviet soldiers. My Ukrainian-Russian Mother ended up working in the war after an argument with her mother, my grandmother. She was saving and planning to take a cruise on the Danube, which culminated in my grandmother accusing my Mother of abandoning her. So, in her stubborn might, my Mother decided to forget the holiday and go to Afghanistan instead, where she stayed and worked for two years, from 1983 to 1985.

My parents married in 1986 after my father's first tour. My Mother was already pregnant with my sister, who was conceived in Afghanistan – something none of the children knew until 2017 because no one bothered to tell us, much like our family history in general: everything is shrouded in silence, as if it didn't occur in the first place. And the thing is, we never even knew what to ask our parents about for more information, because we never knew what was, and is, missing in the first place.

My sister, Polina, was born in 1987 in Russia; I came in 1990 in Ukraine, as did my little brother, Yuri, only three years later in 1993.

⁴ Author interview, Sydney, 2016

* * *

Growing up I had a Mother, and a monster. I didn't know what had happened to him, and because I didn't know, I couldn't understand. And because I didn't understand, I could hate – and I did hate.

But he didn't know, either. The war seemingly took his humanity, as it tries to with millions of others. And we need to understand just what happens when the battle stops on the ground but only pauses on the inside, reigniting behind wooden doors, metal doors, reinforced doors, doors in Asia, in Europe, Eurasia, Africa, North America, South America, Australia: in the minds, and in the families. The trauma becomes a hidden tyrant, ruling the individual and their home.

That battle followed him to his home in Ukraine, and then it started to follow me: from my birthplace in Mykolaiv, to a cold corner in a room in a beautiful apartment in Ulyanovsk, to Sydney, and to the Chipping Norton apartment with cream coloured carpet. And it did not stop there. It lurked in me through every move, every new home, every new apartment, and country and city, and to this desk I am sitting at now, writing to tell you my story.

I am doing this for all of the children of abusive households whose abuse might have been prevented. I am also doing this for selfish reasons. Abusers can't comprehend that a child will grow into an adult and will grow to have a voice and agency, and so I am doing this as a retaliation: I am standing up for that five-year-old girl when all she could do was be afraid in a corner of that cold fucking apartment; I am giving her voice back to her.

I am giving myself agency.

In her seminal book, *Trauma and Recovery*, Judith Herman writes that 'The ordinary response to atrocities is to banish them from consciousness'.⁵ This book is here to bring the atrocities back into consciousness. The leaders of the former Soviet Union turned their invasion of Afghanistan into a hidden war – but though the events may be long gone, the trauma of the war

⁵ 1992, p.1

continues and moves through generations, and until it is confronted it will continue to cast its shadow forward.

In this book I uncover the private as it connects to the public, because no matter how hard they tried to hide the war, it is public, and it continues to impact the people of the former Soviet Union, and lives on through the first post-Soviet generation.

* * *

We have convenient ways of remembering things. We believe our truth is a true truth, until someone interrupts us to correct the reality, or fills in a violent scene you dissociated from like a fiction story you now force yourself to remember for yourself, but all you see are your Mother's words forming into images. And you still can't see it. It's still blocked. And you wonder how it happened. You wonder what you looked like swinging a knife towards your father, and what his face looked like when you threatened to kill him. And you try to imagine your Mother on the kitchen tile floor, as your father was kicking her.

How can you forget this, Anna? How?

How can you forget the moment that left your Mother bruised and beaten?

I don't know. I can't answer this. Not yet.

9.3 Chapters 1–17

Chapter 1

Have you ever considered how trauma travels through our bodies? I want you to imagine the trauma of your parents dancing inside of you, presenting as little tags attached to your genes, directing their expression.

Scholars have been talking about trauma transmission since the 1960s. Just six decades of discussion about an epigenetic and environmental process that's arguably as historic as our development as *Homo sapiens*, and with evidence of epigenetic transmission resulting in epimutations in other mammals, perhaps for all of our history.

I was travelling to Russia in search of voices from the war in Afghanistan. I wanted to hear the stories of others who went through this war, the veterans, the children of veterans, and their partners and mothers and siblings. My PhD thesis is a mixed-method project, which includes a qualitative analysis of interviews, and a quantitative analysis of survey responses. The interviews I conducted in Russia made up part of the qualitative analysis of my dissertation.

But I was dreading the day for months, some six months, really, because I was making this trip with my father. We were going to spend time together while I conducted my fieldwork in order for us to better understand our trauma, to be back in the place where the abuse took hold of our family and rooted itself into our existence, in the place of my formative years and his former life. And every time the date was pushed back or delayed I was relieved and I had space to breathe again for just a little while longer because I knew the delays and the postponements would grow fewer and shorter until they weren't even there anymore, and then I would stop breathing.

And today I stopped breathing.

This morning, as we were driving to the airport, a dread sat in my belly and all I wanted to do was cry. And so I kept imagining that it would be postponed again. Or the car we were driving in would crash, really badly crash; and I kept thinking how it doesn't even feel weird that it's finally happening as if my body is detached from my mind and it's just going with the sickening flow

while my mind is still lying in bed curling up with Seymour and that I simply am not there in that car on that road in the night driving out of the Inner West of Sydney.

I started crying and remembered that if anything did happen to me it would be okay because some days prior I sent a text message to my Mother and sister telling them that if anything happened to me to know that it was him who did it because no matter how much time had washed over me I was still afraid of him. My sister said I was paranoid and I probably was, but it all had to come from somewhere and I was starting to feel like that five-year-old in the corner again, stuck in that corner because everything was scary and I couldn't get out and I knew I couldn't get out now, knew I couldn't do anything but shut my eyes and so I just had to stay in that corner and wait for it all to come through and pass over me.

What a fucking nightmare.

On the flight his lack of boundaries or acknowledging that other people were around us was basically a memoir of his life, as he coughed and stretched his legs and kept insisting that I rest my head in his nook; and every time I said no he kept asking anyway and pressing anyway, as if surprised I wasn't five-years-old anymore and would not want to rest on a shoulder as his arm suffocated me, no matter how metaphorically. But I know that he was just trying to be a kind person like he sees in the movies but it's as if he doesn't realise that he missed the boat of kind paternity and you can't make up for lost time and time lost to violence. And so, his head was stuck in some movie which had just started and he sat there as if he had no history, as if we had no history, and as if I didn't see him almost kill my Mother that one time in a beautiful house we owned for a few years when I was in high school.

And there we were, on a plane: he was performing the doting father, while I performed the engaged daughter, and I don't know if he was aware of the performance from both of us or if he deluded himself into thinking that it was real. And what scares me the most is that he thought everything was okay and that offering a nook with his arm meant that the past was no longer part of my life or his life, and that the nook signified some sort of erasure of all the bad that he had done and that the nook meant that everything was forgiven. I don't even know if he saw himself as performing anything, really, because come to think of it, he oscillates from tyrant to doting father without a memory, and maybe today he was the latter. I wonder if the past lives in his heart and blood like it does in mine because it all shaped me and it's all there every day as I look at the world around me; it's there in the unconscious, I am sure, and that nook was the

filthiest thing I had ever seen, and it was attached to the body of a monster, and so I sat shifting left and away from the nook and its monster, making myself as small as possible.

I realise now he wasn't performing a doting father; he was infantilising me to retain control. No matter how old I get, my father only ever speaks to me like a little girl. Abusive parents forget that children turn into adults who can protect themselves, and who remember what they did to them during childhood. That's why these same abusive parents treat their adult children as young children – they attempt to enforce an infantile relationship on their adult children in an attempt to retain control of the person. The difference now is that I understand, whereas he continues to see me stunted in childhood.

Perhaps I am.

I don't remember a single moment of that event and of that story when he nearly killed my Mother. But I know I was 14, and I know I dissociated during every single moment of that day and of that event; and I know my Mother recounted that story to me some time later while we were driving somewhere and she was behind the wheel and then she couldn't believe that I had forgotten. But then she realised that I hadn't forgotten – the memory just wasn't anywhere accessible in my mind. And then she started to understand more about my head and how it performed, and that it underperformed and that it was damaged. So, she told me the story as if I wasn't present for it and in it, and I sat there listening to it and to its details and everything that happened and it all felt new because I simply could not remember – as if I simply was not there.

My childhood is fragmented that way, and it is happy and it is sad and it is white and grey, but the black gaps I don't really remember and they are wide and long because it is some kind of pattern of my mind to dissociate, like goats faint when they are afraid – they just drop – drop down to not be in a conscious existence when a danger is present. That pattern began when I was five ... or six. I don't remember.

I never knew that what was happening wasn't normal. I didn't have anything to judge it by; I thought that is how life goes and sometimes it's good and sometimes it's bad but for some reason when it was bad it felt really, really bad, but I thought it was normal and at the same time I knew it was wrong and maybe wrong was normal anyway.

I was raised in a household of violence. Seeing my Mother hit and pushed around was part of my childhood, screaming and yelling and roaring was its soundtrack while my father attempted

to normalise it and silence the voices of three terrified children and their beaten Mother. And if there was another thing that coloured my childhood it was a flower. There were so many flowers. Bunches of flowers that coloured apologies as my father returned after another assault a day or two or seven later. Growing up, I thought Russia had a colossal and prosperous flower trade, as I began to associate the giving of flowers as the act that follows a beating a day or two later. And so, I watched men on trams and trolleybuses with big, expensive bunches of flowers, and I thought they too were returning home to apologise to their partners or wives for another beating they gave them a day or two ago. As a little kid I didn't understand why my Mother didn't care for these bunches of flowers from my father, as an adult receiving flowers alongside an apology regress me into childhood, and now I understand.

But my father he did normalise it. Though inside I always knew that something was wrong, that whatever was happening shouldn't have been happening and I always knew that he chose to beat and hit and yell and abuse despite trying to explain the violence away with 'I could not control it'.

As an adult I now know that my father made the proactive choice to abuse, and I'm sure in his mind it made him feel like a big, great man but in my mind's eye I struggle to remember the last time I didn't see him as a little person in a big world terrified and pathetic and abusive of anyone physically smaller, but watching his mouth around anyone physically bigger.

And that day he decided to attack my Mother, again.

My father only stopped stomping her when I pulled a knife off the kitchen counter and threatened to kill him.

That was the last time he hit her. What happened next is a blur, such a blur in fact that I only remember two things: seeing our new rental home with my Mother and trying to work out why none of the lights were working upstairs (we later realised there was a delay between the flick of the switch and lights turning on).

My father was not there.

It was 2004.

The next moment I opened my eyes and we were already living in that new home in Stanhope Gardens, near a trailer park and Parklea Correctional Centre (a private maximum and minimum-

security prison). My Mother, my brother, and I were starting a new life together, while my sister moved out on her own. Whatever memories the hippocampus was trying to make from the moment of my father's severe assault on my Mother I don't have access to; the next thing I remember is walking across the lawn in the front yard in new Doc Martens: I was on my way to start the ninth grade, and I didn't have weight on my shoulders.

It was 2005.

I felt free.

Today is 2018. My mother still has that knife and the knife set and the wooden knife block that houses it. It's in her new home.

* * *

The flight was long, and I tried to be as small and quiet as I could throughout. We left the plane and crossed Dubai International Airport, making our way to the second and final flight before we arrived in Russia, in Samara; and then a long car ride before we arrived at our final destination: home.

As we boarded the small Fly Dubai airplane, I was oscillating between dread and excitement. The journey was five hours long and for five hours I tried reading a book I can't remember.

The flight was uneventful, and that's what was exceptional about it. Uneventful is an adjective never used to describe my family, but here we were: one silently reading, the other silently focusing on a book she can't focus on, but silent, nonetheless.

* * *

Are we all victims of our fathers? Of our families?

We try to form a coherent past to better understand why we are who we are today. Perhaps it is to justify it. To justify who we are, and what we do, and how we act and react.

We don't want to vocally place blame; even inside ourselves we don't want to blame the dad, the mum, the siblings. But then the five-year-old who remains intact for two decades is still sitting there, in the corner of your mind. And it's a five-year-old who basically experienced

everything that moulds you into the person you are, and leads you into your adulthood, filled with the shit and piss of the first five years that just won't go away.

And when you look at that kid, you know you have every right to begin blaming the adults that couldn't look after her. The adults who were instructed to nurture her; to save her. But who didn't do their job. But perhaps the blame isn't for today. Perhaps the blame is for the bygone era. For the time you couldn't stand up for your five-year-old self. But then you survived, and the adults are still adults, and so are you, and now you have a voice. And now they must listen.

Chapter 2

So, this is what it does: traumatic stress can physically change the brain.⁶ How the body responds to stressors, can, too, shift internally and manifest externally. Gene expression can be augmented; an epigenetic process that doesn't change the DNA, but changes how the affected genes work, or express themselves. These epigenetic shifts don't only impact the primary subject – the body exposed to the original trauma. They move through generations. And so that trauma of your parents, your ancestors, potentially continues to impact you. Impact your makeup, impact how you respond to stress or how you regulate your emotions.

On approach to Samara, a city in South-Western Russia that I only know about because that's where you land to then get into Ulyanovsk, we piled on the clothes. Five minutes in fur boots and coats, we were sweating and anxious to alight from the plane. I was sitting behind the coloured Perspex dividing business class and tuna-can economy, and noticed no one, NO ONE, no one was as overdressed as I was. I started to take off my coat but my father stopped me.

I sweated it out for another quarter of an hour before we finally walked off into the fresh air of Russia in February. It was nearing the end of winter; Maslenitsa⁷ was waiting around the corner, the snow still on the ground. I pressed my face to the glass at luggage claim and looked out to the white on white on white, a sleek road, a blue building in the distance followed by a white one, and the airport surrounded by a fence with a barbed-wire top.

As our luggage made its way down the carousel, I was already counting the days until I would be back at Kurumoch International Airport, on my way back to Australia. Back to that home. I wasn't even at my final destination, not yet. Ulyanovsk was still some three hours' car ride away, north-west and across the Volga River from Samara.

Family friends I couldn't remember by name but whose faces I recognised, walked into the airport lounge. They were driving us to Ulyanovsk, the city I lived in from three to nine, the first

⁶ Bremner 2006

⁷ Eastern Slavic religious and folk holiday, a sun-festival celebrating the end of winter

city I remember clearly; the first home I remember well. But our first stop was to collect honey from a bee-keeper.

Svetlana and Slava live in an old Russian home, reminiscent of an izba,⁸ in what looked like a small village. Honestly it could have been an actual izba, but I wasn't wearing my glasses and couldn't squint into 20/20 as we approached the house.

Front door. Hats in coat pockets. Coats hung. Scarves hung on coats. Shoes off. Long sleeves rolled up. Exhale. Say it's warm inside.

'It's so cosy here,' I said, for some reason forgetting that Russian homes and apartments are hot, hot, HOT in winter.

Plastic white buckets of honey were brought into the living room. Everyone had a spoon and tasted the different varieties on offer. Each time my father shoved a teaspoon of honey into his mouth he gave a nod of approval; everyone did. That nod with the wide eyes and raised eyebrows and the weird pursed-but-not-quite-pursed thing your mouth does – yes, that one.

I couldn't bring myself to have a taste from the enormous buckets, but, a no is not a no to my father; a no is a yes that you haven't arrived at yet. So he gave me a spoon and I was ready to feign interest, but fuck, that honey did taste good.

We chose which honeys to buy to take back to Sydney. Small plastic yellow and orange buckets were brought into the living room. And the division of labour occurred. The men were to fill the small buckets with honey from the big buckets, while the women sat in the kitchen and chatted.

Honey.

Oh, honey.

I walked on the beige block-repeat-patterned linoleum into a dark narrow hallway. The kitchen was on my left and so I entered, thinking about Domovoy.⁹

Svetlana made me tea and brought out pancakes with home-made jam and pickled mushrooms.

⁸ Traditional Russian country farmhouse

⁹ Household god in Slavic religious tradition

I asked her how she was.

And she told me.

Svetlana and Slava were forced into poverty like most other pensioners in the country. Some months it gets so tight that she doesn't have money to pay for a tram or bus ride. Like February in Russia, they were in the winter of their lives, but the snow had turned to ice, and the ice wouldn't melt for them anymore.

The room was coloured eggshell-blue, with a religious icon on a wall shelf near the window. An orchid sat in a turquoise pot at the end of a dining table that was pushed into the corner of the kitchen. Svetlana brought out another jar of pickled mushrooms. I pretended to be civil and didn't eat the whole thing, jar and all.

The kitchen was like any kitchen in an older Russian dwelling; cosy, clean and full of homemade food.

And so I sat there and drank my tea, and ate mushrooms and pancakes with jam.

Then the aspic came out. I still hadn't quite acquired the taste for what Anglo-Saxons tend to call 'meat-jelly', but not to offend, I had a bite, as I always did.

And fuck that aspic tasted good.

As we walked out into the winter we left Svetlana and Slava in their own winter. I felt so much sadness leaving them to go on living outside of my umwelt, and I outside theirs.

I knew I would never see them again.

* * *

I never knew that families were meant to be units, of support, of love. A team.

Mine was always split: we were all afraid of my father, and anything we did or said was seen as an attack on my father; or something my father believed in, or wanted, or imagined, or supported.

One time we disagreed on something inconsequential I can't even remember anymore, but I do remember him coming up to me as I sat on the corner of the sofa in the lounge room of our new

home in Kellyville Ridge. I must have been 12. The television was on, and he was yelling about something again. To make me stop talking this time he came up to me with a closed fist, brought it to my face and cried at me:

'Try to say something again!'

Red faced, his emotion was oozing from his skin. My voice, my having an opinion, my having a glimpse of agency enraged him and all he thought about was punching a little girl in the face to make it stop.

I didn't care anymore and told him go ahead:

Punch a little a girl.

** * **

We are all victims of our families. The fathers, Mothers; and they, too, of theirs.

We tend to forgive only when we can understand, but we can't understand our parents as they are perpetually stuck as a parent, not an adult, or human. Just, a parent: always older, always dictatorial, always anything but a human with a young past, or hopes, or dreams, for that matter.

They're like the school teacher you spot outside of school – an alien.

But, you never see the parent outside of school. You especially never see the parent outside of school when you are brought up by secretive parents; by parents who brush off any question about their past with a wave of the hand, an 'eh', or any variation of a sentence alluding to the story being boring, uninteresting, bland. Anything that echoes 'who would want to hear about this? There are more important things, no?'

One late evening, while nursing a CC-dry with lime at the Courthouse Hotel – or was it the Strawberry Hills on Devonshire Street in Surry Hills? – a friend told me that forgiveness comes from understanding. I tried to agree, and I think I did agree, but I didn't fully comprehend the meaning.

This was one of those things that you need to experience first, to fully understand. We were on the topic of my father; I think at the time of this conversation I had not spoken with him for about a year, maybe less, perhaps a little more. And my friend, David – a great lover of his daughters,

a great father to his daughters – looked at me, looked up, smiled, and dropped a small sentence so loaded, that I have remembered it since. I knew the sentence was important, partly because David's words are deliberate, not a single one a waste nor a platitude and each one being present with a purpose, and partly because something in those words touched me. It took a while to understand what that was, and to fully conceptualise the meaning of those four words. But it did happen, and it happened one warm, Saturday afternoon.

It was April 2nd, 2016, at 12PM. I was in the shower, washing my hair, and thinking about my morning interview. Just thinking, and on and on and on, and then I cried because I finally understood what David meant, and I finally came to realise that the two years I spent without contact with my father were maybe a mistake. I finally began to understand him, and why he was the way he was, and what made him the way he was, and ultimately, perhaps, what made me the way I am.

I finally saw my father as his own human when he told me about the war. At 23 I cut off contact, and for almost two years there was none: his number was blocked, so even his attempts I was not aware of. But, two years on, at 25, I finally saw him as a person.

And then, everything would change again.

Chapter 3

Intergenerational transmission of trauma has been there all along, a fundamental part of our history and human existence.¹⁰ Trauma is passed on through writing, through stories, histories, body language, and in the silence. Trauma stays within families, discussed or not, it is there, and it continues to breed through us as we breed and as our families grow.

The silence surrounding trauma may convince us it is no longer there, or that it is dormant, and waiting to die out. But the reality is that the silence makes it grow stronger as it remains evasive, continuing without confrontation. The prerequisite for the healing and restorative process for the individual and community is the remembering, and telling the truth about the events that led to the trauma.¹¹ Silence means the tyrant stays with us from parent, to child, and to children of children, who deal with its remnants long after the primary trauma is over, and perhaps, long after the individual experiencing the trauma first-hand is no longer here with us.

In one word, it is endemic.

Riding on the highway to Ulyanovsk, the sides of the road were a bleak scene – snow and bare trees, snow and bare trees, more snow and then a break in the trees, revealing more flat snow that went back to the horizon; then emptiness; and then rows of dachas, deserted. It looked like a metaphor for Russia.

I was sitting in the left-side back seat, and the dark started to wash over us. The highway was deserted, the isolation broken once in a while by the light of another car. The roads weren't lit in the middle of nowhere.

So, I was in that car and my heart was heavy and I didn't know if I wanted to cry or if I was just afraid of this place. But I focused on collecting the voices of the vets, their wives and their children, and why I was here.

¹⁰ Danieli 1998, p.9-10

¹¹ Hermann 1992

I kept thinking of being alone in any of the countless empty fields of white snow and ice and I could feel the dread, and it made me terrified. I had feared this place, to be alive in the white snow that pulled to the horizon, alone. I figured dying would be easier than standing there in the dark. And that fear was from some expectant monster but the monster seemed to be Russia, or the Russian winter and its brutal history.

And everything was so fucking grey.

Even in the black sky I could see the grey.

I broke out of my bubble as my father began lecturing everyone in the car. My father didn't know how to converse with people. He never listened, he only waited to talk, but most of the time he wouldn't wait and just talk over you.

He started telling the two people in the car who live in Russia what it was like to live in Russia, even though he had not lived in the country for 18 years, blind to this fact and the other fact that he was talking from the privilege of residing in Australia. Then he said to us that he didn't want to talk about politics, inhaled, and immediately brought up Russia's invasion into Ukraine. My father forgets that I am part Ukrainian, but even when he does remember it doesn't stop his Russian nationalism. That's the thing about xenophobia (and racism, for that matter), it impacts families internally, and doesn't just cease to exist because you are a familial unit. These power structures are not consigned to the outside world; they live behind household doors.

I never questioned calling myself Russian until I opened my old, burgundy red Union of Soviet Socialist Republics passport.

Place of Birth: Ukraine.

The passport smelt like an old library book; the paper was intact and a brownish-yellow stain of old glue framed my old, black-and-white photograph of a bygone era.

Flipping to page six I looked at the Visa that granted my initial entry into Australia:

HOLDER(S) PERMITTED TO REMAIN IN AUSTRALIA INDEFINITELY, it read.

But, it was the inside front-cover of the old, little book that still had me confused.

I was 17, maybe 18, and sitting on the messy bed of my old bedroom, on the second floor of a house in Western Sydney. That house is now occupied by another family, building their own memories in a home that contained almost a decade of ours.

Running downstairs with my burgundy red passport, I yelled for my Mother.

'What, what? What are you yelling for!?'

'Mama, where was I born?'

'In Ukraine.'

'No, no, no. Actually WHERE was I born?'

'In Nikolaev.' She pronounced Mykolaiv in Russian, rather than its correct Ukrainian pronunciation.

I wondered how Ukrainian that made me, if making me Ukrainian at all. Today, I still wonder why I felt it so important to identify myself as unequivocally a Russian or a Ukrainian.

Like many Russians and Ukrainians, I was born in the USSR. But, this happened just one year before independence of 1991, making me a Soviet national, morphing into a Russian citizen, with Ukrainian heritage and birthrights – all before I could see the sky or comprehend that the thing feeding me, loving me, hugging me, was my Mother.

My Mother is as much Ukrainian as she is Russian, but despite this realisation, and the realisation of my birthplace, it was only five years later that I started identifying as a Russian-Ukrainian.

It was in late November of 2013 when I heard of the Euromaidan rising in Kyiv.¹² The demonstrations began as protests against the government's decision for closer ties with Russia and the Eurasian Economic Union in place of the European Union. It all started on November 21st, in Maidan Nezalezhnosti. Then demonstrations grew wider, with people fighting for democracy and against corruption, calling for the resignation of former President Viktor Yanukovich, whose government and policies were seen as extensions of the Kremlin.

¹² November 21, 2013

Still and quiet, it was quiet for some time to come. But then the Berkut¹³ police force began capturing civilians, humiliating civilians, killing civilians. And then I wept, watching a video of snipers picking off protesters, shooting to kill. The 2014 Ukrainian Revolution unfurled, and late February rolled around, and Russia began sending what came to be known as their little green men into Crimea. By March 2014 Russia had annexed Crimea. Its invasion has lasted almost five years, without an end in sight. To date, the intervention has cost almost 10,000 lives.

My early childhood is strewn with memories of trips to Ukraine, a common-occurrence for many living in Russia, and for my family living in Ulyanovsk. Visits to Kyiv; vacations in Yalta on the Black Sea; trips to visit my godparents in Mykolaiv, my birthplace and first home.

Now distant memories, these escapes never felt like foreign travel, even during the '90s of a post-Soviet era. But, much like Keith (Konstantin) Gessen, a Russian-born American journalist and novelist, I believe that for Russians, and for some Ukrainians of a pre-independence generation, there is seldom made a distinction between the two nations. That for someone born in the USSR, with a lasting commitment to Russia and Russian, in culture and sentiment, and, perhaps, even emotionally: 'It takes a lot of work, intellectual, political, even spiritual, to think of Ukraine as a separate country,' Gessen writes. 'If you are not willing to do that work, as many Russians seem not to be, then you will think of Ukraine as a wayward cousin, or even brother, who just needs to be brought back into the fold.'¹⁴

Since the Ukrainian Revolution, and the Russian invasion into Ukraine, the former of which I openly supported, the latter of which I openly detest, being a mixed Russian-Ukrainian has felt like I am in a limbo without a people. I am never Russian enough to Russians, nor am I Ukrainian enough to Ukrainians.

We were still driving. And my father listened to himself talk for the better part of an hour, while his friends humoured him and I looked at the snow that reached to the horizon. And as I watched it I began to disappear into it. Into the white. Into the fray.

I was afraid.

¹³ Special Ukrainian police force

¹⁴ In 'Waiting for War', *The New Yorker*, 12 May 2014.

I was coming here to collect the other silenced voices, the ones the Soviet Union hid with the war in Afghanistan. But I also chose to come here with my father to try to really discover him. Finally, and for the last time.

This was his chance. His chance to show me that the monster isn't real. That the monster had left, and that he had changed, had grown, had lost his hatred towards everything and everyone.

And this was my chance.

Tell me your stories about the war that is still hidden.

* * *

The first time I remember him hitting me was because I said a bad word. In fact, I'm not even sure that this was the first time he hit me, but this time stands out nonetheless; it stands out for reasons beyond the violence.

That day was someone's birthday.

We were at my paternal uncle's family home. The apartment was like any other, but every time I see this apartment I actually see my uncle lying stretched out on the three-seater sofa, his legs crossed, his calves resting on one armrest with what looked like a foot of length going beyond the armrest's periphery. One arm bent under his head of blonde hair that looked like a mix of yellow and white, and as we'd walk in he would turn his head of blonde hair to his left and flash an enormous smile. It adorned his long, sharp face, and above the smile sat the family nose: long, sharp, pointy.

My uncle always smiled, and I never understood why my father spoke so badly of him. Kitchen gossip is only believed private by the adults in the kitchen gossiping; kids hear everything, and I never heard a bad thing about my uncle, except from my father.

My sister and cousin were both three years older than me, and in kid years that means they were old and wise and didn't particularly want me around. I'd try to force myself into their games, and on this day they let me join. We were in my cousin's bedroom: the single bed was pushed into one corner below the window. That room is scorched into my mind because it was the setting of that one photograph of my sister leaping off that single bed into my paternal

grandfather's arms. The camera caught her flying in the air, smiling and scared all at once; she was exhilarated; her face looked funny.

On this day the game was some kind of whispering game they came up with on the spot. My sister and cousin would take turns whispering a word into each other's ear and it was my job to guess what they said. I, of course, was not allowed to join the whisperers; if I wanted to stay part of the game I had to guess. I don't remember any of the words, bar one.

'LLLLLEESBIAAAAN!'

I yelled out with all my might.

The look on my sister's face was one of amusement because I got it right, and also because of how I got it right. I was so proud of myself for getting one word correct. But my happiness was broken a mere moment later as I heard my father yelling for me. I knew something was wrong; I knew I was in trouble but I didn't know why, not yet.

With everything I could have done wrong running through my head I walked over to the computer desk which was parked in a tiny, tiny office space. I was terrified.

As I walked up to him he turned around in the office chair, grabbed hold of me with one hand and with the other hit me in the face.

I could feel my heart beat on my skin. I saw stars, and my face felt like the static on an old television screen.

I did not move or make a sound.

I was frozen.

Chapter 4

So, you've imagined the trauma swimming inside of you, a trauma you did not experience directly impacting your body and mind, on and on and on. And here is how it works: epigenetic transmission of trauma is the principle that individuals can absorb the trauma of their parents.

Children of parents with posttraumatic stress disorder (PTSD is a trauma or stressor-related disorder, in which the 'exposure to a traumatic or stressful event is listed explicitly as a diagnostic criterion'¹⁵) are vulnerable to inheriting these nightmares,¹⁶ including the children of war veterans; survivors of war-related trauma; survivors of sexual abuse during childhood; refugees; victims of torture, and others.

I didn't notice how tired I was until I awoke to the screaming in the car as it swerved across the road and hit a snow bank. The sound of a heap of snow hitting a car is like a wave washing over you, just faster and then silence.

My stunted fight-or-flight response¹⁷ meant that I simply did not move or make a sound. I froze. My mind and body put fight and flight on hold. For a moment I thought that what had happened simply did not bother me, but then I looked at my hands. They were trembling uncontrollably, and still, I could not move.

I could see and hear everything around me, as the woman on my right exited the car; as the man driving and my father were outside of the car looking at the damage.

I was frozen.

As my body finally reconnected with my mind I walked out into the cold air.

¹⁵ American Psychiatric Association, 2013, p.265

¹⁶ Kellermann 2013, p. 33

¹⁷ Freezing is a fight-or-flight response put on hold. To read further on the Defense Cascade, see Fear and the Defense Cascade: Clinical Implications and Management, Kozłowska et al, 2015.

A car from the other side of the road pulled over.

'Are you okay? Do you need help?'

We were okay.

We didn't need help.

The woman would later say she didn't understand why Russians were seen as unkind and cold.

'Almost immediately someone came to help us.'

She was right.

Something was found in the boot of the car to tie the bumper that had fallen off back to its original place, and we drove again, on to the dark road paralleled by snowbanks.

I couldn't fall back into that bubble, and listened as my father went from nationalism to homophobia, breaking his rant with an inhale, as he began to speak in a lower tone to the man in the front.

He told his friend about the first time he saw a gay man. He even gave him a year of that first sighting, 1998, because apparently no gays existed before the late '90s.

'I was sick to my stomach,' he said; and now the hatred he spews makes others sick to theirs.

It turned out that the homophobia was reciprocated by the family friends.

'Why are you so intent on sticking your nose into other people's lives?' I asked my father.

He looked at the man, laughed, and said: 'The tolerant!'

Whenever I interrupted their heteronormative, myopic bigotry, again, he looked at the man, laughed, and said: 'The tolerant.'

As we continued riding through the dark and the dark continued to wash over us I spotted a light in the distance. I watched as the car came into view, and said a silent prayer to no one and nothing in particular that the driver could see us and pass by safely. But the car never came, and the lights grew more and brighter and started bordering the road on both sides, and then

they grew into traffic lights and into kiosks and into stores and into five-storey khrushchyovkas¹⁸ and into tall apartment buildings.

Ulyanovsk was always described as a bit of a hole; a small city in the middle of nowhere and with nothing much to it and its name bar Lenin being born there¹⁹. Even in Australia, whenever I met a Russian, they would call it a hole. And so, I started to call it a hole, too. After all, so many people couldn't be wrong. And what would I know? My father had brainwashed me long ago to think of myself as an idiot for I was a woman, and with this he brainwashed me to think that my opinion on any little thing was automatically wrong, no matter how much I knew. In my absence from Ulyanovsk the city did not stand still but kept on growing and flourishing and my memories of it were not wrong, they were simply overshadowed by puerile men who project their own inadequacies on a little city on the Volga River.

We had arrived.

Ulyanovsk, I forgot your beauty.

* * *

I'm not sure when I started to hate him; I don't actually know when it happened. I can't pinpoint the moment, but the moments of hate and love seem intertwined and mixed up and mixed inside my head; and so the moments of pain and fear come between and after and before the moments of some kind of love for him.

I remember our first few years in Australia; well I think it was our second year. I was in year five, or maybe four. So I was 10, or 11. And he quit his job. He came home that one evening, in the early evening. I was wearing a white singlet and white underwear. And we were all home that sundown.

When he told us that he didn't have a job I felt happy – I said to him something like, 'You can see us all the time, then.' Or something like: 'I can see you after school!' Or something else, but I know it was something happy. I do remember that it was something happy.

¹⁸ Five storied apartment buildings

¹⁹ Ulyanovsk was founded as Simbirsk in 1648. It is the birthplace of Vladimir Ilyich Ulyanov, better known as Lenin, who was born in the city on April 22, 1870. Simbirsk was renamed Ulyanovsk after Lenin in 1924.

And so, this leaves me confused, and I have to question my mind. I have to question it because I have a certainty that I hated him before then, and maybe even then; and so I have to ask how did I travel from pain to wanting him around?

When my parents left for Australia I missed them both. My siblings and I stayed in our apartment in Russia and were looked after by my paternal grandmother. We didn't know exactly how long they would be gone, but we knew it would be a few months at the least before we saw them again. Each night I would lie on my top-bunk and look at the ceiling counting how many months, weeks, and days would need to go by before they came back, like Jerry counting days in Florida with Elaine. One day, we found out that my Mother was to return without my father as he awaited the immigration process from Sydney. Suddenly, the endless months turned into endless days, and one day I saw her walking up the sidewalk in her floor-length, brown leather winter coat.

I was sitting in a car ready to be driven to school by a neighbour. It was winter. It was morning. My Mother was already supposed to be home, but she was running late. I thought about where she was and how cruel and unusual it was for my grandmother to send me to school on this day of all days.

That's when I saw her.

Her hood was trimmed with fur and pulled over her head; the coat cinched at her waist; her suitcase pulled behind her.

'Mama!'

I was so worried she wouldn't notice me I couldn't breathe.

I wept as I saw her and felt her again. She was here, finally, she was back and I didn't want to let go.

When she returned to me I was elated. That she returned without my father made me glad. We were finally happy, and relieved. At least that is what I felt, and so I thought everyone must feel like I do.

I felt a release. I felt like I could be myself. Like I could breathe and he couldn't yell at me for the sound I made while breathing. I was eight then, and my mind had two extremes, the hate and

the love, but somehow I was able to focus on just the one, and completely forget the other. But it wasn't with purpose. It just happened. And I don't have an answer.

The weight of my father weighed on us every scheduled phone-call, as we would prepare notes on what we needed to say and how we needed to sound to placate him, to ensure that he would not erupt over a misplaced word or an extended hmm or a wrong detail. Such preparations became part of my daily life. Throughout my school years I would rehearse what I would say about my day and studies and what I did with friends and who they are and how they are before he had the chance to ask me. It was all done to manage his emotions, to placate his aggression, because one word out of line meant another nightmare. Eventually, these rehearsals became second-nature; I didn't have to think about them anymore.

Everything was fine;

School was good;

Don't show any emotion.

So, where to begin?

One day I was happy, and then the next I lost it, and I spent a decade looking for it. I'm still looking for it; I want it back.

In that decade I spent the years trying to find something or someone to blame for the lingering happiness I knew I once had, and so I concentrated the blame on my father.

At one time, he was the coolest father in the world. When I was seven he would pick my sister and me up from school: wearing a long, deep brown leather jacket, his expensive woollen scarf was crossed across his chest, perfectly folded. He wore expensive shoes; cologne; and carried a dark, reddish brown carryall. Like his coat and shoes, it was leather. The school's front doors were giant masses of glass and wood, and he would swing them open, walking into the building in slow motion the wind picking up the tail of his coat to blow it open.

My sister told me he looked like a superhero, and so I thought he was a superhero.

He took us to French restaurants to eat frog legs, and let us eat chips at the theatre.

For my fifth birthday he surprised me by picking me up early from preschool. It was summer, and my class group was outside. It was green, and blue, and sunny and I saw him from far away. He was carrying the doll I had asked for. I was so happy and proud: look at my father, I thought. I was showing him off to my classmates because I had won – their father wasn't there in the middle of the day; and it wasn't their birthday; and they didn't have a brand-new doll.

All was well in my world; I had a new doll under my arm and the sun on my skin, and my dad holding my hand.

I still have that doll. It travelled across the world with me, now living in my wardrobe.

Chapter 5

After the first year of life, PTSD can and does occur at any age. Symptoms of PTSD begin in the first three months after a traumatic event; however, there can be a delay lasting months and even years before the onset meets diagnostic criteria. Rates of PTSD are higher among those whose work exposes them to increased risk of traumatic events, with the highest rates found in survivors of rape, military combat and captivity, and ethnically or politically motivated captivity and genocide, for example, state-sanctioned violence.²⁰

Soviet troops entered in late December 25. The 1979 Soviet invasion and occupation of Afghanistan lasted nine years, one month, and 19 days²¹. In 1990, Russian journalist Artyom Borovik wrote: 'Afghanistan became part of each person who fought there. And each of the half million soldiers who went through this war became part of Afghanistan.'²² Almost a decade of war impacted millions. It is estimated that 1.8 million Afghans were killed and 1.5 million left disabled (among this number are more than 300,000 children (Danieli 1998)). The war left some 7 million refugees, including internally displaced (Dekel & Goldblatt 2008; Forrest, Edwards & Daraganova 2018; T. Franklin et al. 2010; Kellermann 2013; Magruder 2018; McFarlane 2018; Nestler 2011; O'Toole et al. 2018; Shmotkin et al. 2011; Skinner 2014; Yehuda & Bierer 2009).

More than 500,000 Soviet soldiers passed through Afghanistan; of that half million, at least 15,000 lost their lives (Danieli 1998); 417 were either taken prisoner or went missing in action; since 2000, 287 soldiers remain unaccounted for.²³

As the people of the Soviet Union were living through collective trauma of a dictatorship and historical conflict, its leaders pushed its 15 republics into a secret war – the conflict was initially presented and marketed as a peaceful, 'brotherly' mission to help the people of Afghanistan and their country. This attempt to hide the war was also evident in that until 1985 it was forbidden to

²⁰ American Psychiatric Association, 2013

²¹ Alexievich 2017

²² The hidden war: a Russian journalist's account of the Soviet War in Afghanistan, 1990, p. 1

²³ Alexievich 2017

write on a perished veteran's headstone that they were killed in Afghanistan. This ban was lifted during perestroika²⁴ – losing a generation of people to the conflict and its trauma.

When I began searching for research participants I knew it would be difficult to find people willing to speak to me about the war. But I didn't anticipate just how difficult it would be. Calls and emails were left unreturned and unanswered. Follow up calls and emails fared in much the same way. No one wanted to talk, and most didn't bother responding. Even those who did ended up changing their mind or ghosting me. In mid-2016 I was on the way to my first ever international academic conference, and this one was in fancy London. The driver taking me from the airport to my hotel near Hyde Park asked me what I did, and we got on the topic of my research. He told me that his father served in Afghanistan with the Soviets, that he, too, was traumatised, and that their relationship suffered from years of abuse in his childhood at the hands of his father. As we spoke about our familial environments we could almost finish each other's sentences – the abuse, the fear, the freezing, we were both there. I asked if he would be comfortable in my emailing him when I returned to Sydney with more information about my study and if he would think about participating in the research. He obliged and gave me his contact details. Three unanswered emails told me that he wasn't interested in participating in an interview; but I did include a link to the research survey, and as I didn't collect personal information such as names, I won't ever know if he did respond, or if he decided not to.

That's when I realised I needed to be in the country to have any luck in finding people to speak with me for my research.

The qualitative interviews focused on the overall trauma and impact of the war, as I interviewed veterans, children of veterans, mothers and partners of veterans. Children of veterans, however, also discussed the impact of intergenerational trauma on them and their lives as a result of the conflict.

When I arrived in Ulyanovsk a family friend had a colleague whose husband served in the war, and that's how it started. From one interview to the next, I asked who else people knew, who else I could talk to, and I spoke with anyone willing to speak with me.

* * *

²⁴ A period of reformation (restructuring) in the Soviet Union, including politically and economically, between 1985-1991, instituted by Mikhail Gorbachev

Potty training was an in-and-out affair. By all accounts I succeeded; I never had an accident. Until that one particular day I leaned over a meticulous, black inked and thin lined, perfect-circle emblem my father created. I didn't touch the emblem as it dried, but my long blonde hair caressed the air above it with its tips as I reached over to point to one of his metallic tools, asking about its use.

The emblem sat, untouched, un-smudged, still perfect. I, on the other hand ran into my parent's bedroom, fearful for my life. I was five, maybe six, and I had an accident. My first, and my only.

My father's eruption was so ferocious, so aggravated, so hateful. He went from zero to many thousands, all in the moment my hair flew past that black, inked emblem he worked on that evening in our old apartment in Ulyanovsk.

Still, it sat untouched, unaltered, perfect.

But my curiosity triggered the potential of ruining his work, which triggered him. And so he bellowed unimaginably. His reaction was violent; it shook me to my little core. I had yet to know this man, to encounter this man.

But after that I knew him my whole life.

In his eyes, I had done with purpose this thing that never happened – the smudging of his work was my intention. He screamed at me, and at my intention to ruin his well-crafted emblem. I can't remember his exact words. But I remember the feeling of danger, and him screaming that I intentionally wanted to hurt him, over-and-over-and-over-and-over. And then I remember running, fast, into my parents' bedroom. Sitting down on their mattress, I realised that my pants were wet. I remember sitting, silently, afraid, sitting in my own mess too fearful to say a word or to exhale a breath. Waiting for him to walk through the door to continue his abuse; his red eyes; his red face.

The great, big, Russian man was going to kill me.

Sometime later he came in smiling. I had yet to move from the same spot on their bed. Had yet to say a word. Had yet to exhale without thinking about the noise I was making and that this noise would attract him to me. I had yet to move from my own mess. He was surprised I was upset; that I was cold; that I was shaking, pale, in fear. He was surprised I was afraid. I don't know if he remembers his screams. I don't know if he remembered then or if he remembers

them now. I don't know if he remembered that he looked at me as an enemy, that he looked at me with an anger and hatred reserved for someone or something that crossed every last periphery of humanity, or common decency. Perhaps, now, I think his outbursts were always littered with fragments of whatever happened to him in the military, in the war, in a bygone era that dogged our family for so long.

Still does.

I became accustomed to silence and staring at a point on a wall, or in a book, or on a desk, when his outbursts rang through the house. Just don't make eye contact, and he won't notice you. Just don't move and he won't notice you're there. Just don't breathe and he won't hear you. Keep quiet, this way his rage will pass over you and stay with whomever he was attacking in that moment.

I wonder if he ever noticed his outbursts.

Recently I asked my Mother about this, she rolled her eyes, and told me not to look for a silver lining, because the monster knows exactly what he does, and remembers everything: Always has, always will.

Chapter 6

Intergenerational trauma transmission was first observed in 1966 when large numbers of children of Nazi Holocaust survivors sought treatment in clinics in Canada.²⁵ The process of trauma transmission is connected heredity – the transmission of characteristics from parents to their children.²⁶ The focus on intergenerational transmission of trauma is new; what is even more recent is the recognition of PTSD by the American Psychiatric Association. Only in 1980 was PTSD officially recognised in the third edition of the *Diagnostic and Statistical Manual of Mental Disorders*;²⁷ we are still awaiting the inclusion of intergenerational trauma transmission in the DSM.

Last time I was here everything was big, tall, spacious. This time I am no longer a nine-year-old child at my grandmother's apartment in Ulyanovsk, and it turns out nothing was as big as it seemed back then, and yet everything is still the same. The bedroom my great-grandmother slept in is now my grandmother's. The lounge room has the same sofa with a pull-out bed, or maybe it's been updated – I can't tell. The anteroom remains cosy and full of coats and shoes and boots, and hats in coat pockets and scarves draped on the coats.

Shoes off. Long sleeves rolled up. Exhale. Say it's warm inside. Cry.

I have not seen her for more than a decade. She is frail, unwell, older. So much older than I remembered. So much thinner, so much shorter. Before I finish writing this text, she is gone completely from the universe.

My grandmother spent her days with her next-door neighbour – her best friend. They were partners, partners in everything from grocery shopping together, to watching television, to eating and cooking, to merging their pensions and keeping the money hidden in my grandmother's

²⁵ Danieli, 1998

²⁶ Kellermann 2013, p. 33

²⁷ 1980

apartment, safe from her best friend's son – who, they told me, was everything bad, and an addict.

I stayed at my grandmother's home for the two weeks I conducted fieldwork interviews in the city. I slept on the foldout sofa like she used to when my great grandmother was still alive.

Each night I would count how many days I had left here, including the first night: I still have fifteen days, today doesn't count because it's already night time; so that's 14 days left. The last day doesn't count because I will be leaving that day, so really, I only have 13 days left. Tomorrow doesn't count because my interviews don't start yet, plus I'm jetlagged; as such the day will be blurry. So REALLY really, I only have 12 days left here.

Okay, go to sleep.

* * *

Was he always like this? I asked my grandmother one morning when my father was out of the apartment.

'Yes, but the war made him worse,' she replied. 'The day he came back, I was grilling cutlets for lunch. He ran into the kitchen screaming for me to stop.'

'He said it smelt like people.'

To this day, my father has not spoken about the atrocities he saw in the war without first censoring himself. And I don't doubt that he never will.

* * *

I do not remember a time I was not afraid of my father; there are glimpses of happiness, of course, but never safety or an absence of eggshells, or an absence of emotional abuse, or physical abuse, for that matter. I know he loved me, and I know he loves me, still. But there is a hate that burns within, switched on by something big, or something small – like the time I asked to hold my own passport in Frankfurt and he erupted yelling into my face as if I had my Mother's face and every face and every other thing he hated; or the time my Mother was helping me with homework and couldn't go to the store around the corner to purchase whatever it was that he wanted because he was too lazy and again he erupted and I cried in fear at my desk frozen to the chair in a single position not moving my eyes away from the same white page until he

disappeared somewhere just so he wouldn't notice me; or that one time when I was 12, sitting on the sofa in our beautiful new house in Kellyville Ridge, in North-Western Sydney, when he came up to my face with a closed fist – his red face was almost glowing, and I could see the waves of hatred floating out of his head like ribbons as he told me that he would smash up my face if I said another word about whatever it was his was screaming about.

I was always aware that our family has a military background. The story came to me in fragmented parts, but I learnt of my father's tour in Afghanistan from stories of how my parents met. My Mother, who worked in a military laundromat in Shindand, Herat Province, during the Soviet invasion of Afghanistan, told me this story once, or twice: they had mutual friends, and met one night when the group played cards. She didn't like him at first, she told me, but then she did, and then he proposed while hospitalised, and then they were married, and then they had children, and then we are here.

In Slavic, Communist tradition, we grew up with the tragic rule to never discuss feelings, and so finding out that my father was a troubled man in his formative years came as no surprise. When he finally joined a military college at the age of 16, he was thrown into the violence of the Soviet army, swiftly climbed the ranks, and eventually served in Afghanistan as a lieutenant from 1984 to 1986, over two tours in Shindand and Kabul, completing his post at the age of 23.

We know that he was not a captive, but no one knows exactly what happened to my father during the war, or what he saw. He wrote my Mother letters – she threw these out following our migration to Australia in 1999, but says they were about missing her, and nothing else.

As we decided to adopt some Western traditions into our family, on Christmas Day of 2006 my father was setting up a barbecue to cook Shashlik, and I took the jovial opportunity of his good mood to ask about Afghanistan, and ultimately ruin his smile. His eyes turned glassy, pink, and he told me that he lost many friends. And then silence; our conversation ended with one question, and one sentence in response.

Chapter 7

A 2010 study found evidence that traumatic experiences in early life persist through adulthood and can be transmitted across generations.²⁸ The researchers exposed mice to chronic and unpredictable maternal separation, finding that this traumatic stress induced depressive-like behaviours in the mice that were separated when adult by altering the profile of DNA methylation (an epigenetic mechanism). Comparable changes in DNA methylation were *a/so* found in the offspring of these separated mice. Though similar empirical evidence in humans is presently scarce, research does support the idea that intergenerational trauma is transmitted via the familial environment, suggesting that the impact of traumatic events affects others in the environment of the person(s) directly exposed to the trauma.²⁹

The morning of my first interview a fight erupted between us. I can't quite remember what it was about because it wasn't about anything other than him wanting to belittle and yell at someone. That's how he got his anger out. As he stormed out of the apartment my grandmother began to tell me that as he is my father I must respect him, always. That's when I asked her if she knew what he had done to our family, and to my mother?

She knew and said that if he lived in the next town over it would be too close, but still, she told me that I must respect him.

* * *

Vladimir Muratov, veteran of the Soviet–Afghan war who served during the earlier years of the occupation, 1981 to 1982, completing one tour as a 22-year-old. Born in 1958 in Ulyanovsk, Muratov served as lieutenant in Kabul, Shindand and Kandahar during the war.

²⁸ Franklin et al. 2010

²⁹ Dekel & Goldblatt, 2008

To fight. What does it mean to fight? There are soldiers who take part in raids; they shoot; they are shot at. We were signallers. Our purpose was different. But we did fight, though the nature was different. We shot when we were shot at, outside of designated combat.

One of my friends, he says that 'only a fool is not afraid to die'. In death, he doesn't lose anything. But I am afraid of losing my life, homeland, and mother, though for their sake, I can cross that line. Fools aren't afraid; it doesn't hurt them, they aren't afraid. Everyone is afraid. Fear helps in warfare.

I was called in with two other lieutenants – we studied together and fell into different posts. When we were called up, the three of us, three lieutenants, the contact liaison officer starts to ask us: 'Guys, would you like to go to Afghanistan? You will have an income for one or two years, and you choose exactly where you want to serve after.'

And then he left.

Two of us were bachelors; one was married and had a child, and the married one said that he was going; he already had his documents and was informed prior to this. As it turned out, his wife, while pregnant, went to the commander, and said that if they sent her husband away she would give birth in the cabinet right then and there. There was a scandal, so they were looking for a variant. They said that one of us had to go, and I said: 'I will go'.

First I blurted that out, and only then did it become scary.

That fear started to go away as I began to prepare for my tour.

These days I have a recurring dream; I am going to Afghanistan. Again, I am being sent to Afghanistan. People are seeing me off at the station, friends and their faces change around whenever I have the dream. But the fact is I am going to Afghanistan. And again, I don't say no. But this time I am going with a feeling that this time, certainly, I will not return.

When I wake up, I don't forget this dream. I understand everything, and I am afraid. The first time I went, I returned. But this time, in my dream, I do not come back from the war.

This dream started only after I turned 40, when everything was good in my life, but in my dream I am young, and I want to go, yet I know that I will be killed.

After Afghanistan I served in Belarus; after Belarus I went to Mongolia. They just didn't send me to Afghanistan again, and you don't wish that you go. Helicopter pilots were sent twice, but not us, and I did not want to go there again.

After Afghanistan, my character did not change, but my attitude towards life, my world-outlook, that all changed. My attitude towards people, well, that changes with age. I can't say now if that change happened because of Afghanistan or because of age. When I came back, in 1982 – which was the third year of the war in Afghanistan – I was back in Belarus, and at that time I was the only Afghan vet there, and I was respected. I received an apartment, everything was good.

But I do see unjustness that I didn't notice before Afghanistan, and someone who comes from Afghanistan and comes back into a bad situation – there were many suicides; I was lucky. One of my friends hanged himself; and another one shot himself. He was a hero, he received medals, but he came back to nothing.

After the war I became more irritable. Because of this, sometimes, I didn't hold myself back in front of my commander, which may have negatively impacted my career.

One of my friends who served in Afghanistan was once asked: 'What was your first thought when you see your comrades murdered?' He answered with: 'Joy'. He sees killed comrades, and his first thought is joy that he is alive. No one is ever this honest about it; usually everyone says: 'Devastation for friends'. But he answered honestly about his first feeling. But then, other feelings come: awareness, regret.

You know, hmm, if you remove the death of your comrades, I'll tell you, for most Afghan vets, you mostly remember the good. Sometimes, when we're drinking, making a toast to those who died, we usually just remember how we were running around, all the good things you remember. So, when we get together we try to remember these things, the cheerful good things. How we went fishing. How some soldiers married the nurses they met in Afghanistan.

But sometimes an association happens, I don't know, sometimes something happens, and you remember the bad things, they come back.

You know, I think, that if you take not just Afghanistan, but any conflict, even a broken arm as a child and things like that, to forget it is impossible. You always remember. Some say that you forget the bad, and only keep the good. This isn't the truth. Everything remains.

Everyone who was in Afghanistan remembers Afghanistan. This is the same for Syria, and Chechnya, and Vietnam. Everyone remembers.

But does it stay in your blood? That's a different question. I can speak for myself, if before when my children still lived with us, I tried to hold myself together – I didn't see them often. I would come home and they were asleep and I would leave in the morning and they were asleep. Now I live with my wife as my kids have their own homes, and sometimes I break. Even though I understand that I might not be right, but sometimes my wife may say something, and I will answer, and to her my answer seems aggressive, but to me I think I am responding well; perhaps I see myself as a bit emotional. But she says: 'You are yelling; you are arguing, you are quarrelling with me'. But I don't notice this.

So, of course, something is left.

Sometimes you will get together with your friends and comrades, and then someone might say something that is offensive, and not just about Afghanistan, it could be something said about soldiers in general. This still cuts through. Something remains, and it looks like rage – the rage returns in situations that are not expected.

Chapter 8

In 2018 a study focusing on the Vietnam War to investigate the long-term, intergenerational impact of parental deployment on the mental health of adult children of Australian veterans, found that the adult children of veterans who served in this war have worse mental health than the children of comparable men who served in the Australian army at the time of the war but were not deployed.³⁰ The data from this study shows that adult children of veterans were more likely to be diagnosed with anxiety; have had thoughts of suicide or self-harm; and to have made suicidal plans than children of non-deployed veterans. The current mental health of these adult children was also reported as poorer overall.

The results of this study highlight the ongoing negative effects of parental deployment on the mental health of children, and how these adverse, significant effects continue into adulthood. The researchers suggest that the most plausible explanation for the outcomes of this study is the intergenerational effect of parental military service.

My father loves to discuss women. Not his love of women, but their physicality. He also loves to belittle women. Today he told me that any woman in Russia will happily give out her number to any man because 'Russian women are poor and lonely'.

Riding in the lift up to my grandmother's apartment I mentioned to him how afraid I was of the lift in the building we used to live in in Ulyanovsk. The doors didn't have sensors, so they would slam on you as you were walking in or out; the buttons were burnt out with lighters; the smell was sour and eerie, and always present. Sometimes the lift would get stuck and I would get stuck with it in pitch-black. In the end I stopped using the lift all together from fear. When I told him this, he responded by saying that no girl or woman should ever enter a lift when men are inside of it.

'It isn't safe,' he said towards the lift doors.

³⁰ Forrest, Edwards & Daraganova 2018

I furrowed my brow and looked at him as he looked at the doors of the lift.

I asked if he heard that I was talking about the lifts being generally dangerous in our old building but he didn't respond.

We walked out of the lift and turned right towards the entry hallway of my grandmother's apartment, sealed by heavy metal door. The door opened to that hallway, a narrow anteroom housing two apartment doors and apartments behind them. We took the left door to get inside my grandmother's dwelling.

I didn't bother asking my father for an explanation about his bizarre non-sequitur – I already knew what he was thinking.

* * *

Oxana is the second wife of a veteran of the Soviet–Afghan war. They have two children together from their previous marriages, a boy and a girl.

I only know from his words what Afghanistan was like. You know, what is most interesting is that when we first met he said very little about the war.

But then it all started with the advent of the internet, specifically Odnoklassniki.³¹ This is when he found his comrades. And here it started. Started the memories. We went to visit his friends from the war; he even found a friend here in Ulyanovsk – they didn't know that they lived in the same city. And here the memories started.

Of course, he doesn't like to remember the bad, as he had to bury his companions. Aah, I will say this, they were the first to go to Afghanistan, and at that point it wasn't so frightening. The war was going on, but things like from the *9th Company*, as they say now, that wasn't happening yet. There were shellings, they went through shelling in villages; he didn't participate in militant combat, but they were caught up in cross-fire and skirmishes.

³¹ Popular social network in Russia

He doesn't like talking about the war. With comrades, or on Odnoklassniki, then he will talk about it, but not at home. Even dreaming, I think in the whole time we have been together, I remember two or three times when he awoke at night from nightmares. Once, I woke up from him strangling me. He dreamed of Spirits (Mujahedeen).

He lost a friend whom he came to Afghanistan with from the Soviet Union. He died in a shelling. On Odnoklassniki, Vladimir has a photo album, and the last photo is of this friend; I think his name was Sergei.

Vladimir visited the grave of another friend who died in Afghanistan, with three or four other comrades. His relationship with his comrades is like they are brothers. They're very close.

Vladimir was always a very emotional person, so to know what was influenced by Afghanistan and what was not, I cannot say because I didn't know him before the war, and his whole family is quite emotive. They are stubborn like I don't know who else.

When you see how he communicates with his family, with his mother, father, yes, sister, son – he always looks after his son – and with his previous wife they are on good terms, and so everything is okay.

The way he communicates with his friends, I couldn't say that. Maybe the war did influence him, probably. I know a lot of people, a good friend of mine served in Chechnya, and there yes, there, in him, is clearly visible psychological trauma. In my husband, perhaps it's the age, as quite a bit of time has gone by, I don't know, I can't say ... Sure, if you wind him up, he is angry, but I don't think that relates to his service.

Actually, I somehow let it pass by, seemingly everything has moved on, but for a very long time he drank; he was very drunken. He drank for a very long time, and he drank a lot. He could drink for a week straight.

It was uniquely alcoholism. I don't know the reason, it could be hereditary because his father also drank, but it all could be aggregated, that is hereditary and the war, one on top of the other. When he started to drink, to be honest I do not know, because when we met he already had such periods of drinking days on end, so I can't say exactly when it started. But it was very hard.

His friends, when they met up, would sit in the evening and drink well, but in the morning, that's it – no more alcohol. But Vladimir, if he went to drink he did so for a long time.

But he does not drink now. He stopped when he saw white slippers in the hospital. When he ended up in the hospital, because they put white slippers on the deceased. They threatened him 'a little more and you will be there' because of how much he drank.

This obviously negatively impacted our children. To be around a drunken person is impossible. He would also be quite explosive, he is normally quite explosive, but in a drunken state it is even worse, more pronounced. Then when he drinks for a week the days and nights get mixed up, so he can go in the night for a bottle, so it was hard. With a person like that it's hard.

But he never got violent. In this regard he always watched himself. That is, he never hit, he never broke anything. But this did happen.

We live, knock on wood, seemingly okay, now when he stopped drinking. But it's understandable that the war impacts the psyche, that is the person becomes more short-tempered or explosive, more aggressive I would say.

On the other side, I think they cherish life more. I think, yes. Do not take unnecessary risks. But to speak for everyone I cannot because everyone is individual, and each has their own principles, own life, own psyche, own psychology even.

But with the people I have communicated with, specifically those who have gone through hot spots, I will say it like this, they do not let you get close too quickly, or too soon – they are distant. But Vladimir is a humourist, he is a good talker, he jokes, and he gets along well with people.

My friend from Chechnya, he always kept a distance. To break through that wall to get to him was very hard. Respectively his character was very difficult. He was an egoist as it were, and everything that went on top of it, it was very hard with him.

With my husband, there is a different type of wall. In this regard he is quite a simple person.

I do remember a phrase. No, I don't think he said this with his friends. But during the war they often drove food, and all of this food was in sacks, and when driving on the roads everything fell out of the sacks and of course everything had to be collected and picked up back.

He would say: 'I liked to drive grenades, ammunition. First, they are packed into boxes, so it was comfortable to sleep on – I didn't have to pick anything up, and if anything happened then

death is also certain You won't return home a cripple; no one needs to hang themselves, and you won't be a burden on anyone.'

This phrase of his I remember.

Oxana's husband joins the interview via speakerphone.

Vladimir served in Afghanistan from 1982 to 1983. Born in 1962 in Ulyanovsk, he was based in Sheberghān, the capital city of the Jowzjan Province in northern Afghanistan during the Soviet–Afghan war.

The psychological trauma remains with everyone. After the war, all of us went through alcoholism, through anxiety, through everything.

When I think back to Afghanistan, tears flow.

I don't know how Afghanistan changed my life. In my relationship to people, see, there are bastards, and there are good people.

But the psyche is broken; nerves are tense.

When I came back from Afghanistan, it took you a while to get used to being back, to life back home.

Chapter 9

Some theoretical approaches in understanding the process of intergenerational trauma transmission include:

Sociocultural and socialisation model:³² this model focuses on the beliefs, behaviours, opinions, traditions, customs, symbols, and routines of the parent(s) that they pass on to their children through childrearing.

In the morning we arrived at an office building by the Volga River. My interviewee was running late and his assistant asked me to wait outside. I walked through the white snow listening to my boots compress the flakes under me with each step.

My interviewee never showed up and didn't answer his phone.

I played in the snow with my father. For a moment, I didn't have a memory, and he was the dad that bought me that doll when I was a little girl, and in that short moment everything was okay.

* * *

One day I came across an article about a US veteran who served in Afghanistan. It turned out that he was the second generation in his family to serve during war in the country: his father is a veteran of the Soviet–Afghan war. The article's publication date was pushing a decade ago,³³ but I decided to contact the journalist anyway, asking if he might be able to pass me the details of the US soldier. An email conversation later, the writer couldn't locate any contact information, but he gave me the soldier's location, and I had his name. Upon retirement from the armed service, it is common for ex-military to find work in security, so I checked an online database of security companies in the city I knew the soldier I was after resided in, at least for a period of time. And so, I searched, and searched, until I came across the name from the article and no other discernible information. The only contact details this company had was a general email

³² Danieli, 1998

³³ A citation for this article is not included as it identifies the participant by name.

address and a phone number. I settled on the former and shot off an email asking if I had the right person. The next day I received a response:

Hello,

I am [name redacted] from the article. How can I be of help?

* * *

Stepan (name changed) is the son of a Soviet–Afghan war veteran, a private who served from 1982 to 1984 in Mazar-i-Sharif in Northern Afghanistan from age 18 to 20. Stepan was born in 1986, in Sverdlovsk, Ukraine. The family migrated to the United States in 1994.

Stepan joined the US military and served in Afghanistan during the US occupation in 2005, and again in 2009. He was 19 at the time of his first tour.

We moved to the US in December 1994. We came under the religious refugee status ... religious persecution, especially with the Soviet Union wasn't so friendly to Christians. My dad wasn't religious, even though his family mostly followed Russian Orthodox. My mum's dad was a pastor, and she was more into that, that's why we were able to move under the refugee status. My mum has four brothers, four sisters; except for one brother and one sister, everybody is here in the States; across three states. And everybody on dad's side is back there.

My dad's not a very good person; he's still struggling. I mean, generally, deep down inside, he's a good person, but he just had a hard upbringing, um, that goes from his childhood because his dad was a World War 2 veteran who, apparently, served in a World War 2 concentration camp. Um, I never met my grandfather because he died of a heart attack in my dad's arms. That was when my dad was 16 and he just had a hard upbringing, and then the military didn't really help out, so he's an alcoholic, functioning alcoholic.

But as far as him being a healthy, productive member of society, I don't think he is. My parents are divorced; he's not having a successful marriage now. We barely see him. I mean, he called me today 'cause he's back, um, but he's just, he's very reserved, keeps to himself, withdrawn

and yeah. We're good, though; it took a lot to forgive and forget 'cause our upbringing was difficult. I mean he did the best that he could with the sort of father he is, as long as the fridge has food and the lights are on and you have shoes on your feet and a coat on your back, like, he did what he did. That was pretty much it.

I really looked up to him for being in the military. Um, and I think he had a big part to do with me joining, too. I don't know if like subconsciously I wanted his approval and that was like the only thing that was good to actually, you know, something that he'd be proud of, um, but besides that it was, you know, we were refugees, you know 'serve your country', 'American pride' that type of stuff. You get bullied as an immigrant, you know, and I really hated not ever being able to fit in, if that makes sense, because you're never truly American, so that was truly one of the ways to, I guess maybe pay a debt to be like 'hey, yeah, we were given the privilege to come here, but I don't want to be in debt', and just being a productive member paying taxes and doing my 9 to 5 and just living didn't seem right.

Another reason is that I wanted to run away from home. Um, this was shortly after we kicked out my dad. I just didn't like the home environment, it was very toxic and depressing, and I was like you know drinking off and on and just partying. I was doing teenager stuff; I wasn't really focusing on going to school even though I had a good GPA; I was an honours student. I bombed in my senior year because I signed up to the military while I was still in the 11th grade. I was 17 years old and I convinced my parents to sign me away. My dad was for it, he was like 'yeah, it'll teach him to be a man' which was kind of, it was a double-edged sword, 'cause it's like 'what were you doing this whole time? Why do I have to be sent off to learn to be a man?' That was kind of confusing, at the time I didn't realise what he meant by that, and I told my mum that 'if you don't sign me up now, in a year I will be an adult and I will just do it. At least give me a year a head start'.

So I did my senior year in the reserves where you do one weekend a month, two weeks a year, and then when I came back, I met my now wife; we've been married for 12 years, so that kind of put a damper on things so I postponed deployment for another year, trying to become like a paramedic or something, but I really didn't like doing it 'cause my first passion for some reason, I was really drawn to the military. Um, maybe it was the whole 'macho' thing that had something to do with it, probably. Another big benefit of joining the military was it allowed me to keep my options open after – being an immigrant family there was no money for college.

In July 2005, I ended up getting deployed for the first time for four months to Afghanistan. I was 19. In 2006 I was serving in Iraq from July to November. I was deployed to Afghanistan a second time in July 2009 for one year.

I think he was traumatised. My father never talked about the war sober. We could never have a good conversation about it; he would always get emotional, and I ah, I never really understood it until you go through it. But in short, I think he, I think he was.

Even here in America, PTSD is kind of taboo. I'm 50 per cent disabled and I did not put PTSD down, because of the stigma; I didn't want to be labelled. I want to keep my options open and I want to be in law enforcement eventually, um right now I work security at a hospital and I enjoy what I do. That's why I haven't moved on.

I just could imagine that anybody would probably look negatively at a veteran who has posttraumatic stress as more of like a bomb with a short fuse. I can't imagine how my father felt because we're raised to be tough: crying wasn't an option; complaining wasn't either.

I don't think he'd ever admit that his issues were ever linked to the war. He didn't really have any other traumatic experiences or anything crazy happen in his life besides those two years in Afghanistan. Besides his father dying early, it seemed like he had a normal childhood. That's why I'm pretty certain that the main stressor in his life that kind of made him, I don't know, not be living, I guess, positively is that war.

He, yeah, he was violent. He beat on us a bit, more me than my other brother. My brother died two years ago from a drug overdose. My dad liked him more than me because I was an accident. My youngest brother is 16, and my parents had him right before they divorced. Dad swore this son was not his, which is kind of sad.

So yeah, he was pretty aggressive towards us, and then if he would drink pretty much more than 50 per cent of the time there would be physical altercation with my parents. I remember many a night where we had to go to somebody else's home, or my mum, like, we didn't have a phone but she knew a friend had a phone; many times she wouldn't leave us with him, and in the middle of the night she'd wake us up and take us to a friend's house because she needed to call the police.

He was withdrawn, he was depressed, he kept to himself mostly; you know, very rarely did we do family things together. I could probably count on one hand how many family trips we took and I don't think that's because I have a bad memory.

I mean my dad's uncle unfortunately froze to death because he was coming home in the winter and passed out in the snow; he was an alcoholic, too, and it cost him his life as well. But that's as far as I know it goes. But I think we do have a substance abuse issue in the family. My brother just turned to something else, and I don't blame him because when you see the destructive patterns of alcohol you don't want alcohol. And my brother, you know, he died, they called it a 'polypharmaceutical overdose', which is opiates and benzos, benzodiazepines, that's what he was in to.

Uuum, I had social anxiety. I always tried to be in the back, wanted to go under the radar. I hate attention, period. Um, I just kept to myself. But yeah, from my dad, it doesn't matter what you did, like eventually the attention he gives would turn negative. Um, yeah. So I think it's connected.

I've talked to other people about this and the way it seems that like my childhood or adolescence was kind of sealed, and then what the military, what my military experience did was magnify it, so it took everything.

My brother and I were very similar. But he was a little bit more outgoing. The funny thing was every time he got in trouble he'd always take a nap, um, and he would just disappear from the situation. Like, he'd shut down, and just like, restart. And that's what he would always do. And he did that even through his, like, adulthood. Which we all thought was kind of funny, like if he had any stress, he would withdraw to sleep and then when he'd wake up he'd start over.

My father, like he always had something on his mind and you don't want to get in the way. He was really good with his hands; he grew up in a village where you didn't have a car; he always wanted to be, you know, a driver. He's first real opportunity was the military, so when he got out of the military he put those skills to use and he continued to do trucking. And, you know, he fixed everything with his hands. Like, when we immigrated to the US we didn't have the money to just take the car to an auto-shop, so I remember helping him out a lot.

Um, but even then like, looking back now, it seemed like he just tried to stay busy, to be good and provide for the family, but it was always like 'I need to get this done so I can finally get to

me'. You know what I mean? It's like he was there but he was just like 'okay, what do I need to do to be left alone?' And I've noticed that that kind of, when I deal with stress I still have responsibilities and I kind of get in that mode like 'what's the minimum so I could just be left alone?' And I've noticed like my biggest thing is I withdraw like crazy; in the military did not help with this, but yeah if things don't go my way or if things don't work out I kind of reach my breaking point, like I just disappear. Like I'll just be by myself, just being withdrawn.

Yeah, I see myself in my father, unfortunately yes. Very, very close, like very similar. It's kind of like if I hit my breaking point or my stress point I kind of become selfish and egotistical and almost spiteful. Because I think that if I got hurt it's justifiable for me to be hurtful. And that's kind of how my dad was. It seemed like everything he did he justified, but it was almost like you're looking for a reason, and I noticed that I have that pattern of thought, like almost look for a reason to just got down that negative path and stay there because it just feels like home. Which is really kind of weird to think about, because that's kind of the environment that I grew up in, very tense.

It was walking on eggshells. You just like, you didn't want to get in trouble 'cause mum would call dad, so if mum yelled or called too loud or anything and dad could hear it, if he had an impression – and I notice I do this, too, actually – his first impression is it. You could tell him 'hey, no, you misunderstood, you weren't even in the room' and you know like 'that's not how it played out, everything is good, you know, we just got excited and somebody was surprised, or we're laughing, joking', but if he thought something negative happened, and he thought he needed to discipline, that's kind of where it came out, because it was almost like an outlet for him; but he called it discipline, so we kind of started making excuses for him as well, um and cause it's dad, that's it.

At a certain point we were just playing close-the-door. Then, you know, I'd turn up the TV so my little brother didn't hear anything or I would occupy him, but at the same time I always, I always felt the need to know what's going on. So even when I was like, my earliest memories even in Ukraine I still remember we're playing with little cars and or whatever we had, and I'm listening to what's going on in the kitchen, which usually isn't good.

Our Fridays and Saturdays were always the same: dad comes home, he gets drunk. Saturday he's continuing drinking and that's a really crappy day, so I remember a lot of day trips that we went on by ourselves, just my mum and brother, so dad could do his own thing. On Sunday

we'd go to church and dad would sleep in, and Sunday afternoon we'd come back and it's a fifty-fifty, 'cause dad could be happy or he's either hung-over or the events of the weekend are just not to his satisfaction.

There would be physical violence I'd probably say once-a-month. I mean and that's being conservative. When he was drinking the options are: he'd either pass out; something would break; or somebody would, you know, would put their hands on another person.

But yeah, he definitely played mind games. He did that with my mum, a lot. Like if anything happened, he'd take her keys. I mean, back then there was no cell-phone, and he'd unplug the phone off the wall. So he was very possessive like that over my mum; and he definitely favoured my brother, and he took it out a lot on me.

As far as like, psychological abuse and mind games, I don't think they really affected me that much as most of his abuse towards me was physical. I mean the emotional, I think it just comes as an attachment to the physical, because you know the emotions are there, you should be feeling love but you don't, you turn to your dad for something else, like, I remember one time he worked nightshift, but instead of coming home and sleeping when we were at school he would probably drink or hang out for whatever, and then he would be sleeping right before work when we were home. Which never made sense. But he set up his schedule like that. And one time he had to take me to the doctor's 'cause I got into a fight with a friend and I ended up breaking my hand and he was not happy about that. He tried just calling the emergency for what to do, but they were like 'you need to bring him in because we can't do anything' so anyways he wasn't happy that he had to wake up, take me, and when we came back he told me 'take off your cast and do the dishes'.

In a sense I guess you just didn't want to get in the way.

There was never turning to my dad for advice, for help, for nothing. I always went to my mum. Pretty much I avoided him as much as I could.

I have to be very conscious to not be him. So, if I, like yeah, I have to be very conscious and intentional, otherwise I revert to just that way of thinking. Because the military all it did, it was kind of like the concrete you know, but the barrier that I was born in to was kind of set. And even now, going through my experiences, all I have to do is just kind of put them on a shelf. After the military I had people who've killed themselves, who've OD'd, who've killed their family and then

themselves. So like dealing with just that aspect of it, and dealing with my own injuries, and my own traumas, that's the simple part compared to going so deep as to my adolescence, my young age where the influence that my dad had on me kind of made me who I was.

And honestly it did make this a lot more difficult, because here I am maybe not dealing with things that are coming at me in life in a healthy way. I'm wondering, why is that? I was never taught, you know?

The main difference between me and my dad is I can ask for help. Honestly though, if it wasn't for my wife and kids, I probably would not have a reason, you know. I went through a suicidal phase for a long time; realistically, if it wasn't for my kids, the main reason I didn't want to you know end it is I realised I don't want to have a negative effect on my kids as much as my dad did on me.

I have an amazing relationship with my daughter, mainly because of my honesty. It sucks, like I wish I could teach her through positives, but you know, I may lose my temper or not deal with a situation appropriately, but I'd rather apologise and we both learn from it and be open, because that's the one thing that my dad wasn't – open. He always hid everything, he denied everything, and then he tried to justify everything. I didn't want to be that way, and when it came down to it, where I had to draw a line and actually find a point from where I'm going to get better, I'd probably say it was my kids.

I love unpredictability. The reason I love what I do now is because it's so unpredictable; anything could happen at any moment. And honestly that's kind of the environment I thrive in, the chaos. After a while I started actually enjoying combat and war because the chaos is peaceful. So, it could be connected to the chaos and the unpredictability of the home environment I grew up in.

It was a really weird, chaotic environment. It was tense. I guess tense would be the best word because you knew something was going on, or the moment dad brought alcohol home, because I mean you kind of knew it was there, because sometimes he wouldn't do it openly, you know? And even then it was very tense, there was a lot of underlying conflict that we only saw when he lost control, whether that was because he was drinking or maybe because he was just tired, because he wasn't always, it wasn't like he was always drunk – there were times when he was sober – but even then he was always short with us, then it was really tense, and you were walking on eggshells.

And, yeah, I believe my father's trauma did transmit to me.

Yeah, I mean anxiety's the first one, um, like probably depression as well, because after every incident you're kind of withdrawn yourself and depressed because it takes such an emotional toll on you that once you're up here you're going to crash, and coupled with that and the fact of what's going on, I could definitely see how the depression was there. The main two I would probably say anxiety and depression.

I think the levels of PTSD I've experienced from war, the traumatic stress that he caused is dwarfed, if that makes sense, but I can definitely draw a direct link from my experience now or who I am now to how he affected me then.

I'm living being anxious of what's going to happen, and the lack of control, stability – like, we did not have a stable home. And as a kid everybody wants to be able to have some measure of control in their environment, even if it's just – like, kids love routine – even if it's just being a routine. We had a chaotic routine and a tense environment when you're kind of anxious. That's why I think both me and my brother went into substance abuse because we just wanted to not deal with it; we wanted to escape or put it on pause. We were never taught healthy coping mechanisms 'cause we lived in an unhealthy environment.

I would say that there is a direct link with him transmitting the trauma.

Yeah. I mean, my childhood was traumatising. Because the way he treated us was my whole childhood.

Chapter 10

Psychodynamic relational model:(McFarlane 2000, p.12) this model concerns the projection of severe emotions onto the children of parents with combat-related PTSD. These parental projections lead children to identify with the emotions of their parent(s) and accepting these emotions and experiences as their own (rather than identifying them as their parent(s)'). This is an unconscious process and can lead to difficulties such as the child not being able to form a separate self from their parent(s) and the development of pathological symptoms replicating those of the parent(s).

I am told there is a museum of Afghan war veterans at a local school. A 10-minute tram ride and I am there. On the white bricks of the building is a plaque with Igor Gennadevich Flegontov's portrait, and the dates of his birth and death: 10.11.1965-10.03.1987. Below the plaque are three bunches of red carnations, two plastic and one fresh.

Inside the school, the halls are wide and smell of thick layers of paint. Each sound and footstep and cough and laugh travels far, bouncing off the walls and shooting itself from one end to the next. We walk through wide hallway after hallway and come to an oblong room with a large window. As I enter the room, a large, full colour portrait of Igor sits on a brown shelf in the corner, surrounded by two vases and one basket of red carnations.

Igor went to this school from first to 10th grades, between 1973 and 1983.

The sides of the room are framed by brown office desks covered in photographs, medals, awards, literature and books about the Soviet–Afghan war. The walls, too, showcase photographs and literature about the conflict and the soldiers lost to the invasion.

Red carnations adorn every surface.

After the interview we start our way down the halls to the cool outside air. Before we make it out of the large front doors of the building a smell hits my nose and leads me to a cook standing

next to a bucket of pirozhki³⁴. When I was in school in Russia these pirogi would cause a stampede of students running over each other just to ensure they would not miss out. We would sit at our desks, tapping our feet and counting down the seconds in anticipation of the bell to release us from class.

And off it went.

BRRRR!!!**RRRRRRRRRRRIIIIIII**!!!!!!!NNNNNNGG*GG!!!GGGGG!!!!**!*!***!

And off we went.

Running at full speed and laughing all the way, the target in our eyes. Our school was split into junior and senior, the former taking up the left side of the building, and the latter the right. For some reason the pirogi were always sold at the senior end of campus, making our mission that much harder – not only did we need to beat our junior classmates, we also had to fight off the big kids who looked like giants in our little eyes. Half of the time I would miss out, a quarter of the time of I would get the consolation prize of a cabbage pirog. The other quarter would see me walk away happy with a potato pirog – the absolute GOAT of pirogi.

This time I didn't have to run or fight off giants.

A potato pirog in my mouth and a cabbage pirog in my hand I walked out into the snow.

* * *

Alexandra Vladimirovna Flegontova's son, Igor Gennadevich, served in Afghanistan from 1985 until his death in 1987 at 21. He was posthumously awarded the Order of the Red Star.

My son was killed on March 10, 1987. He was carrying out a combat mission near Kabul and was killed on his way back to Gardez by a bomb while driving in his column.

³⁴ Pirog (plural pirogi). Pirogi (also known as pirozhki) are small pies. Made of yeast dough, they can be stuffed with meat, vegetables, or fruit filling.

It was the 24th of March 1987. I was at work at a factory, and I looked up and people were entering through my door and looking at me. I thought ‘what is going on?’ Everyone already knew. I was called on to go into an office and when I came in I was grabbed by someone. A nurse gave me a shot immediately and I began screaming ‘son, son!’ My legs couldn’t hold me up and I was carried away.

I was taken home, and there were already family members, colleagues, and strangers. A swarthy man with brown hair fell at my knees, and I said, he didn’t say it to me, I asked him: ‘Where is my son and what has happened to him?’

At that time I had still not been told anything about my son’s death, but I felt it in a motherly way. I knew something was wrong. It took two weeks for me to be notified. He died on March 10, and I found out on March 24.

We broke apart his coffin;³⁵ a new ordinary coffin was made for him. I covered the wooden coffin with a red satin material.

He wrote me letters about his service, about his friends in the war. Wrote about Ulyanovsk; about school, about his teachers. He wrote me not to worry because now he was in an armoured commander’s car.

In one of the letters he wrote that: ‘At night, we were cramping from the cold, and during the day, the sun roasted us, like shashliki.’

He was quiet and calm before he went to the war. Spoke to his friends about what kind of books he read; was readying himself to be an officer.

He wrote two or three letters a week. Then, the letters came more rarely as they were in battle. And sometimes the planes or helicopters taking the mail were shot down.

Eventually his letters changed in tone, his meaning of life had changed. First, he wrote about helping the people in Afghanistan; planting trees. Nearing the end of his service he wrote about his future.

³⁵ Zinc coffins were used to send the bodies of dead Soviet military personnel from the Soviet–Afghan war to their families. This practice continued through both wars in Chechnya and continues today with the bodies of dead Russian soldiers in Ukraine and Syria. Black Tulip planes (Antonov An-12) were used to take away corpses of Soviet military personnel during the Soviet–Afghan war.

He was in hospital in 1985 and I visited him that November, November 14, in Fergana. His birthday is November 10; he just turned 20.

In his letters he would send me dried flowers and candy wrappers. He told me that they would not send him back to Afghanistan, but he returned of his own volition, because he had a friend there. He was not supposed to go back there.

I know his letters by memory; after almost 30 years I remember every line. It's all I have left.

He is in my heart. I do not feel that I buried him. Firstly, I did not see him in the coffin. They only showed me his things in a bag. Ah, since I saw him off in 1985, after the hospital, I am still waiting for him. I go to his grave; I go to the obelisk. I know it is documented, but in my heart, he is alive.

All of his photos, all of his honours, everything is exhibited in my home.

I speak with him. I wake up, 'Good morning, my sunshine, I am awake.' Going to sleep, I pray to God and ask him for a blessing for us, and tell Igor: 'Sonny, good night.' I speak with him. I tell him stories at his grave; tell him what is happening in the family.

Yes, I am waiting for him to come home.

My son heard stories from veterans who already came back from the war, and decided he wanted to go.

This war swept away a whole generation, all the young. The best of the best; the best. The hooligans and monsters stayed alive because they didn't go in the war, but our boys who made themselves, my son, he made himself who he was, he fought to be who he is; he fought to be there.

Chapter 11

Family systems and familial communication (Kellermann, 2009): this model looks at the transmission of parental trauma taking place within a familial environment as children can live vicariously in the past events that traumatised their parent(s). This model takes into account the importance of communication within families about the trauma, which can be an ongoing, continuous discussion of the trauma, or the complete absence of the discussion, that being the silence, creating a taboo around the traumatic circumstances.

Pavel is a close friend of Dasha's – and from what I could decipher a man who was almost a partner but never really got there – who is one of my old friends in Ulyanovsk. I hadn't seen her since I was nine, but her face was unmistakably hers when she walked into my grandmother's apartment and it was as if time hadn't really passed over us. We sat in the kitchen at my grandmother's gateleg table drinking tea with chocolate – though Dasha didn't have any of the latter despite my forcing it on to her like a good ethnic. One evening Dasha took me to a teahouse down-town. As we stepped out of the apartment building two young girls were struggling to find a path that wouldn't get their white kicks dirty – this was sludge weather; the snow hadn't quite stopped coming down, but it had already started melting, and so the streets and the cars, and the trolleybuses, and everyone's boots were covered in icy mutt. Seeing the girls made me see myself in the winters and early springs of yore – being careful not to scuff footwear inappropriate for the weather that I just couldn't not show off.

Towards the teahouse Dasha and I walked down an old street bordered by old wooden houses. The snow was breaking under our boots and I saw another stray dog in the cold: emaciated, scruffy, and so alone without anything or anyone. Statistics on the number of stray dogs across the country are not available, however, in 2010, biologist Dr Andrey Poyarkov, estimated a population of 35,000 homeless dogs in Moscow alone.³⁶ And it is a bleak, heartbreaking scene:

³⁶ ABC Interview with Marquardt, A., Blakemore, B. & Eichenholz, 2010

homeless dogs are all over Ulyanovsk, from side streets, to roads, to parks; sitting at tram stations, outside kiosks and little grocery stores; hovering around markets. Some are alone; others are in packs; and as it turns out, to many they are invisible.

'Dash, how do you feel seeing these dogs everywhere? It's heartbreaking.'

'To be honest, we don't notice them,' she replied, and said something about them being a harsher people.

What Dasha was referring to is the brutalisation of the community, of the country, of the people in the former Soviet Union. And in that moment, all I could think about was my Seymour – a dog without a tail waiting for me in Sydney. That night I cried, again, over yet another homeless soul I saw for a moment and would not forget.

Pavel was my brother's age and had already completed his military service. We sat in Dasha's kitchen in her family apartment in a khrushchyovka³⁷ that had a row of barn-cum-sheds in the middle of the grounds. As we spoke, Pavel and I switched from Russian to English and back again. Cups of tea at the ready I began our interview.

* * *

Pavel Mikhailovich Alexandrov is the son of a veteran who was posted on the border of Afghanistan and Tajikistan during the Soviet–Afghan war between 1985 and 1987. Because his father was posted on the Tajikistan side of the border, he is not technically considered a veteran of the Soviet–Afghan war, despite his service for one year and nine months.

As my father wasn't wordy about this topic, when I was younger, I tried unsuccessfully to get more information, but as I didn't have the communication skills needed to speak with someone who had been in a hot point. He doesn't like to talk about the war, and if he does tell anything

³⁷ A low cost three-to-five storey apartment building. Khrushchyovkas were developed in the Soviet Union in the 1960s, and are named after Nikita Khrushchev, the director of the Soviet Government (First Secretary of the Communist Party of the Soviet Union) 1953-1964.

it's very brief and in sparing detail. He didn't have much action in combat, and, if I am not wrong, thank God, there were no victims. But they did have contact with the Mujahedeen.

I do not know much. I know he was also a floodlight installation operator. He was a sergeant; a branch commander. He came from the army with the title of Sergeant.

I think trauma wasn't present for him, but the war left a very strong imprint on him, because in how this looks to me, as the service was contiguous with ongoing danger. My God, father would tell me that after the army he changed in the direction of where everything became sharper, stricter, everything punctual, that is the war influenced him in a way that became –not that he was under constant threat – but in an imaginary or a possible threat, and this impacted him from the perspective that he became serious, he matured by a lot and very quickly.

One time we were on holidays, 10 or eight years ago in Crimea, and I noticed a clear sign of this. Near us a gas cylinder exploded, a very loud explosion, and in this moment, it was very clear – immediately, in one movement, he grabbed my mother, and in the next movement grabbed me and immediately removed us from the wave of the explosion, so to speak. I then heard that this instinct came from his service. This was the clearest sign.

Accordingly, he set many examples for me: you always must be assembled and collected; you always must be ready for everything. And I think that this is an imprint of what had happened on the border during his service.

My father is my example, yes, this definitely influenced me. But we don't have a very good relationship, perhaps you know about problems of fathers and sons, and you can definitely say this about us. The war is not one-hundred percent the reason, not wholly, but partly it can be, I agree with that. That likely part of it is, but not the whole reason.

He was aggressive, yes, yes, yes. I believe, but, I'm not ready to concede one hundred percent that this was an influence of the army. Perhaps, this was just his character. So, to say, this is definitely because he was in the service in the war, and that is why he was very aggressive, I do not think that is the case. Again, the military left its imprint on him however, not totally. I believe this.

He explodes like a volcano. Ah, ah, you know, out of nothing. Sometimes it's, you know, a dirty cup left somewhere; sometimes it's, you know, long hair. It doesn't matter what, it just

happened. And, nobody knows why – how it happens and why it happens. Wrong time, wrong place, maybe.

I consider that everything is okay; as a whole it's okay – but his aggression, which was often aimed at his family and was within the family, this was difficult to digest for, in the first place, my mother. As I am a male it was a little easier for me to deal with, the love of a child is stronger for the mother than the father; you feel sorry for your mother and this was difficult for me to deal with. But, if you take just me, it was reasonable.

Ah, during his blowing up like a volcano, you know, if you get under his arm at the wrong place and wrong time, then, yes, I was afraid of my father. Because, I didn't know what he was capable of doing to me, that is, in that moment he was very heated, ah, and in reality, it was very scary. Now that I have grown up and became physically bigger it now doesn't scare me as much, but then when I was a child it was very frightening, to the point of trembling.

I was always closer to my mother; I always feared my father and respected him. He was always setting an example. In the period of an emotional outburst it was very difficult, but on a whole, ah, everything works itself out through humour. That is, ah, you know, the right joke and everything is okay.

I, likely, am like my father, that is, I easily get wound up. Again, after my own time in the army, I don't know why, my close friends told me about this, that I became abruptly hot-tempered. That moment, when you explode like a volcano, when the match lights up, all in a split second, before the army I never noticed this in myself. That is, something was there but not to this extent.

I think that is something I inherited from my father, because my mother is calm, very calm. My father is different; he is angry, and I think that this is that influence. I think that, ah, that there is a definite imprint, on his memory: when you fall asleep, somebody can kill you, so, you can't sleep, because there is now always a perceived danger.

I see myself in my father, but only partly. Like, my father is an example to me but it's an example I can never reach. I will never be able to reach his example because a father can do everything, um, but this is already a new topic. Do I see myself in him? Partially, not in everything. In a lot, I do not see myself in him.

My character, yes.

My mindset, no.

Emotionally, yes.

That imprint from the war, yes, it translated to me, I believe so, yes.

Chapter 12

Biological or genetic model: Kellermann, 2001 this model refers to the epigenetic transmission and inheritance (going beyond the inheritance of DNA sequences) of information, that our children and grand-children might inherit – some studies on rats have continued on to a fifth-generation, finding that some effects of ancestral exposure to pollutants (such as the fungicide, Vinclozolin, and the insecticide, DDT) have persisted.³⁸

Chromosomes house our genes, and epigenetic information (like DNA) resides in these chromosomes. However, epigenetic information is different to DNA as it responds to the environment (for example: pollutants, as noted above, and stressors can induce epigenetic alterations without modifying the DNA sequence itself). Epigenetic modification can occur in a number forms, such as small molecules attaching themselves chemically to the DNA and to the proteins in our chromosomes.

Sergey and I met downtown nearby a hotel and a park. As I was waiting for him I purchased souvenirs for family and friends from the hotel kiosk. The bric-a-brac was displayed under and behind glass, and no matter how much time passes over Russia images of Stalin continue to adorn keychains, figurines, magnets, and matryeshkas,³⁹ as if the country has forgotten about the millions of deaths under his dictatorship across the Soviet Union.

Walking across a public square we find a cosy cafe; sit at a cosy table and order sparkling water and tea. I worry that the café music is too loud for the recording.

A glass bottle of water is brought to our table and I reach over to open it and pour him a glass. Before I get the chance Sergey swiftly grabs it from my hand, observing cultural rules – that is, in Russia, a woman never pours drinks for herself and a man; only a man ever does this.

³⁸ Skinner 2014, p. 49

³⁹ Russian nesting doll.

I ask him when he was born, and he tells me it was the year Gagarin went into space: 1961.

* * *

Sergey Kandarov is a veteran of the Soviet–Afghan war. Born in Uralsky in Sverdlovsk Oblast, Sergey was a helicopter pilot and served two tours, 1985-1987, and 1988-1989.

What do you mean if I 'wanted to'? I was ordered to go. In those times, we didn't even think about it or discuss it. The second time I was ordered to go, all I thought about was that I needed to replace the fighter pilots there currently.

You remember the most extreme situations, and the funniest, and the initial ones. The initial memories, these are when we arrived there, everything was not native, the heat is 40 or 50 degrees, even in the shade, the smell was completely different, the air, too. The smell was very specific, maybe the mountains, maybe the desert. The smell was the first thing that stayed in memory.

Then you have difficult moments. Moments of losing your comrades are remembered. Success is remembered, when you destroy the enemy. War is a difficult thing; you young people don't understand this.

When you go into war, you are setting yourself up for one thing: either you kill or you be killed. It's not a fistfight where you fight and walk away; wash your face of blood. When you go into war, you must psychologically ready yourself, that you need to serve your duty, which was handed to you by your motherland, by your government. It could be the interest of your motherland, or it could be your motherland.

I consider a military pilot a defender or protector of the motherland only if he went through an armed conflict in a war. He is a true protector of the motherland with combat experience. I do not consider him a pilot even if he has flown for 25 years but only on internal airfields.

War is not needed for anyone, but you are gaining true combat experience. When you gain this war experience, of course, there are losses, and you are very sorry to lose your comrades, but if you come out alive and well, you pass on your knowledge to the young generation.

In the war, self-preservation kicks because everyone wants to live, to survive. Anyone who wants to attack Russia, or wants to fight with her, they must not forget that we have Afghan vets.

After the war, in my character, I became, how do I say, more judicious, more mature, tougher. I had a more kind of a male outlook or gaze on life. It changed my relationship, of course. More orderly in friendship; mutual support with comrades. All of this that you go through there, a friend in need is a friend in deed or in extreme situations. This means that I can tell people apart immediately, to keep company or not. Any softness that remained in me disappeared. War hardens a person. He becomes stern, just.

I was afraid of cars. The year that I was there, I became unaccustomed to cars, because they practically don't exist on airfields. And when I was crossing the road, when I came back for a vacation to see my parents, and if a car was breaking for pedestrians, this scared me; it was something savage; I would turn around in fear. I didn't fear bullets as much as I feared the screech of a breaking car.

No, I was not traumatised. But the one thing I can say is that I remember I dreamed dreams with shooting. Gun fire, guns, this memory remained.

Of course, it left an imprint on me. Individually on each person, but it was much harder for soldiers to tolerate the war. Their psyches were practically broken, in that they were 18-years-old, or 19, right? We were a bit more mature, some five years older than them. We were more held together, we went through a specialised school; we wore boots for four years [military training]. For us it was a little easier; for them it was harder. But, frankly speaking, we dulled the memories and pain with vodka.

It's not a secret, but when your comrades perished, it was very difficult to handle. When you collected them yourself, bone by bone; saw all of this yourself, what blood is, what bones are. Such things you only experience yourself, and it's very difficult for your psyche to handle, to cope with this.

Even our commander would say: 'Is there alcohol? For three days, or two days we're not flying.' You dampen it, drink with your combat comrades, quietly, calmly, and it somehow dulls, mutes the trauma and pain; and then again you go into battle.

My wife never told me about any changes she saw in me. My wife was a classmate; she's known me since the third grade. We've lived together for a very long time. We understand each other. We are best friends.

Afghanistan is still with me, of course. It will be with me my whole life! Of course. I will say this, with each year it slowly erases; the information departs from memory. But I've not done this on purpose, telling myself to forget.

About the war? We practically never talk about it. You're interviewing me now, but after this no one will ask me about it. And if they do ask I do not tell them anything. What's the point of sharing this? I don't know, how do I say, to purposefully sit down and talk about Afghanistan. If my grandchildren ask me I will tell them. If one of my brothers asks me something, then yes, I will tell them, but, of course, I do not give them all the information.

But there is no regret. What is there to regret, it is one of the stages of my life, my service. How do I say, I am, not that I am glad, but I am satisfied that I ended up there with my military comrades, and I do not regret this at all. Such is fate.

In that time, when this happened, we sincerely thought that Afghanistan was a friendly nation to us. There were jokes flying around that it would be the 16th Soviet republic.

Before the 1979 war, Afghans lived well. The Soviet invasion interrupted a 50-year period of peace. They say that the Soviet Union fought in Afghanistan against the local government. But in reality, we fought against worldwide capitalism. Why don't they talk about this now? Why is Europe and North America quiet? Because instructors were trained in Pakistan; we took some Chinese into captivity with automatic weapons, Kalashnikovs, which were made in China. Pakistan was training instructors, militants; mines were made in Italy; stingers and radars we made in the USA. There were rockets from China. You can draw your own conclusions. Who fought in Afghanistan? Everyone. But now they are silent.

Last words – what to say? In memory of my friends in combat, who we loved, and who were taken away on that field, of course, it is a little hard without them. To all that lived, those who remain, not to forget them, at the least, once a year – on February 15th the day of withdrawal of

the troops from Afghanistan⁴⁰ – to remember them, the laying of wreaths is our responsibility. Before their parents, their relatives, not because we did not save, but that is how it is – that is why it is so difficult to give final words.

It's a different country, Afghanistan is a different country, and that time it was a mistake, politician's mistake, to send troops into Afghanistan. We didn't need to be there.

On February 15 we meet up every year. We know every grave of the fallen. We lay flowers. A lot of snow, stomp out a path, lay flowers, raise our cups and mugs, we remember them. And only after this we return and go to a café, and we sit and we continue. This is our tradition. There are 20, 25, or 30 people. Every year we fill up a full bus. For us this is a holy day.

⁴⁰ 1989

Chapter 13

Some researchers suggest that a true epigenetic intergenerational effect progresses through four steps: 1) exposure to stressor; 2) epimutation; 3) transmission of this information between generations (epigenetic transmission); and 4) changes in the observable characteristics or traits in offspring not exposed to the original stressor.⁴¹ It is important to note that such changes in gene expression resulting from trauma may be transferred from the parent to their child in utero or in infancy, during which time parental (this includes maternal, trans-paternal, non-binary) behaviour can influence both the hormonal and the metabolic processes in the baby.⁴²

I met Shamil for our interview at a local school. The same school that sold me potato, and cabbage pirogi. The same school that houses a small Soviet–Afghan war museum.

Born in 1963, Shamil moved to Ulyanovsk after the Soviet–Afghan war in 1988 from the Komi Republic. I bend my head high to look at him when we are introduced by Tatyana, whom he has known since the '90s from her work with families and children of veterans.

Shamil told me that he suffers from PTSD because of his service in the Soviet–Afghan war. He was only 21. When I ask if he would be comfortable discussing the specific event that led to his trauma, he says no.

* * *

Shamil Yakovlevich Latypov is a Veteran of the Soviet–Afghan war. Born in the Komi Republic in 1963, Shamil served in Afghanistan from June 5 1984 to 1985 as a Lance Sergeant, posted in Bamyan Province located in the central highlands of Afghanistan.

⁴¹ Pembrey, Saffery & Bygren 2014, p. 567

⁴² Shmotkin et al. 2011, p. 10

We went there voluntarily, because, hmm, that's how we were brought up, how we were taught. Our homeland said that we needed to fulfil an international debt, and we went to fulfil our debt, and, what I want to say is, it wasn't done by coercion, but by our heart. Because that is how we were brought up, that was our generation. A generation of 18-year-old young men. No one stayed in the Soviet Union. Everyone who was called on, they all went voluntarily into Afghanistan. Not under duress. That is an important moment, I am telling you. Not under gun fire, but with bravery.

Well, I remember the difficult climate conditions in Afghanistan, um, difficult, difficulty in battle, it's a war. Very few conditions for normal life. It was very difficult.

There is a lot that I can tell you about, but what I do want to say, an important addition, it was difficult, it was hard, but no one paid attention to this, because we were young 18-year-old boys; no one ever paid attention to this. Difficulties in battle, climate, the physical toll, the military. However, this was in the background; in the forefront was to execute our orders, our debt. No one paid attention to battle conditions. It was an important moment, because we didn't get stuck thinking about this.

All the men who were there have trauma. On 15th February we meet annually – it's been 28 years since the end of the war, and practically every time we meet it feels like we've come from the war just yesterday.

After Afghanistan, when you came back, alive, you look at many things differently. We left as 18-year-old boys without facial hair, without brains, just wind in our heads. And you come back a totally different person. More grownup, more, how do I say, like a man. You look at things, at life, at relationship to people, differently. More grownup, more serious relations, at life, at relationships, at male friendship, and the most, most, most real male friendship comes in difficult, hard conditions in the war. Your heart comes through; you either become someone or become no one. The war either surfaces the best in people, or their worst. There is no mother and father; it's just war, and you.

After Afghanistan, after the war, you come back a completely different person. And you begin to understand what life actually is. How you look at life. You leave a boy, and you see everything: war, blood, loss, difficulties, your friends dying.

My attitude to life, to people, it did not change because we were that Soviet generation. We were made from a different dough, from a Soviet dough. Young people don't understand this. This is how we were raised, how we were brought up.

There was hurt, because we were looked at as outsiders, as strangers, as if we; like we were enemies of the people or the state, everyone would say: 'We didn't send you. Who do you think you are?'

You felt hurt.

We left during the Soviet era, and when we came back it was almost a new country, and no one wanted us.

The attitude was 'we didn't send you.'

How my life changed? Of a surety appeared a craving for life. I began to appreciate life more. Stopped consuming unnecessary things like narcotics, drunkenness, because after the war you start appreciating life differently; looking at things very differently, and you feel sorry; life is only bestowed once, and you don't want to destroy it, waste it on all sorts of nonsense. You want to live humanly, so that you are not ashamed yourself, or in front of your children, grandchildren, in front of your family, your family, so that they would not say 'came back from Afghanistan and ...',

I just do not want to remember.

* * *

I believe they grew up with parents leading as an example. I believe this is the case for all families whose father fought in Afghanistan, that all children took his example. I hope that my best characteristics have transferred to my children.

To speak on my behalf only, I do not regret that I was in Afghanistan because it was a good school. Everyone I know from the war, none of them regret being there, that they were in Afghanistan. After all this trauma, after all the loss, after all the blood. It's important to say: the human remained a human; he did not turn into a beast, a man-eater. He remained a human, and he returned a human.

The war might damage us psychologically, but if the person is mentally healthy going there, he will return mentally healthy. You leave a human and you return a human. I do not regret being in Afghanistan. One thing however that is painful, and you feel sorry that we lost many, many of our young men. The country lost some of the best young men, the best of the best. The war swept away many, many young. Good, healthy, young, a whole generation, generation, generation of these young men. This is very sad, very sad. But that I served there, I do not regret anything.

We looked at the future with positivism.

It remained in our soul. In each Afghan vet. Yes, yes, yes. Twenty-eight years have gone by, and on 15th February we met with other veterans, to remember and it was a feeling that we had come back from the war just yesterday. It's in the soul, in the heart, in the memory, in the head. Thirty, 40, 50 years will pass, 100 years will pass, and it will never leave, it's strongly settled within us. In the heart, it's an unhealing wound.

Chapter 14

Other studies suggest that epigenetic modifications can additionally affect parental behaviour in ways that produce the same behaviours in their offspring (Kudler 2000, p.7) despite these changes not being passed down through the germline (a sequence of cells that develops into eggs and sperm).

A 2011 study found that pups who were raised by passive mothers, compared to pups raised by mothers who aggressively groomed them, showed more DNA methylation impacting the genes and affecting their expression in the glucocorticoid receptor, which is a protein facilitating the response to Cortisol (a stress hormone). Nestler 2011 This example suggests that, despite not being passed down through the germline, the epigenetic modifications produced in one generation can be passed on to the next due to the mother's behaviour altering the epigenetic markings in its offspring (through its passive nurturing of the pup).

Such a process can potentially mean that the Sociocultural and socialisation model, the Psychodynamic relational model, and the Family systems and familial communication model can in fact create epigenetic modifications that are transmitted from one generation to the next without being passed down through the germline.

Tatyana began speaking as soon as I entered her office.

Her eyes were wide as she told me about her organisation, Union of Families of War Dead in Afghanistan and Local Military Conflicts, which she established in 1987 to help and support widows and family members of the war dead.

Tatyana's office was in the Government House of Ulyanovsk in the city centre. The white and baby-blue building was surrounded by white ice and remnants of snow, its main entrance bordered by 16 white columns. As I entered, security stopped me and all was very serious until Tatyana came down the hall and to the security line to pull me through.

Before the official interview commenced, Tatyana gave me an unofficial, unauthorised tour of the Government House, taking as many photographs as we could throughout, including one of

me at an enormous boardroom table in an enormous two storey blue room surrounded by paintings and more white columns. The tour concluded abruptly as we were stopped by a police officer demanding to know who I was. Again, Tatyana smoothed everything out.

Following this meeting, Tatyana became my fixer in the city, helping me find participants, set up interviews, and travelling with me.

* * *

Tatyana Gennadyevna Knyazevskaya is the widow of Vladimir Aleksandrovich Knyazevskiy, who served in Afghanistan from January 1984 until his death in May 6th, 1985 where he was killed in action. Vladimir Aleksandrovich Knyazevskiy was a senior lieutenant.

Volodya was killed on May 6, 1985. In 1981 he made me promise that if anything were to happen to him to bury him in Frunze (now Bishkek, Kyrgyzstan) with the grandmother that raised him, and I did. I now think it was a huge foolishness.

I don't believe that he is dead; his coffin was empty apart from a sweatshirt and a couple of boots, and a couple of bricks. I can't remember exactly. He couldn't, Volodya. I know he is dead, but I just can't believe it.

My son is 35. The last time he saw his father he was one-and-a-half years old. Volodya sent a photograph home, three weeks before his death. The photograph has some 60 people in it, and my son poked at Volodya's face in the photo and said: 'He will be killed. He was about three then.

Our children, our Afghanistan's children, children whose fathers died, are the most unfortunate, unlucky, unhappy children in the world. Those children who lost their fathers in Afghanistan before the age of five, their lives are most frightening. They are practically unsettled in life. They do not have families, practically none of them.

No one wanted to help us, and I thought that others like me must be out there. Which is why I started the organisation 'Union of families of war dead in Afghanistan and local military conflicts' in 1987.

I am seen as an 'inconvenient' person. I ask a lot of questions; make demands; I accomplish things; I am helped with some things, sometimes people help me, though people assist me rarely; most things are done myself.

In 1990, I helped put on a musical marathon in remembrance of Afghanistan. At the concert, I announced to the audience my name and my number and I said: 'I am waiting for you; I am a widow' to find others like me, to unite with them and to support them and one another.

This became my life.

On April 27, 2017 it was the 30-year anniversary of my organisation and work. I finance everything myself, I basically have never seen financial help or funding from any outside source.

In 1987 I met with the chairman of the women's council and she said to me: 'We didn't send your men there.' One of the mothers of the dead, she said to some officials that they 'received authority and power on the blood of our sons, and then spat on us'.

There is a quote: 'You were killed there only once, but here we are killed every day' – and this is a key phrase about our life.

Initially, we had families of 108 soldiers from Afghanistan, who were from Ulyanovsk, 105 of them deceased, and three missing in action. Today, 28 years since the end of the Afghanistan war, remain 46 family members of the dead and missing. The rest have passed away. I know their phone numbers and addresses off by heart.

We had to do everything ourselves, we had to fight for everything. No one came to us and said 'this is this, and that is that'.

Losing Volodya, oh, simply, all was lost. Because you had to know my Volodya. My Volodya was – I always say if the conversation starts in this direction – I always say that if every woman received 10 percent of what I received from Volodya, then these would be the happiest women in the world. He was dreamlike. He always looked after me and our son. Organised for food and

clothing deliveries, even when he was in Afghanistan. Helped look after the apartment, with the cleaning and cooking. He made incredible lunches.

Despite everything that has happened, I am still a gullible fool. I believe, I trust. Then I am deceived; I worry sometime after, and then my eyes are rose coloured, everything is rose coloured, and to this day, no matter how much I am beaten, despite it, I cannot not trust people. It must be in my genes, in my blood.

When Volodya went to Afghanistan, then, no one asked anyone anything. Then it was, either you sign the agreement with a gun pointed at you, or maybe not, or you bribe someone not to go. When Volodya already knew he was going to Afghanistan, he did not tell me. I found out he was there when I received his first letter from Afghanistan. Only in the second or third letter from him did he tell me that 'here, sometimes they shoot', and only in this moment I realised the reality of where he was. That was May or April 1984.

I received letters from him once or twice a month. Sometimes a couple of months went by without a letter, and this was very worrying. He once also called me from Tashkent. Volodya was delivering coffins of soldiers who died in Afghanistan. There is a legend that those who delivered coffins with the dead would not die themselves. This, of course, was not true.

He died on May 6, and I only found out on May 11.

No, they didn't say how he died. They said nothing. The only thing they did say to me was that Volodya no longer exists, and I asked a question, a single question that I could ask in that moment: 'Where is the coffin?' I couldn't say 'where is the *body*?' They said to me on 11th May that he had yet to cross the border. And then I said, what I promised to him earlier, that they send him to Frunze. On May 17th he was buried. They buried him not like he asked with his grandmother; instead they gave him a military funeral.

In August 1985, I had eight visitors come to see me. I don't know if they were friends of Volodya, but they knew him in the war. One told me for the first time that Volodya died heroically, losing his life with two other soldiers; that they protected and saved a battalion.

These eight people visited me during a period of six months. Volodya was meant to get an extraordinary title, but this never came.

One of these men said to me that if it wasn't for Aleshka, I wouldn't be here. Only children keep you here in life. And everything piled up on top of each other like this, it was terrible.

My son, Aleshka, he is in a bad way; there is nothing good, good, affectionate, tender. The government does not help in any way. But they made a huge mistake; they did not take my son into the army.

Apart from pain, the war didn't achieve anything. Simply because when ours came out of Afghanistan, this shit [drugs] came into Russia ... it existed prior to Afghan, but not on this level.

My opinion is this: what happened to Volodya; we should have all been killed here, too. No people, no problems. Right? Living men think of the living. But members of families of the dead are remembered only 15th of February, and 27th of December. Yes, the only help they get, and have received, is from each other.

Imagine this, Anutka: my son missed having a father so much; no child went with their mother to a tavern to find himself a father. 'Why don't I have a father? Let's find a dad. Let's get a dad.'

Aleshka and Volodya look identical; even their handwriting is identical.

I have been to Bishkek [Frunze] once; my relatives do not know about this visit. When I went, I was not able to find Volodya's grave. I searched for hours across three cemeteries but did not find his grave.

I do not want people to die; I do not want any war. I do not want the Syrian war now; I do not want war to exist.

In 1992 or 1993, the Blue Berets came to Ulyanovsk for the first time. Aleshka was nine or 10 then, and he performed with them, read poetry about Afghanistan on stage.

Everyone has different reactions to this. Some people don't sleep at night. After my first conversation with you, I didn't sleep for two nights.

Chapter 15

PTSD is associated with poor familial and social relationships in both veteran and community populations. It has also been found that combat-related PTSD can hinder a veteran's ability to parent a child, leading to issues surrounding the formation of a positive and healthy relationship between the parent and the child.⁴³ The effects of PTSD may in fact have a larger influence on intergenerational transmission of trauma than the condition itself, including, for example, family violence resulting from a parent's combat-related PTSD (this violence arguably resulting in a primary trauma for the child) which projects a greater distress in children than the PTSD in itself.⁴⁴

Issues around the development of a positive parent-child relationship were also found in a 2008 paper looking at intergenerational transmission of combat-related trauma.⁴⁵ Relating to family functioning, the scholars found that numbing symptoms of combat-related PTSD impacted on the parent-child relationship, suggesting that symptoms associated with PTSD, such as detachment and emotional numbing, may impact on a veteran's parenting ability. This paper outlined three mechanisms pertaining to transmission of trauma, including the functioning and involvement within the familial unit; familial atmosphere; and patterns of communication.

Sitting in grandmother's apartment my father laughs at how I pronounce some Russian words, referring to me using a bigoted euphemism. He sits across from me on the sofa, smiling from ear-to-ear.

'Why do you laugh at me for mispronouncing words?'

'It's just a joke.'

'Are you okay with people laughing at your accent when you speak English?'

He doesn't answer.

⁴³ Galovski & Lyons, 2004, p. 486-487

⁴⁴ Harkness 1993, p. 635-643

⁴⁵ Dekel & Goldblatt 2008, p. 284-285

The next day I go to the Ulyanovsk Regional Clinical Hospital of War Veterans. Tatyana organised for me to meet with some veterans from Afghanistan. As we enter the red-brick building we are ushered into a change room: Hats in coat pockets. Coats hung. Scarves hung on coats. Exhale. Say it's warm inside.

We are told to put on blue shoe covers before we can proceed any further. Tatyana has her own pair and pulls it out of her bag. Someone hands me a pair for my boots. We don our blue covered shoes and proceed further.

The hospital smells of chemicals, medicine and sterilisation.

We enter a room with four beds and wait.

* * *

Aleksandr (name changed) is a Veteran of the Soviet–Afghan war. Born in 1961, Aleksandr was a sergeant and squad leader, serving in Afghanistan from 1979 to 1981.

Ah, most likely the trauma exists. We were wounded in our heads, our bodies, and our hearts. The thing is, psychological trauma, it's; we were young, and we didn't notice it, ah, psychological trauma we started to feel more because we vacuum the negativity in, the unrighteousness.

Dishonesty is all around us, and theft and corruption. These traumas started now, with age. I, for example, am like a vacuum cleaner sucking in all the negativity, all the bad things happening in the country. I take it all in and I feel unwell, and attacks begin, my heart, because of this, is not well.

Chapter 16

As trauma transmission is an important part of the human experience and its history, Danieli 1998 so is its relationship to culture – trauma impacts beyond the familial environment (or transmission from parent to child) and impacts whole communities. The after-effects of trauma are far-reaching, and like any individual psychological trauma, collective trauma is a tyrant contaminating those exposed to it and impacting on further generations through the processes of intergenerational transmission of trauma. Not only does it contaminate people and their communities, collective trauma additionally leaves traces on physical locations;⁴⁶ the physical remnants of trauma occurring during the Soviet era live on even in its architecture, with Socialist Classicism – also known as in the style of the Stalinist Empire (Russian: Сталинский Ампи́р) – and khrushchyovka apartment buildings (Russian: хрущёвка) pervading cities across the former Soviet bloc, a daily reminder, in the public spaces and in the private dwelling, of the Stalinist shadow that continues to cast forward on Eastern Europe.

Russia's ongoing issues with the understanding, acceptance, and treatment of psychological trauma is connected to the disappearance of individual trauma during the Soviet Union era. This disappearance is part of the zeitgeist of the USSR. This disappearance, too, is an example of a society encouraging culture-specific and collective responses to trauma and pain (Merridale 2000).

We were in a taxi on our way to a family friends' home for dinner when he told me the bad memories were coming back.

'Normally, you don't think about the war, and when you do you try to remember the good,' my father said.

But the bad memories were creeping in on him and he didn't feel well.

⁴⁶ Kellermann 2007, p. 33-34

As we rode in the darkness he told me about the soldier he had replaced after he was killed in Kabul, and how sleeping on a dead man's bed was uncomfortable and unforgettable.

I thought about how damaging this whole thing could be to my father.

Later than night, at the dinner, my father began to comment on my body and chest. He made gestures about my breast size and referred to them as my intellect to his friends as I sat at the dining table with them.

Telling him that it made me uncomfortable didn't stop him.

'We are all friends here,' he said.

Asking him to stop did not stop him either.

* * *

G.P. Yermilov is a Veteran of the Soviet–Afghan war. He was deployed in 1981, aged 18, until 1983, serving two years and four months in the war.

I was the only one to serve in Afghanistan from my village. There was a miscommunication, where a coffin came from Afghanistan into the village, and a relative who worked at the airport thought, therefore, that it was me, and called my parents to tell them that I had died.

Did I want to go? Then, no one asked if you wanted to go or not. Those who didn't serve in the army then, they were ashamed. Back then women didn't like dating men who didn't serve in the military. It was a Soviet upbringing; we were bred as patriots.

In Afghanistan there was everything, the good and the bad. Firstly, we were young; we arrived in the helicopters and put up our own tents. Started from zero in the desert. A field between mountains; 45 degrees in the shade; heat; unfamiliar. The water was infected. Bleach was added into the water that was delivered, to avoid infection. Many had intestinal diseases from the water. To get home and drink cold water, that was our dream.

After serving half a year, I got typhoid fever. There was also an outbreak of linen lice as we didn't have water to bathe; we didn't bathe for half a year at first.

Some soldiers died from a mine explosion, driving through Kunduz there were bombardments, and some came back wounded or dead. There were ambushes; dying or being wounded in mine explosions was common. I lost friends in Afghanistan.

In 1983, I was hurt in an explosion and was left with a concussion for four months. My eyesight was impacted.

Of course, there was trauma, I absolutely agree. We were told we would only go to Afghanistan for one month, fix the country and come back. The war lasted a decade. But when I came back it was as if people carried us up in their arms, we were heroes.

My first raid was in Kandahar, in January, 1980. The night is cold. It was night time. We didn't know what we were doing. There was gun fire, screaming. No one died. My second raid was on the border with Iran. Our column accidentally drove into Iran. We were armed, so this is obviously bad. Other raids were in Herat.

The largest raid was in Kandahar, 4th June 1980. It was my 19th birthday. I was first given a day off, and so I took my photo camera and went to take some photos. Someone found me and I was ordered to urgently go on the raid. We left for Kandahar on June 4th, and arrived on June 5th. We were there for a month. On June 27th, there was an attack. My watch stopped at 5:53 when a bomb went off.

In the first years, as I've said, we considered ourselves such heroes, and, how do I say, such an unfair life didn't exist. During the Soviet times, everyone lived the same way. But, you know, hmm, no matter who you ask, how others relate to us is different. This is because we behave differently. That is, we help others without being asked. Not everyone, but many Afghantsi⁴⁷ are like this.

Between us there is friendship. We celebrate all important dates together. February 15, 9th May. We all get together. Walk in the parade. We get called into school and technical colleges, and we go.

⁴⁷ This is how Soviet–Afghan war veterans are referred to in the former Soviet Union.

It's hard to say if my relationship to people changed after the war. In my village, everyone knew everyone. How people were towards me when I returned was very different, to this day it is different. The mentality of a village and the mentality of a city is different.

When we went to war, we didn't think too much about what could happen. Because we had wind in our heads,⁴⁸ and there was a romance about war, about serving. The hardest thing was, for me, in 1980, which month? May, I think. Yes, this is it. I think it's May. A petty officer; he had a month left to his pension. He also served in Germany before Afghanistan. I cut his hair, and we saw him off on his break. On his way back, between Herat and Shindand there is a large passage, and on this passage he was shelled and was killed. Everyone was devastated; cried. This was a big tragedy for me.

I will tell you, this war didn't say anything. Do you know how many wars the Soviet Union went through since 1945? Thirty-eight wars. And wars to this day continue. We are always praying, always saying 'stop' but no one hears us, no one cares.

Did I regret being in the war? I, I can't say this. The government had its interests there, and we just followed an order. It was my fate. They didn't even tell us and the two teams of 60 people that they were going to Afghanistan. Sixty were left in Samara, and 60 kept going on. They gave the former 1.5 rubles for the road, and we were given 3 rubles for the road, and we were told that where we are going winter doesn't exist. We were sent to Tashkent, heat and beautiful; then sent further to Turkmenistan, which must have meant we're going to Ashgabat; we came to Ashgabat and had another transfer, where else? I thought. We're at the border already!

We wake up in the morning; the train had stopped. Blessed mother, we were in Afghanistan.

I still remember the smell of Afghanistan – the smell was like some kind of medicine. The air was, the smell, when I remember about it the smell is in my nose. And the second smell was of petrol.

After the war, oooh, yes, there was anxiety. After watching movies, and the wife said: 'We are not going to see any more movies about Afghanistan' because after these movies, always something happened at night to me. She has said that after certain movies about war, in the night I was screaming.

⁴⁸ Vernacular for 'airhead', particularly about the young

Loud noises, yes, and this happened, too. It would startle you, and you shudder, wince. And this happens to this day when somewhere, something bangs. Imagine this, in the war from dusk 'til dawn, the noise was continuous. It was unceasing, from morning to night.

But Afghanistan, no one can take it away from us. I live only it. I am proud that I was there. We weren't weak. We were raised to be war heroes. War is a game for boys.

You know, I feel sorry for the guys. On the 20th anniversary, we counted, and there are half of us remaining now, in our city, 30 people had already died in 26 years. After 1989, when the war ended, 30 people died. Some died after an illness, others died tragically.

When Afghanistan ended, the Soviet Union ended, too, and there was a moment when some didn't know what to do. I went outside to trade; pretty much the whole community went to trade. But not everyone was able to get through this.

Alcoholism, too. This is the group of people that couldn't get through the changes.

One of my friends hanged himself.

I receive psychological therapy every time I come to this hospital. But I am not in much need of therapy, because I take care of this myself. Through my work, too. I help other veterans and families to stay connected, take them to concerts, makes phone calls, keep an itinerary about what they are doing and when – I have a whole calendar.

I have spoken with my daughters about the war. And surely I see myself in them. They saw what I did, and they are the same.

Of course. Every time it's difficult to talk about. I am telling you now so that you can write about this, but generally, when we get together for a celebration with other vets we will drink, and it starts. Some start crying. Sometimes a new vet joins us, and he starts telling us about himself first, about the war, and it builds on from this. But sober, it is very hard to talk about. No matter how many years have passed. There is a saying 'would be better if I were there, it was easier there, and quick'. That is how it is, and that is how it will be. And we will die feeling this way. It feels like it was yesterday, and I can't live without it. It's mine, and you can't take it away.

I met my wife when I came back from the war; I was wearing my uniform that day. Then we both left to study, but fate brought us back together three years later.

Chapter 17

With this information in mind, you might start thinking that everything we are and all of our shortcomings can be blamed on our ancestors, our parents. But this isn't the point. The point is to understand how trauma transmission occurs, and how it impacts us, and what it means in our lives, and, most importantly, what can be done to prevent it – to prevent or to even interrupt that cycle from rolling and infecting one generation to the next, and potentially destroying any chance at a stable life from one generation to the next. The point is to figure out what can we do to pause it, even, perhaps, to stop it. It comes down to treatment, and policy, and resources, and, most importantly, the sharing of stories for people to take notice.

This text is part of a big puzzle that the scientific community is still piecing together. The stories in this book, and my story, are part of this puzzle in our understanding of how trauma moves through generations and how it continues to impact all the people down the line who did not experience a traumatic event directly, but who live with its consequences by proxy. And how this proxy impacts our relationships, our mental and physical health, our lives, day in and day out.

When I was planning my PhD fieldwork I pulled up a Google map of Ulyanovsk to find our old apartment building. I couldn't remember the address or the street name, but I could remember how I travelled from the apartment to my school, Grammar School Number 33, which sat across from Park Semya – a beautiful park in the summer and in the winter, and where we would go for sports class as the snow came out, skiing around and around and around. And so I found the school, and followed the tram tracks on Zapadny Boulevard back to my old neighbourhood. I couldn't wait to see it again. And on February 28th I finally had the opportunity to go back.

I remember the suburb with the eyes of a child; seeing it as an adult was remarkable because of how little and how much had changed simultaneously. Our building still stood there, the grounds were the same, but behind our apartment building stood numerous others. All tall, all brutalist, all the same. The Mosque was still there, too. They were building the whole time I lived in Ulyanovsk; this time I saw it completed.

And all was so quiet and everything was covered in snow.

Melancholia swam in my belly and I thought about how lucky I was not to live here anymore. The fear of being stunted in this neighbourhood, in this city, without a way out frightened me. And I can't explain why.

I spent the evening with Auntie Olya and her son. Olya is not my aunt, but in Slavic culture every adult is referred to as auntie or uncle, and you never grow out of it with the adults that were around you when you were little. In a more official setting, or a less familiar one, you must use the person's first name and patronymic.

Auntie Olya's apartment was covered in religious icons and plants. When my father came to the apartment the first thing he commented on were Auntie Olya's breasts, in the same way that he discussed my body and appearance at a dinner the night before. Auntie Olya was uncomfortable, her face was screaming uneasiness, but my father was blind to any discomfort he caused anyone.

At the end of the night, Auntie Olya's son gifted me a tie-died scarf as I was leaving.

On our last day in Ulyanovsk, my father and I decided to get some Russian McDonalds from across the road of my grandmother's apartment. We talked about how fucking delicious their cherry-pies were, and then I told him that I think I am starting to understand him a bit more after my fieldwork interviews.

I will never understand why he said what he said next.

He took my understanding as an opportunity to go on a political rant before concluding his speech by telling me that he would throw out each refugee attempting to come to Australia from a plane into the sea over Indonesia. He even gave his price: \$50 each.

I asked him if he was serious.

'Yes,' he replied.

And I lost all understanding of him all over again.

I could feel my skin turn pale and forced myself to quietly finish my cherry pie.

On the flight home we talked about developing film, and black and white photography. Somehow, he didn't know that this was a hobby of mine despite him attending a group exhibition of my work. And I didn't know that this was a hobby of his either in a bygone era.

We had a layover in Dubai, and everything was going as okay as it could be at this point. We ate at Red Lobster by the water when I talked about how difficult it is to have people or animals in your life because of how afraid I was of losing anyone else.

'Sometimes I think it's easier just to be in total solitude', I said, knowing I could never really do it.

He responded by telling me that a woman cannot survive being alone because it was scientifically proven that women need to have sex with men to survive, or that we lose our minds. He shared what was clearly a fictitious anecdote of a friend he clearly never had who was told, by a clearly fictitious doctor, that her fictitious illness was due to her not having sex with men.

He was pleased with himself, and I couldn't tell if it was because he knew how uncomfortable he was making me, or because he had another chance to vocalise his hatred of women.

I wanted to jump into the water and drown.

When I returned to Sydney I couldn't sleep. Days later I found my hair was falling out. Weeks later I changed my number.

I have not spoken with him since.

* * *

Everything I am, everything I've done, so much of what I stand for and who I stand for flows from that unhappy accident of fate – that action from a choice made by a man to hurt a child and the devastation and trauma it brought with it.

I am still viewing the memories of my past through the eyes of a child. And this means two things: I cannot view the past with an outlook more aligned with recovery, therefore I cannot recover; and I cannot forgive, I cannot fully forgive anyone who was around me for not seeing and not stopping what was being done.

* * *

I don't know how it started or why, I just remember opening my eyes and being ushered into the bedroom by some unknown force as I trembled with fear of what was happening to my mother. That cream-coloured carpet was beneath my feet as I waited in a bedroom with my brother and sister, pacing my little feet on the spot, terrified, fists clenched, and the noise.

That fucking noise.

Have you ever heard little kids crying and whimpering from fear? The adrenaline and terror mix and make a certain sound. It's the sound of not being able to do anything at all while your Mother is being attacked on the other side of the wall. That noise is burnt into my brain and echoes in the hippocampus.

And all the while the noise outside grew louder, and louder and louder. And then my Mother let out her Slavi Wilhelm scream that broke the glue holding us in that bedroom.

As the three of us ran out screaming for him to stop we saw the scene: my father had my Mother by her neck, he was pushing her head down towards the floor.

* * *

Divorce papers were often in our household. But they never went through with it. I couldn't understand why my Mother wouldn't leave him. But I learnt later that his physical and psychological abuse turned my Mother into a shell, and I only met the real her when I was 19. She had finally started to heal and I couldn't believe how much we were alike. A couple of years ago I asked her again.

'Why didn't you leave him sooner? Why didn't we go to the police?'

She told me that if she had, that the moment he left police custody he would find her, he would find us, and he would kill us.

One day in an art class I eavesdropped on my teacher speaking to a student about his parents' divorce.

'How happy did you feel when they finally split?' I asked him as she walked away.

He responded with an odd kind of look.

For years I thought every child delighted in the divorce of their parents. But his look made me wonder why he didn't seem to feel the same way.

In 2014 I was sitting on a train reading David Leser's memoir *To Begin to Know*. And in the most ordinary part of the extraordinary book I began to cry. David wrote about his relationship with his daughters, and in this particular scene he wrote about very casually hanging out in one of their bedrooms and talking about school and boys as if they were friends. And the thing is, they were: they were family and they were friends and they were love. I was 24 when I realised not all fathers are abusers, and so I cried, and I finally understood that boy from high-school and his odd look at my happiness of my father finally being outside of our house; and of this house turning into a home; and of the floors turning from eggshells and broken glass into normal, ordinary flooring.

But my feet are still healing.

9.4 Epilogue

'Most psychologically and/or physically abused children have been taught by parenting adults that love can coexist with abuse. And in extreme cases that abuse is an expression of love. This faulty thinking often shapes our adult perceptions of love. So that just as we would cling to the notion that those who hurt us as children loved us, we try to rationalize being hurt by other adults by insisting that they love us.' — bell hooks, 2000⁴⁹

Just don't let him in.

I don't know why I did this to myself, and I don't know why I gave him a chance; the chance to show that he was no longer the monster that I grew up with. But he took this chance and he showed me that reality was much worse and much scarier and his hatred was all encompassing and all-consuming and his soul was pitch-black and it knew no limits and everything that wasn't like him was a point of his obsession and his perversion and his hate. He took the chance and he showed me that the monster was real, is real, still there; he showed me this hatred, and it wasn't just a hatred towards the other – it was the need for them to be miserable and to be hated by all others, too, and to be abused and tortured and that everything they got was deserved because he couldn't stop thinking about everything and everyone who was different to him and he wanted to punish us all.

He was a perverse mess, a disgusting mess, and the mess accumulated over years. His search for peace and happiness was buried in a love for hatred and the infliction of physical and psychological pain onto others.

And so I keep wondering why I did this to myself. Why I spent two weeks in his presence. And I have to remember to tell myself that it was to find out what made him this way, and I still don't know if I've accomplished that – if I found out the cause and the reason, because I no longer think it was just one thing, or a correlating series of things, but I think he was born lost and life

⁴⁹ *All About Love: New Visions* p.9

turned him into a shell and then the war made that shell into a monster. And I have to keep reminding myself that it was to give him a chance to prove me wrong, but he proved me right in some ways and wrong in those ways in which I had no idea how much of a monster he really was.

At the end of it all I wanted to ask him three questions:

1. Did you think you were a good father?
2. Why did you think it was okay to abuse my Mother?
3. Why did you think it was okay to abuse my siblings and me?

I'll never get a chance to ask him these questions now, but I also feel that I no longer need to. Because I know his answers.

His denial is beyond any proportions I can find a simile for and his answers would be a combination of lies, victimising himself and totally and completely denying any wrongdoing while simultaneously placing blame for his wrongdoing onto others – onto my siblings and me, and onto my Mother – because we had what was coming to us because we sinned and our sin was to be of his body.

But it turns out that you can erase people, you can shut up and shut out your abuser and no longer allow them to be stuck inside of you, to see you, hear you, smell you, find you, and the world will keep on turning; even as you continue to bear this weight on your back and in your mind, it will keep on turning. It must.

CHAPTER 10: CONCLUSION

This thesis presented a study on the impact of the Soviet–Afghan war, 1979 to 1989, on the first post-Soviet generation through the process of intergenerational transmission of war-related trauma. Despite decades of research in the field of multigenerational trauma (Danieli 1998), post-Soviet society has not been a focus of the literature; specifically, the Soviet–Afghan war and children of its Soviet veterans. The purpose of this study was to move the field of intergenerational trauma transmission forward in our understanding of the impact of war-related trauma on children of veterans, while privileging the voices of participants and their stories using an exo-autoethnographic framework and a mixed-methods approach.

The results of this mixed-method study show an ongoing impact of the Soviet–Afghan war on the first post-Soviet generation. The data suggests evidence that this impact is a result of varied processes of intergenerational trauma transmission. This study provided four key findings: intergenerational trauma transmission; domestic violence; collective trauma, and mental health in the former Soviet Union; and makeshift group therapy and substance abuse. From these findings, the data suggests that children of veterans are exposed to domestic violence and child abuse within the familial environment (inclusive of psychological and physical abuse, as well as exposure to abuse of other family members), and children who reported their veteran parent exhibiting traits aligned with mental health issues (PTSD) were more likely to self-report their own mental health issues than those children who did not report these traits.

This research shows a strong likelihood that the correlation of mental health issues between children and their veteran parents is a result of intergenerational effects of military service in the Soviet–Afghan war. These findings align with most current literature in the field of intergenerational trauma transmission (Dekel & Goldblatt 2008; Forrest, Edwards & Daraganova 2018; Franklin et al. 2010; Kellermann 2013; Magruder 2018; McFarlane 2018; Nestler 2011; O’Toole et al. 2018; Shmotkin et al. 2011; Skinner 2014; Yehuda & Bierer 2009).

The creative portion of this thesis provides an evocative contribution to the qualitative and quantitative research. Чёрный Тюльпан (Black Tulip) is a written artefact that takes the data analyses beyond the statistical and thematic findings, by exposing and narrativising the realities of an upbringing influenced by parental trauma, showcasing how intergenerational trauma

transmission takes form in daily life and its impacts. Further, it privileges the voices of interview participants by sharing their stories in first person accounts. These raw stories of trauma provide an holistic look at the impact of the Soviet–Afghan war on the first post-Soviet generation, and on post-Soviet society more generally.

The implications of these key findings show the serious situation concerning mental health and trauma in the former Soviet Union. This issue highlights the radical need for improvement in mental health education and support within the former Soviet Union generally, and within the military specifically. These results further support the position that intergenerational transmission of trauma is endemic (Danieli 1998). As trauma is endemic, and war and conflict are endemic, these results highlight the ongoing impact of war-related trauma on a global level: we must not assume that trauma remains confined to the individual impacted by primary trauma. To do this would only allow the cycle of trauma transmission to continue. As Alexander McFarlane writes, within the field of traumatic stress there exists a propensity ‘for periods of intense interest and periods where the lessons of the past are dramatically forgotten’ (McFarlane 2000, p.12). It is vital that intergenerational trauma research does not become relegated to an academic trend, and that research on intergenerational trauma transmission does not fall out of interest with the public, social scientists, mental health professionals and researchers. It must be our goal within the scientific community to ensure that our research works towards ending this cycle.

A 2016 review looking at transmission of trauma in refugee families highlights the limited knowledge on intergenerational trauma more broadly, noting that a considerable amount of work is still needed to address the current gap in research (Sangalang & Vang 2016, p.10). The mixed-method study in this dissertation partially addresses this gap, adding new knowledge to the field of intergenerational trauma transmission, the first of its kind concerning the Soviet–Afghan war, and the first of its kind looking at the impact of the Soviet–Afghan war on the first post-Soviet generation.

This thesis additionally makes a contribution to knowledge in the field of autoethnography, specifically in relation to methodology in social research (qualitative and mixed-method approaches). This was achieved by the development and use of exo-autoethnography, a new method of research and writing on intergenerational trauma transmission studies. I encourage the application of exo-autoethnography to other topics of social research.

10.1 Limitations

1. Data size: The limitations of this study lie in the size of the data samples, both qualitative and quantitative. Though the aim of qualitative data is not to generalise the results, this research provides a limited amount of qualitative data directly from children of veterans. Furthermore, it does not provide an even amount of qualitative data from the four primary groups of participants (as discussed in chapter 3), which would have provided a more in-depth and even data pool from which to interpret the thematic findings. The quantitative data analysis focuses on descriptive statistics, rather than inferential statistics. Descriptive data works well with the qualitative results in explaining the thematic findings, while the thematic outcomes help to explain the qualitative results. However, due to the small data sample of quantitative responses, these results cannot be generalised, and no causal conclusion can be drawn from the findings. The limited data available in this study was a limitation of access to participants, due to the difficulty in finding participants willing to discuss the topic of the Soviet–Afghan war.
2. A limitation of autoethnography when judged by quantitative research criteria is that the method delivers an incomplete representational account. The framework of exo-autoethnography attempts to meet this limitation, providing a more holistic approach to research that includes an autoethnographic element. However, due to the limited data sample, exo-autoethnography, in this case, was not able to deliver a complete representational account.
3. The final limitation of this project is related to the mixed languages used for the study, specifically in the qualitative analysis. As 10 interviews were conducted in the Russian language, and two interviews were conducted in a mix of Russian and English, all qualitative data went through a process of translation. Some culturally specific terminology, and some culturally specific expressions and metaphors, are difficult to translate from one language into another while retaining their complete nuance. Though every attempt was made to retain nuances, for an English-speaking audience of this dissertation, some of the particulars of Russian-language expressions may be lost in translation.

10.2 Recommendations

The 'disappearance' of individual trauma in the Soviet Union era placed society's focus on the collective struggle and aims of the State. This impact continues to be felt today on post-Soviet society. Rather than fighting what has become a cultural ethic, mental health professionals must utilise this collectivism to their advantage and to the advantage of post-Soviet society in how to best approach the healing of society, both in its collective trauma, and in its individual traumas.

Though PTSD estimates vary widely by country and conflict, some estimates suggest a prevalence as high as 14 – 16% (Gates et al. 2012; also see Iribarren et al. 2005; Richardson, Frueh & Acierno 2010; Smith et al. 2008). I argue that further research is urgently required on intergenerational trauma transmission within post-Soviet society, and globally, in order to:

1. Better understand the impact of parental military service on children, and how it continues to impact children into their adulthood;
2. Influence mental health policy in the defence forces; and
3. Implement safety nets and structures protecting the mental health of military personnel – for whom treatment and support includes their immediate family – in order to have the best chance of interrupting or stopping the cycle of trauma transmission through the familial environment and child-rearing.

A new project on the study of intergenerational trauma transmission can expand on the results of this research to interrogate the difference of experience in the lives of children with parents with war-related PTSD and children of parents without PTSD.

I recommend that this research is mixed-method and longitudinal, with qualitative data providing first-person accounts of the impact of veteran trauma and trauma transmission on children, and quantitative data sample be at a generalisable level, in order to have the best chance of convincing policy makers that part of military spending must include mental health treatment and mental health support for veterans and their families.

In this process, qualitative data is of vital importance as participants retain agency, and their voices are not silenced. Further, it ensures participants remain people in research, and not turn

exclusively into quantifiable data. Harold Kudler writes: 'As social researchers of traumatic stress, we must remember the basic humanism of the field' (Kudler 2000, p.7).

And I conclude, we must give space for the voices of the people we study to share their stories of trauma in order not to turn their voices into statistics without names or faces or humanity.

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