

Annual Conference of the Population Health and Armed Conflict (PHAC) Network

University of Illinois at Urbana-Champaign.

Friday October 27, 2023

AGENDA (all times are Central Standard Time)

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|---------------|--|
| 9:30-9:45 am | Welcome & opening remarks, Cynthia Buckley |
| 9:45-11:15 am | <p>Panel 1 – Population, Health and Armed Conflict in Ukraine (Chair: Cynthia Buckley)</p> <p>Oksana Kis
Militarized vs Hybrid: Changing Discourses on Normative Femininity During Russia's War on Ukraine</p> <p>Marta Havryshko
"They have mentally destroyed me": effects of sexual violence on women during Russia's war against Ukraine.</p> <p>Theodore P. Gerber and Anna Popovych
Romantic partnerships and childbearing during war: virtual interviews with women in two Ukrainian cities under Russia's full-scale invasion</p> <p>Emma Mateo
"If not us, then who?": The volunteer networks providing healthcare support in wartime Ukraine</p> |
| 11:15-11:30 | Break |
| 11:30-12:45 | <p>Panel 2 – Conflict, Migration and Displacement (Chair: Nathalie Williams)</p> <p>Delaney J. Glass, Meredith Reiches, and Patrick Clarkin
Growing up in Times of War: The Effects of Armed Conflict and Forced Migration on Puberty and Mental Health</p> <p>Kim Korinek
Migration amidst Conflict and Cumulative Causation: An Analysis of International and Domestic Migration in Thailand's Southernmost Provinces</p> |

Stephanie Koning, Emma Adam, Amita Kapoor, and Thomas McDade
Echoes of conflict and displacement in maternal health: life-course violence, maternal stress and mental health after childbirth at the Thailand-Myanmar border

12:45-2:00

Lunch break

2:00-3:15

Panel 3 – Methodological Approaches for Research on Health and Population in Contexts of Armed Conflict (Chair: Stephanie Koning)

Rana B. Khoury

Surviving International Aid: Local Organizations in Wartime Syria

Wesley Wang and Nathalie Williams

How Does Armed Conflict Influence Population Health?

Orsola Torrisi, Maria Gargiulo, and Signe Svallfors

Obstetric violence in the context of community violence: the case of Mexico

3:15-3:30

Break

3:30-4:45

Panel 4 – Health and Mortality Research in Armed Conflict Settings (Chair: Kim Korinek)

Zachary Zimmer, Sara Hamm and Deborah Norris

Understanding the Connection between Early-Life Trauma & Later-Life Health: Insights from the Vietnam Health & Aging Study's Qualitative Interviews

Hannah Wild

Strengthening the emergency health response to civilian victims of explosive violence: The Mine Action Trauma Care Collaborative

Amy Hagopian

Revisiting lessons from a 2014 randomized household cluster survey to account for Injuries, Death, and Disability Associated with 11 Years of Conflict in Baghdad, Iraq

4:45-5:00

Concluding Remarks, Cynthia Buckley

CONFERENCE ABSTRACTS & AUTHORS

PANEL 1: Population, Health and Armed Conflict in Ukraine

Militarized vs Hybrid: Changing Discourses on Normative Femininity During Russia's War on Ukraine

Oksana Kis, Cornerstones Visiting Chair in History, University of Richmond
Senior scholar, Institute of Ethnology, National Academy of Sciences of Ukraine

Abstract: Since the Maydan (Revolution of Dignity) and the beginning of Russia's war on Ukraine in spring 2014 one can observe substantial changes in public discourse on the normative femininity in Ukraine - a remarkable trend towards increasing normalization of an image of a woman-soldier. In my talk I argue that this process should be understood as an evolution and expansion of a normative femininity by adoption of an idea of a woman-good-to-fight-back (in the most general sense) as its integral part. I examine textual and visual materials from conventional and social media to show how the image of a militant woman (encompassing both female soldiers and civilian female citizens) evolves and gains momentum as a hybrid form of femininity that is rather inclusive in terms of its versatile and seemingly opposite constituents, and flexible enough to operate in different modes depending on a specific context.

"They have mentally destroyed me": effects of sexual violence on women during Russia's war against Ukraine.

Marta Havryshko, Dr. Thomas Zand Visiting Assistant Professor, Strassler Center for Holocaust and Genocide Studies, Clark University

Abstract: The unjustified and unprovoked Russian invasion of Ukraine on 24 February 2022 became a starting point for one of Europe's greatest human rights and humanitarian crises since WWII. Both Ukrainian and international human rights organizations have documented cases of laws-of-war violations against civilians in Russia-controlled areas in Chernihiv, Kharkiv, Kherson, Kyiv region, etc. Repeated rapes, gang rapes, mutilation of genitals, castration, sexual slavery and sexual torture are among them. The presentation addresses the following questions: What are the effects of sexual violence on victims/survivors, their family members, and their communities? How are Ukrainian government NGOs dealing with the consequences of sexual violence in terms of support for survivors and their families?

Romantic partnerships and childbearing during war: virtual interviews with women in two Ukrainian cities under Russia's full-scale invasion

Theodore P. Gerber and Anna Popovych, *University of Wisconsin-Madison*

Abstract: We study the impact of war on intimate partnerships and childbearing qualitatively, based on 22 semi-structured, in-depth interviews we conducted with women of prime childbearing age in Ukraine's two largest cities in spring 2023. Russia's full-scale invasion of Ukraine has produced widespread destruction and death, driven over 7 million refugees (mainly women and children) out of the country, displaced millions of others internally, and shattered Ukraine's economy. Yet, our interlocutors -- women who have remained -- recount a wide range of views and experiences (both their own and their acquaintances') regarding how the war has affected partnerships and childbearing. They see partnerships both strengthened and weakened, and point to rapid progression of new relationships to marriage, as a result of the war. While many perceive that conditions are simply too unfavorable for having children, others associated childbearing with patriotic duty in the face of an enemy attack.

"If not us, then who?": The volunteer networks providing healthcare support in wartime Ukraine

Emma Mateo, *Columbia University*

Abstract: The onset of violent conflict can put healthcare systems under great strain. Hospitals may struggle to support large numbers of injured combatants. At the same time, healthcare services in towns and villages that come under fire may be left unable to provide services to the civilian population, in a time of desperate need. In the case of Ukraine, informal networks of volunteers and local organisations have been stepping in to tackle these issues. There are numerous reports of these voluntary civilian efforts proving extremely effective at the local level. This paper takes an in-depth look at two such grassroots groups: a nationwide collective of sewing workshops making adaptive clothing for injured soldiers, that started in the south eastern city of Dnipro; and a volunteer network that supported sick and injured civilians during the blockade of the northern city of Chernihiv. The paper argues that these groups are exemplary of many similar initiatives in Ukraine: they are motivated by a personal response to immediate need ("if we don't do this, then who will?"), they are reliant on horizontal social ties to organise and mobilise (often mediated by digital tools), and they draw upon resources within this local network in order to provide their services.

PANEL 2: Conflict, Migration and Displacement

Growing up in Times of War: The Effects of Armed Conflict and Forced Migration on Puberty and Mental Health

Delaney J. Glass, Department of Anthropology, The University of Washington, Seattle, WA, USA

Meredith Reiches, Department of Anthropology, The University of Massachusetts, Boston, MA, USA

Patrick Clarkin, Department of Anthropology, The University of Massachusetts, Boston, MA, USA

Abstract: Experiencing armed conflict and forced migration (ACFM) represent a set of extreme environments that are increasingly non-unique for children and adolescents. Adolescence may constitute a sensitive period (puberty and psychoneurological maturation) through which ACFM adversity leaves a lasting mark. Adolescence has become a focal point for analysis and intervention as it relates to the effects of early life adversity on puberty, linear growth, and mental health. Research in public health and psychological science suggests early life adversity may accelerate puberty, heightening risks for mental health disorders.

It is not however, well substantiated whether ACFM derived adversities accelerate or delay relative pubertal timing. Secondly, ACFM provides salient context through which to probe the relationships between nutritional, psychosocial, and demographic changes and their respective impact on puberty and mental health. We conducted a narrative review which 1) examined constructions of early life adversity and their proposed influence on puberty 2) synthesized empirical findings concerning effects of ACFM early life adversity on pubertal timing and 3) discussed proposed relationships between early life adversity, puberty, and mental ill-health.

Contrary to prior findings, we found war-derived early life adversity was consistently associated with pubertal delay and may exert counterintuitive effects on puberty and mental health. We show that early life adversity is not a ubiquitous concept to be operationalized the same across contexts and populations, especially in the presence of extreme forms of human stress and resilience. We discuss our findings in light of feminist ethics and anthropological approaches to study conflict-affected youth.

Migration amidst Conflict and Cumulative Causation: An Analysis of International and Domestic Migration in Thailand's Southernmost Provinces

Kim Korinek, University of Utah

Aree Jampaklay, Mahidol University

Tawanchai Jirapramukpitak, Mahidol University

Yothin Sawangdee, Mahidol University

Abstract: As armed conflict displaces populations at pace unprecedented since WWII, differential migratory responses, and decisions to remain rather than migrate in the face of conflict-related risk and hardship, beg sociological explanation. To enhance our understanding of the forces that enable and constrain migration within conflict-affected settings, we integrate perspectives on violence-related threats with insights on migration prevalence delineated in cumulation causation theory. In particular, we examine inter-provincial and international migration by individuals residing in Thailand's southernmost provinces (TSP), which have experienced bouts of militant separatist violence for approximately half a century. With longitudinal data collected among a representative sample of Muslim households in Yala, Narithiwat, and Pattani provinces during 2014 and 2016, we examine the effects of exposure to violence in the region's ongoing separatist insurgency, coupled

with prevailing levels of migration in households and villages, upon the risk of adult household members (N=3,270) migrating out of their province during the two-year study window. Using a generalized structural equation model approach, we conduct a fixed effects multinomial logistic regression analysis predicting first migration (inter-province or international) among adults ages 15-59 during the years 2014-2016. Our results demonstrate that first international migration trips are more likely among adults in households reporting major effects of insurgency violence on their household economic activity. Additionally, the relative risk of undertaking a first international migration trip is greater among adults residing in households with members working outside of Thailand and in villages with greater shares of international migrants. A significant, positive interaction between household migration prevalence and major insurgency effects on household economy suggests that migratory behavior in settings of conflict violence reflects assessments of threats to safety and livelihoods, as well as cumulative migration dynamics.

Echoes of conflict and displacement in maternal health: life-course violence and maternal stress and mental health after childbirth at the Thailand-Myanmar border

Stephanie Koning, University of Nevada, Reno

Emma Adam, Northwestern University

Amita Kapoor, University of Wisconsin-Madison

Thomas McDade, Northwestern University

Abstract: Maternal historical trauma and related stress exacerbate maternal and infant health during pregnancy and childbirth. Historical stress and consequent stress dysregulation may also continue to shape maternal health and wellbeing after childbirth throughout the early years of childrearing, an outcome that receives far less attention. Furthermore, studies of maternal stress and health are predominantly based on Western contexts and stressors, with few focusing on modern-day global sources of violence, trauma, and stress, such as armed conflict and displacement. Conflict-induced displacement and related violence is escalating globally, concentrated among civilians and migrants in border areas and disproportionately harming women and children. The current study investigates how women's life-course experiences of conflict and displacement are linked to maternal stress after childbirth at the Thai-Myanmar border. It compares the maternal stress hormone, cortisol, as well as anxiety and depression symptoms, between similarly situated mother-child pairs with differently patterned maternal exposures to armed conflict, displacement, and related violence. Analyses are based on survey interview data from 575 mothers and a subset of 340 maternal hair samples collected in 2017-18. Results suggest that how historical conflict and violence shape current stress and mental health depends on the outcome and other moderating factors related to living conditions at the border, including legal status, safety, and residential setting. High exposure to past conflict is associated with a 1.08-point higher mean generalized anxiety disorder score (5-point scale; 95% CI: 0.65-1.51), adjusting for age and months since childbirth. The legacy of historical violence on maternal stress and health is likely exacerbated by precarious living conditions in protracted forced

displacement settings. For example, precarious legal status and feeling unsafe at the border are associated with high maternal anxiety regardless of past conflict exposure.

PANEL 3: Methodological Approaches for Research on Health and Population in Contexts of Armed Conflict

Surviving International Aid: Local Organizations in Wartime Syria

Rana B. Khoury, University of Illinois at Urbana-Champaign.

Abstract: The arrival of resource-endowed bureaucratic organizations structures a new organizational environment for local actors in humanitarian crises. Existing scholarship on the political economy of organizations expects scrambles for survival to ensue, while that on population ecology expects growth to precede competition. Do these insights travel to the context of fledgling local organizations in war? How do international aid organizations identify local actors that are fit to participate in crisis response, and with what consequences? I argue for direct observation of legitimation and selection mechanisms that generate growth and survival in organizational populations. Attention to material meaning-making can reveal how local actors perceive, interpret, and enact their resource environments. Studying the Syrian case, I observe ground-level interactions and “money talk” of international and local actors engaged in the non-military response to the war that began in 2011. The research reveals how both sets of actors make meaning around material practices and transpose ideas and values onto each other. An original dataset representing Syrian organizations follows expected trendlines, and interpretive process tracing demonstrates that ideational preferences of international actors regarding local “fit” shape organizational growth and survival. Yet legitimation and selection processes are also found to be more uncertain and tenuous than existing approaches suggest. And the stakes for local actors are not limited to their organizational survival—but also their physical survival.

How does armed conflict influence population health?

Wesley Wang, University of Oxford

Nathalie Williams, University of Washington

Abstract: During periods of armed conflict, a common assumption is that population growth will decelerate drastically, in part due to the reluctance to procreate during uncertain times. In this study, we utilize an agent-based model (ABM) to examine specifically how armed conflict in Nepal has affected population size and growth during and after the conflict. In contrast to instinctive understandings, we find that population growth (and therefore population size) increases dramatically during the armed conflict period; and that population growth rates are greater in scenarios with higher rather than lower levels of conflict. Put simply, population size

increases during armed conflict, and in a way that correlates with the severity of the conflict. While population growth rates converge to stable and lower levels after the conflict, population size still remains the largest in scenarios with greater levels of conflict. We find that such a trend can be attributed to the exceptionally high birth rates during (but not after) the conflict period. In particular, high birth rates are found to result from two main factors: (1) a marked increase in marriage rates during the conflict period, which renders a greater proportion of the population eligible for childbirth; and (2) the ABM birth equation—as determined by the number and type of conflict events—which predicts the likelihood of childbirth among eligible individuals. Such findings run contrary to the basic expectation of a slowdown in population growth in turbulent times.

Obstetric violence in the context of community violence: the case of Mexico

Orsola Torrisi, New York University Abu Dhabi (NYUAD) & London School of Economics (LSE)

Maria Gargiulo, London School of Hygiene and Tropical Medicine (LSHTM)

Signe Svalfors, Stanford University

Abstract: This study examines the relationship between community violence and obstetric violence (OV) in Mexico, where the so-called “War on Drugs” has led to sustained high levels of homicides and one-third of women report abusive treatment from healthcare providers during childbirth. We combine individual-level information on experiences of OV for births that occurred between 2016–2021 from the 2021 National Survey on Household Relationship Dynamics (ENDIREH) with homicide data at the municipality level. Using fixed-effects models, we investigate how different manifestations of OV relate to levels of community violence in the short-, medium-, and long-term. While estimates suggest no overall association between continuous measures of community violence and OV, when we disaggregate by the intensity of homicidal violence, we find positive associations between prolonged high-level community violence and experiences of OV, particularly concerning physical abuse and non-consensual care. Such heightened risks are stronger among adolescents, low-educated respondents, and urban residents.

PANEL 4: Health and Mortality Research in Armed Conflict Settings

Understanding the Connection Between Early-Life Trauma on Later-Life Health: Insights from the Vietnam Health and Aging Study's Qualitative Interviews

Deborah Norris, Mount Saint Vincent University, Halifax, Canada

Sara Hamm, Mount Saint Vincent University, Halifax, Canada

Zachary Zimmer, Mount Saint Vincent University, Halifax, Canada

Abstract: This presentation reports on preliminary findings from the qualitative component of the Vietnam Health and Aging Study (VHAS). This part of VHAS aims at understanding mechanisms linking wartime trauma to later-life health while validating outcomes of quantitative measures. Using information collected from Wave 1 of VHAS, a subsample of 36 participants were purposively selected based on their military service status, sex, and relatively high wartime exposure. These individuals exhibited diverse characteristics related to social support networks and daily life stressors. Semi-structured interviews were conducted, recorded, and transcribed, with analysis taking a grounded theory approach in MAXQDA. Early findings provide an indication of how the qualitative data can shed light on the experiences of individuals during the Vietnam War and mechanisms connecting their wartime exposure to later-life health. Noteworthy insights include psychosocial, demographic, and biological traits associated with resiliency, the role of social support, and the significance of communal interaction and patriotism in mitigating the effects of wartime trauma, and an exploration of sex/gender variations. Given the large number of wartime survivors living in Vietnam, these results offer valuable insights into the coping mechanisms that impact life satisfaction and quality and how wartime exposures can act as a determinant of later-life health. The findings align with a social-ecological perspective of resilience, which emphasizes the importance of examining resilience at multiple levels of analysis and recognizing that it can be influenced by a complex interplay of factors, such as family and community connection, support systems, and a shared sense of national pride.

Strengthening the emergency health response to civilian victims of explosive violence: The Mine Action Trauma Care Collaborative

Hannah Wild

Abstract: Modern armed conflict is increasingly characterized by the use of explosive weapons with disproportionate effects on civilian populations including landmines, cluster munitions, barrel bombs, and improvised explosive devices (IEDs.) This shift in conflict dynamics creates new injury patterns with need for rapid first aid including control of life-threatening hemorrhage close to the point of injury. Yet, in many places where these injuries occur, formal trauma systems or prehospital trauma care are weakened by conflict and resource limitations. At present over one third of civilian casualties of explosive weapons die of their injuries. This case fatality rate is approximately five times higher than that observed in military treatment facilities or high-resource civilian trauma centers. Synthesizing the literature on blast injury epidemiology and trauma care interventions in low-resource settings as well as key informant interviews within the mine action sector, I present a novel framework for partnership between humanitarian mine action and emergency health responders in conflict settings. The Mine Action Trauma Care Collaborative is a collaboration between multilateral health and protection stakeholders including the United Nations Mine Action Service (UNMAS), World Health Organization (WHO), and International Federation of the Red Cross and Red Crescent Societies (IFRC) conceived with the aim of mitigating preventable morbidity and mortality among civilian victims of explosive violence.

Revisiting lessons from a 2014 randomized household cluster survey to account for Injuries, Death, and Disability Associated with 11 Years of Conflict in Baghdad, Iraq

Amy Hagopian

Abstract: In spring of 2014, a team financed by the [Society of International Humanitarian Surgeons/Surgeons OverSeas \(SOS\)](#) sponsored an in-person survey of 900 households in 30 Baghdad neighborhood clusters. Our long-standing partner at Mustansiriya University Medical School in Baghdad, Riyadh Lafta, organized the data collection using four pairs of interviewers (8 individuals) who started immediately after the 2014 national elections on April 30 and finished up the first week of June. The timing was miraculous, as Mosul fell to the ISIL on 10 June 2014 after only four days of clashes with the Iraqi military. From this household survey asking about injuries between 2003 and 2014, our team published at least 8 papers. I will reflect on our methods of project planning, teambuilding, IRB approval, data collection, data analysis, and publication.