

The Psychological Impacts of War on Displaced Sudanese Refugees

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ABSTRACT

Background: Armed conflict and forced displacement have profound psychological consequences on individuals and communities. This study explores the psychological effects of the ongoing war in Sudan on displaced individuals, examining its impact on identity, mental health, and adaptive functioning, with particular attention to implications for future generations and national productivity.

Methods: A qualitative research design was employed, utilizing in-depth semi-structured interviews with adult Sudanese individuals and questionnaires who were forcibly displaced due to war. Thematic analysis was applied to identify key psychological themes and stages of adjustment experienced by participants during and after displacement.

Results: Thematic analysis revealed a sequence of psychological responses that included initial disbelief and emotional numbness, acute adversity, functional paralysis in work and education, and gradual adaptation to new environments. Commonly reported symptoms included post-traumatic stress disorder (PTSD), depression, attentional difficulties consistent with ADHD-like presentations, and survivor guilt. A subset of participants demonstrated delayed emotional processing, while others showed psychological resilience, regaining a sense of direction, self-worth, and social belonging over time.

Conclusion: War-induced displacement significantly disrupts psychological well-being and identity formation. While many individuals experience severe and prolonged psychological distress, others exhibit notable resilience. The findings emphasize the need for targeted psychosocial support, culturally informed mental health services, and policies to aid integration and recovery among displaced populations. These insights also highlight the potential long-term effects on societal cohesion and productivity in post-conflict Sudan.

KEYWORDS: Refugees, War Trauma, PTSD, Depression, ADHD, Survivor Guilt, Forced Displacement, Psychological Resilience, Identity, Sudan.

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INTRODUCTION

How devastating can war really be? The psychological effects of conflict on people are significant yet usually disregarded, despite the fact that the world usually focusses on the economic and political implications of conflict. In alongside unsettling nations, war also disrupts with the mental state of those who experience it. The psychological and emotional effects of continuous battle extend far beyond the battlefield in countries like Sudan, where life have been destroyed. The effects on people's mental health can last a lifetime, even when economies and political environments may recover in a decade or less. These psychological injuries aren't restricted to the survivors; they can be inherited and impact offspring in ways that are frequently undetectable known as "transitional trauma" (Morrison,2012).

Sudan's ongoing conflict presents a particularly urgent case. As war continues to displace families and dismantle communities, individuals are forced to navigate new environments under extreme emotional and physical stress. While governments may eventually rebuild, those who lived through the conflict often carry invisible scars that influence how they relate to themselves, to others, and to the world.

This study explores the psychological toll of war on Sudanese individuals who were forced to flee their homes and rebuild their lives under unfamiliar and often unstable conditions. The aim is to better understand how trauma alters identity, disrupts mental well-being, and affects long-term adaptation. Drawing on in-depth interviews with displaced adults, this research introduces a model of psychological adjustment that captures the phases individuals experience—from initial shock to gradual acceptance. The study also considers how trauma is processed differently across age groups, and how war-related grief may be transmitted across generations, even to those who did not witness the violence firsthand.

LITERATURE REVIEW

The mental health effects of war have been documented across various historical and geographic contexts, but there remains a critical gap in understanding the lived experiences of survivors—particularly the psychological stages they go through after

displacement. Traditional research in this area has largely focused on diagnostic categories such as PTSD, anxiety, and depression, but has often failed to capture the nuanced emotional transitions that individuals experience in the aftermath of war.

Trauma, as defined by the American Psychological Association (APA), is the emotional response to an event that is deeply distressing or disturbing. The Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5), outlines trauma as involving exposure to actual or threatened death, serious injury, or sexual violence, whether directly, through witnessing, or indirectly through close associates or repeated exposure to aversive details (APA, 2013). In practice, trauma manifests differently depending on the individual, and its psychological footprint may last a lifetime.

Studies have shown that trauma is not only a personal experience but can be intergenerational. The concept of **transgenerational trauma** describes how psychological distress can be passed down from parents to children, affecting individuals who did not directly experience the traumatic event. Research on Holocaust survivors and descendants of the Armenian genocide has shown that children of trauma survivors often exhibit symptoms similar to PTSD (Morrison, 2012), highlighting how trauma can become embedded in family systems and identity narratives.

Moreover, traumatic events are alarmingly common. According to Benjet et al. (2015), individuals worldwide experience an average of 3.2 catastrophic events during their lifetimes. However, in conflict zones, this number is often significantly higher, and the psychological effects more intense. People exposed to war may face ongoing threats to life, loss of community and identity, separation from loved ones, and prolonged uncertainty—all of which contribute to mental health challenges. Wiederhold (2023) notes that such experiences can increase the risk of PTSD, depression, substance use, and even chronic physical illnesses. While trauma affects people across age, gender, and social background (Bjorkly, 1995; Torres, 2020), individual coping mechanisms vary widely. Factors such as cultural beliefs, support systems, and past exposure to adversity influence how trauma is processed. What remains consistent, however, is that trauma—particularly when untreated—can significantly impair emotional well-being, cognitive function, and social integration.

To address the lack of framework in understanding the emotional stages of war trauma, this study proposes a model of psychological adjustment made up of seven stages: **shock, disbelief, resettlement, adversity, work/study paralysis, adaptation, and acceptance**. These stages, drawn from interview data, reflect the psychological evolution many individuals experience as they attempt to make sense of their new reality. By providing a structured understanding of these transitions, the research hopes to contribute to more targeted psychosocial interventions and culturally sensitive trauma-informed care.

METHODS:

Study Design and Participants: This qualitative study employed a convenience random sampling method to examine the psychological and sociocultural impacts of war on Sudanese individuals displaced by the recent conflict. Data were collected through semi-structured, open-ended interviews with 60 participants (32 male, 28 female), ranging in age from 18 to 70 years were selected to represent various age groups in order to capture the differential psychological responses and coping strategies across the lifespan. Interviews were conducted between May 2024 and February 2025. Moreover, to increase accuracy of results questionnaire method questions are from the PTSD-5 from the national centre of PTSD and WHO scale and has been done using google form with a 60 Participants.

Data Collection Procedure:

Interviews were carried out both face-to-face and online via Zoom to reach displaced Sudanese individuals residing in different countries. Open-ended questions were used to encourage participants to narrate their experiences in their own words. Each interview explored themes such as initial reactions to the war, emotional processing, coping mechanisms, impact on decision-making, family relationships, educational disruption, and future aspirations. The flexible interview format allowed participants to discuss their experiences in depth, which often led to expressions of relief and catharsis.

Measurement Tools:

Two psychological assessment scales were used in conjunction with narrative interviews:

1. The PTSD Checklist for DSM-5 (PCL-5) to evaluate symptoms of trauma, including emotional numbing, flashbacks, avoidance, and intrusive thoughts.
2. The WHO-5 Well-Being Index to measure subjective mental well-being, including positive mood, vitality, and general life satisfaction.

Data Analysis:

Thematic analysis was conducted to identify recurring patterns across the narratives. Themes were manually coded and grouped based on frequency and conceptual similarity. The research particularly aimed to trace the psychological progression of war trauma using an original framework: the Seven Stages of War Grief.

RESEARCH RESULTS

Figure 1.11) shows the PTSD scale result from displaced people.

PTSD Scale	Not at all	A little bit	Moderately	Quite a bit	Extremely	Average
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1.Repeated, disturbing, and unwanted memories of the stressful experience?	3.8%	30.8%	28.8%	15.4%	21.2%	1.618
2.Repeated, disturbing dreams of the stressful experience?	13.5%	26.9%	26.9%	21.1%	11.5%	1.9
3.Suddenly feeling or acting as if the stressful experience were actually happening again (as if you were actually back there reliving it)?	33.3%	22.2%	13%	7.4%	24.1%	0.908
4.Feeling very upset when something reminded you of the stressful experience?	5.6%	11.1%	16.7%	11.1%	55.6%	2.978
5.Having strong physical reactions when something reminded you of the stressful experience (for example, heart pounding, trouble breathing, sweating)?	29.6%	16.7%	16.7%	13%	24.1%	1.391
6.Avoiding memories, thoughts, or feelings related to the stressful experience?	11.1%	18.5%	22.2%	9.3%	38.9%	2.464
7.Avoiding external reminders of the stressful experience (for example, people, places, conversations, activities, objects, or situations)?	24.1%	7.4%	20.4	22.2%	25.9%	2.184
9.Trouble remembering important parts of the stressful experience?	35.2%	29.6%	9.3%	11.1%	14.8%	1.407
9.Having strong negative beliefs about yourself, other people, or the world (for example, having thoughts such as: I am bad, there is something seriously wrong with me, no one can be trusted, the world is completely dangerous)?	22.2%	14.8%	11.1%	22.2%	29.6%	2.22
10. Blaming yourself or someone else for the stressful experience or what happened after it?	48.1%	13%	14.8%	13%	11.1%	1.26
11. Having strong negative feelings such as fear, horror, anger, guilt, or shame?	18.5%	14.8%	20.4%	18.5%	27.8%	2.223
12. Loss of interest in activities that you used to enjoy?	13%	25.9%	9.3%	22.2%	29.6%	2.295
13. Feeling distant or cut off from other people?	18.5%	14.8%	13%	13%	40.7%	2.426
14. Trouble experiencing positive feelings (for example, being unable to feel happiness or have loving feelings for people close to you)?	33.3%	16.7%	7.4%	24.1%	18.5%	1.778
15. Irritable behavior, angry outbursts, or acting aggressively?	24.1%	13%	18.5%	27.8%	16.7%	2.002
16. Taking too many risks or doing things that could cause you harm?	51.9%	7.4%	9.3%	18.5%	13%	1.335
17. Being "superalert" or watchful or on guard?	13.2%	18.9%	11.3%	24.5%	32.1%	2.434
18. Feeling jumpy or easily startled?	20.4%	11.1%	22.2%	18.5	27.8%	2.262
19. Having difficulty concentrating?	15.1%	18.9%	20.8%	20.8%	24.5%	2.209

20. Trouble falling or staying asleep	26.9%	19.2%	19.2%	9.6%	25%	1.864
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Analysis:

It has been statistically proven that participants feel very upset when they were reminded of the war event (55.6%), there was a void recognized as participants had the urge to distant or cut off other people(40.7%), it has also been noticed that they also tend to escape from memories, thoughts and feelings (39.9%).We concluded that there is a relevant increase in the fear of unknown or the fear of the future making participants be supernalert or watchful (32.1%) and also easily startled (27.8%).

As Forkus et al. (2022, p. 3) state, "PTSD imposes substantial medical and economic burden on individuals and society. PTSD has a serious impact on the physical well-being and causes cardiovascular disease. In the war circumstance people lost everything they had, they are now sort of immune to risks. They made up an ideology that they cannot lose more than they have already lost (51.9%). As in armed conflict situations we do not get to choose, hence there is less tendency of people blaming themselves (48.1%). As it was a sudden harsh reality people had to experience, a large number (35.2%) reported that they could not forget even tiny details of it and had trouble experiencing positive feelings (33.3%). Lastly, because the experienced participants developed a fear of it happening again (33.3%). Considering the serious impact of PTSD and its effects on people, reliable tools (using measurement tools such as the PCL-5) needed to be used for accurate diagnosis in order to help more people get the treatment (Forkus et al.,2022).

Cluster analysis:

Cluster Number	Numbers	Explanation
Cluster B 'Intrusion symptom'	8.795	Mild
Cluster C 'Avoidance'	4.648	Mild to Moderate
Cluster D 'Negative change in mood & cognition'	11.183	Mild
Cluster E 'Arousal & reactivity'	12.106	Moderate

Well-being scale:

Well-being scale	All of the time (5)	Most of the time (4)	More than half the time (3)	Less than half the time (2)	Some of the time (1)	At no time (0)	Mean / Item Score
I have felt cheerful in good spirits.	1.6%	18%	41%	11.5%	24.6%	3.3%	50.2%
I have felt calm and relaxed.	1.6%	13.2%	24.6%	31.1%	21.3%	8.2%	43.62%
I have felt active and vigorous.	3.3%	6.6%	34.4%	31.1%	19.4%	4.9%	45.54%
I woke up feeling fresh and rested	1.7%	18.3%	23.3%	28.3%	16.7%	11.7%	44.98%
My daily life has been filled with things that interest me	6.7%	11.7%	30%	23.3%	21.7%	6.7%	47.78%

Analysis of Well-being scale:

This results after two years we can see through the results that has been calculated through mean score. The well-being analysis: Participants' levels of well-being varied, according to the well-being scale analysis.

Most of the participants (41%) said they felt happy more than half the time for the item "I have felt cheerful in good spirits," but only 1.6% said they felt happy all the time. However, 39.4% of those surveyed said they were happy less than half the time. This item's weighted mean score was 2.51 out of 5 (50.2%), indicating a modest level of well-being.

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Overall, these results imply that although participants felt good and were slightly involved in their everyday activities, their level of well-being is not constantly high. Low frequencies of good experiences were reported by a sizable part of respondents, which might point to zones where emotional and psychological well-being is unstable.

DISCUSSION

This study reveals that the impact of war on Sudanese individuals extends far beyond material losses; it penetrates deeply into personal identity, cultural norms, and psychological stability. War grief emerged as a multilayered emotional process involving shock, trauma, and eventual adaptation. While all participants experienced the Seven Stages of War Grief to varying extents,

individual trajectories were shaped by age, personality, coping style, belief systems, and socioeconomic background.

Children exhibited developmental regression and trauma symptoms, while adolescents faced premature adulthood and educational barriers. Young adults reported a loss of purpose and career delay, and middle-aged individuals were challenged by reestablishing their professional identity. Older adults, with less adaptability, suffered the most from social disconnection.

Surprisingly, many participants also described personal growth, spiritual renewal, and strengthened family bonds. The adversity prompted some to reassess values and gain resilience, suggesting that trauma can coexist with transformative development. Nonetheless, severe outcomes such as PTSD, depression, and mental breakdown were not uncommon, particularly in those without adequate social support or coping mechanisms.

seven stages of war grief



Figure 1.12 stages of war grief, explain the stages victims of war go through after analysing participants behavior and the results provided in WHO-5 and PSTD-5 scales to be able to develop a way in helping victims of war go pass this stage this is called Abujabeen theory.

War grief refers to the complex psychological state which individuals and communities go through as a result of the losses and disruptions caused by war. Including the loss of loved ones, homeland, identity, stability, and future.

1. **Shock** its the first stage of war grief, in which it was not expected first impression of it is a shock. Depending on the circumstances, some of these events may have severe psychological impacts on the individuals involved. This study investigates two kinds of life shocks: negative life events and financial hardship. (Hashmi, Alam and Gow, 2019). Many interviewees expressed how they were going to work just like usual on the day of the war not expecting anything of that kind. Suddenly they found themselves in a war zone. One interviewee recounted that she had already left for work when the conflict escalated, leaving her stranded in a highly unsafe area for three days. During that time, she and others had limited access to resources and survived solely on the water they had with them.

2. **Disbelief** Many interviewees initially reacted with disbelief, perceiving the outbreak of violence as a temporary disturbance that would resolve within a week. This perception delayed their sense of urgency and preparedness (Kubler-ross & kessler, 2009).

3. **Resettlement** Considering migration or looking for a safe space, several interviewees discussed the disruption of instability not knowing where to go. The journey of fleeing their homes in searching of safer places is often very dangerous as there are clashes between 2 armies. One interviewee lost his son on there way.

4. **Adversity** means difficulties, hardships, or misfortune. It refers to challenging situations or struggles that someone faces, such as financial problems, health issues, or emotional struggles like PTSD or depression. rage, guilt, flashbacks, nightmares, depression, and emotional numbing, and can lead to a variety of grave. the Civil War provided a perfect storm of conditions that could trigger PTSD. Many individuals who were a victim of conflict report being more sensitive to hearing loud or sudden sounds. Because individuals unconsciously link these noises to the chaos and violence of conflict, people frequently have feelings of panic even after moving to safer surroundings.

5. **Work/study paralysis:** As the war created the highest unemployment among individuals for students, business owners and workers. Which it entails a difficulty in organizing thoughts or generating mental focus upon what to do in their professional life. It can manifest as a sense of cognitive overload or a “brain fog” that hinders their ability to concentrate and process information

effectively. It is similar to ADHD (Polanczyk, 2013) expect it is about the professional work aspect and how to generate income in a country or an area they moved to seeking a safer life, however they aren't aware of the market needs and demands. They experience a state of mental paralysis where they do not know how to get their life together and adapt with the new market find jobs or even students have to look to other universities and try to meet their requirements. This state resembles what cognitive psychologists describe as

executive dysfunction, marked by difficulty planning or initiating tasks due to trauma-induced overwhelm (Smith et al., 2020).

6.Adapting during this stage, individuals start adapting to their new circumstances by creating a sense of stability, determining their place of residence, engaging in work, and reestablishing a functional daily life

7.Acceptance this is the final stage, where one's accepted two realities, firstly, the uncertainty and that they are indeed clueless in term of knowing when it will end. Therefore, not placing happiness with the unknown. Secondly, accepting being helplessness and not being able to support everyone and that they have no control over the political situation.

Factors affecting this diagram of stages of war grief:

- 1.Coping mechanism
- 2.Believe and faith
3. Personal Character

Impact of the war:

Displacement:

The war has led to mass displacement, with only those who could afford to leave the country able to seek refuge elsewhere. This is a privilege not available to everyone, leaving many trapped in conflict zones.

Positive Outcomes Identified:

1. Increased Appreciation for Education
2. Improved Decision-Making Clarity
3. Cultural Exposure and Skill Development
4. Personal Growth and Maturity
5. Stronger Family and Community Bonds

Negative Psychological and Social Impacts:

1. Media-Induced Psychological Toll
2. Survivor Guilt and Emotional Burden
3. Loss of Stability and Identity
4. Cultural and Economic Disorientation
5. Idle Time Leading to Depression and Maladaptive Coping
6. Severe Mental Health Breakdowns
7. Educational Disruption
8. Family Strain and Financial Burdens

CONCLUSION: (INCREASE WORD COUNT)

This study contributes to a nuanced understanding of the psychological toll of war on Sudanese refugees. Using qualitative interviews and validated psychological tools, it highlights how conflict reshapes mental health, identity, and life pathways across age groups. While the war has brought immense suffering, it has also catalyzed unexpected growth in some individuals. Recognition of these complex responses is essential in developing comprehensive, culturally sensitive interventions that go beyond emergency relief and foster long-term recovery.

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