MOTHERHOOD IN HARD TIMES: PHENOMENOLOGICAL STUDY ON MOTHERS' RESPONSES, CONCERNS AND COPING IN RELATION TO TERRORIST ATTACKS IN TURKEY

A THESIS SUBMITTED TO
THE GRADUATE SCHOOL OF SOCIAL SCIENCES
OF
MIDDLE EAST TECHNICAL UNIVERSITY

BY

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IN PARTIAL FULFILLMENT OF THE REQUIREMENTS
FOR
THE DEGREE OF MASTER OF SCIENCE
IN
THE DEPARTMENT OF EDUCATIONAL SCIENCES

JULY 2017

Approval of the Graduate School of Social Sciences

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ABSTRACT

MOTHERHOOD IN HARD TIMES: PHENOMENOLOGICAL STUDY ON MOTHERS RESPONSES, CONCERNS AND COPING IN RELATION TO TERRORIST ATTACKS IN TURKEY

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July 2017, 227 pages

Human made disasters like wars, forced immigration and terrorism leads to a global security problem. Turkey is not an exception, in terms of experiencing civil war, several terrorist attacks, coups and refugee issues. In this present study, 21 mothers of children between ages 3-15 were interviewed about their own and children's responses to the recent terrorist attacks. This study suggests that mothers are stressed by these terror events, and give various responses in emotional, behavioural and thoughts dimensions: Shock and confusion, sorrow-worry-

terror, feeling insecure and incapable, threat perception, mistrust to others, checking loved one's security and not going to malls or crowded places are a few from these responses. Similar to the literature, mothers perceived that their children mimic their own anxiety, feel terror-fear-worry and think something bad is happening. Mothers mainly tried comforting their children, engaging in open communication and monitoring the news and their own behaviours. Mothers had terror related concerns about children's physical and psychological well-being, losing a loved one and dying and abandoning their children. They also had future related and everyday related concerns about their children. In order to cope with these concerns, mothers mainly employed problem focussed coping to protect and empower their childrenand emotion focused coping for their own stress-relief. These results were discussed in relation to terror trauma and stress literature from the international domain like post 9/11 America and post-Intifada Israel. The implications of the results for counselling was also provided for mental-health professionals, policy makers and the scholars.

Keywords: Mother's concerns, Turkey, Terror stress, Terror trauma, Psychological counselling.

ÖZ

ZOR ZAMANLARDA ANNELİK: ANNELERİN TÜRKİYE'DEKİ TERÖR SALDIRILARINA İLİŞKİN TEPKİLERİ, KAYGILARI VE BAŞA ÇIKMALARI ÜZERİNE BİR OLGUBİLİM ÇALIŞMASI

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Temmuz 2017, 227 sayfa

Savaş, zorunlu göç ve terör gibi insan-kaynaklı afetler bir küresel güvenlik problemi oluşturmaktadır. Türkiye de sivil savaş, birçok terör saldırısı, darbeler ve göçmen sorunu deneyimlemiş olduğundan bu duruma istisna değildirBu tezde, çocukları 3-5 yaş arasındaki 21 anne ile, kendilerinin ve çocuklarının Türkiye'deki yakın zamandaki terör saldırılarına karşı tepkileri konusunda görüşülmüştür. Bu çalışma annelerin bu terör saldırıları sebebiyle stres yaşadığını ve duygusal, davranışsal ve düşünce boyutları olan çeşitli tepkiler verdiklerini

öne sürmektedir: Bu tepkiler şok ve kafa karşıklığı, derin üzüntü-kaygı-korku, güvende hissetmeme, tehdit algısı, başkalarına güvenmeme, sevdiklerinin güvenliğini kontrol etme ve alışveriş merkezlerineyle kalabalık yerlere gitmemek bu tepkilerden birkaçıdır. Alanyazını ile aynı şekilde, anneler çocuklarının kendi endişelerini taklit ettiğini, korku ve endişe yaşadıklarını ve kötü birşeylerin olduğunu düşündüklerini algılamaktadır. Annelerin genellikle çocuklarını rahatlatmaya, açık bir iletişim kurmaya ve haberler ile kendi davranışlarını gözetlemeye çalışmışlardır. Anneler çocuklarının fiziksel ve psikolojik iyilikleri, sevdikleri birini kaybetme veya ölmek ve çocuklarını terketmek gibi başlıklarda teröre ilişkin kaygılara sahiptir. Bunun yanında çocukları hakkında geleceğe ve gündelik hayata ilişkin de kaygıları bulunmaktadır. Anneler genellikle çocukları ile ilgili durumlarda koruma ve güçlendirme gibi problem merkezli başa çıkma mekanizmalarını kendi stresle başa çıkmaları için ise duygu merkezli başa çıkmaları kullanmaktadırlar. Çalışmanın çıktıları Amerikan 11 Eylül saldırıları ve Intifada sonrası İsrail gibi uluslararası alandaki terör travması ve stresi alanyazını ile tartışılmaktadır. Mental sağlık profesyonelleri, politika yapıcılar ve akademisyenler için sonuçların danışmanlık için çıkarımları sunulmuştur.

Anahtar Kelimeler: Annelerin Kaygıları, Türkiye, Terör stresi, Terör travması, Psikolojik Danışmanlık.

To All Women & Children

ACKNOWLEDGEMENTS

I would like to thank my supervisor Prof. Özgür ERDUR-BAKER for her understanding and support, without whom no such thesis would be written. I am very grateful to her for all of her support through every process of this present thesis, starting with the planning, data collecting, writing and presenting. Her being a careful, hardworking and caring supervisor kept not only me but most of her students inspired.

I am also grateful to my committee members Prof. Dr. Figen ÇOK and Prof. Dr. Ali YILDIRIM for accepting to take part in my committee and providing me their valuable feedback through the process.

As sharing their thoughts, feelings and concerns; mothers who participated in this present research deserve much. They not only devoted their times, but also helped me to understand what is like to be a mother, with all of these risk and protective factors embedded in its nature. I am grateful to all of these beautiful women, who sometimes hosted me to their homes and offices with a full trust. Also, many thanks to the people who helped me to reach reach out these women, as well as my friends Gülşah for co-coding the data, Yasemin for reading the summary of the final draft.

Finally; my family, my parents and especially my husband meant a lot through this painful process of thesis writing, as giving me the social and emotional support I needed. Therefore, I thank them a lot for being there.

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LIST OF ABBREVIATIONS

APA	American Psychology Association
DSM	Diagnostic and Statistical Manual of Mental Disorders
METU	Middle East Technical University
N	Number (Sample number)
NYC	New York City
PDR	Psikolojik Danışmanlık ve Rehberlik (Counselling and Guidance)
PKK	The Kurdistan Worker's Party, terrorist organization
PTG	Post Traumatic Growth
PTSD	Post Traumatic Stress Disorder
QDA	Qualitative Data Analysis
SES	Socio-Economic Status
TSSB	Travma Sonrası Stres Bozukluğu, Turkish for PTSD
UEAM	Uygulamalı Etik Araştırma Merkezi (Ethics Committiee)

CHAPTER 1

INTRODUCTION

1.1. Background to the Study

The world is undergoing a widespread exposure to collective traumas and global security problems. However, not only continuing natural and human-made disasters are to blame, but also the information about those are getting more salient and traumatizing with the rise of global information technologies. Unfortunately, Turkey is not an exception as various groups had faced several collective traumas like a few major earthquakes, local floods, street violence, violence due to political polarization, nearby wars, terrorist attacks and various coup attempts through the last few decades. More specifically, even within the last few years, human made disasters like the Syrian war and massed forced migration to Turkey, resulting in a security question as well as interaction with dramatic life stories of migrants; urban terrorism and 2016 coup attempt can be listed.

Terrorism is 'a psychological warfare waged on public minds for political gains' and their unpredictable nature creates uncontrollability and coping inability of people exposed to it (Ben-David & Cohen-Louck, 2010, p. 66). Therefore, it causes trauma and stress in human beings. In fact, its human-made nature is supposed to traumatize people more than the natural disasters, since it shakes the sense of security and belief in good-human-nature (Abo & Zalsman, 2003; Mathewson, 2004; Abu-Ras & Abu-Bader, 2008).

Besides individual traumas, terror events might cause collective traumas, in the sense that the members of the society might feel traumatized despite not being exposed to the trauma themselves (Shipilova, 2004; Alexander & Dromi, 2011; Procevska, Kaprans & Uzule, 2011). Most collective traumas both have individual and societal responses, and affects a community's sense of identity (Baelo-Allué, 2012; Janoff-Bulman & Sheikh,

2006). This is important as collective traumas might feed the individual traumas or threat perception, leading more terror stress.

Terror stress is hard to live with since constant stress might cause various mental and physical health problems (Zakowski, Hall & Baum, 1992; Baker & Kevorklan, 1995; Bleich, Gelkopt, Malemed & Solomon, 2006). Moreover, mothers were considered as a risk prone group in terms of their health responses to terror, due to their caregiving role (Baker & Kevorklan, 1995). In fact, the role of a caregiver already leads individuals to be more risk prone in many other traumatic occasions (Baca, Baca-Garcia, Perez-Rodrig & Cubanas, 2004, DiGrande et al, 2008; Raveis et al, 2010; Dekel, 2010). Additionally, especially in the case of political uncertainty, risk and threat perceptions -like the ones caused by terror events- parents not only deal with their own traumas as individuals, but also try to help their children to deal with the situation (Shamai, 2001; Dekel, 2004; Warria, 2016). Therefore, how the mothers themselves respond to the terrorist attacks and their children's responses, what their concerns were and how they deal with those are questioned in this present thesis.

1.2. Purpose of the Study

As presented in the previous section, terror trauma and stress affect the whole society; emotionally, cognitively and behaviorally. For instance, terrorist attacks cause fear, terror, anxiety and confusion; shake the notion of security and remind individuals their vulnerabilities, and lead people to adjust their lives for terror threat and risk. Moreover, being women, being caregiver, and in our case the combination of those as being mothers are traditional risk factors. In addition to that, mothers are important for guiding, monitoring, motivating and assisting another risk-prone group "children" in such disasters. Therefore, this present study aims to explore the mothers' experiences of terror, responses, concerns and coping; in addition to their perception of their children's responses and how the mothers responded back to their children, in relation to the terror incidents since 2015.

1.3. Significance of the Study

The interest on such human-made disasters from a psychological counselling perspective is predictably high. First of all, as the literature repeatedly puts forward,

these events have significant effects on human psyche, shaking the trust to a good human nature and the feeling of security by pushing people to a limbo. Second, like all other collective traumas of both kinds, they have societal impacts because of the contagious fear and traumatization. Third, since the focus is mainly on the first and secondary victims of such events, the indirectly affected people are rather ignored if they do not individually pursue psychological help. Therefore, trying to figure out how people react to these events is an important addition to the literature where the crisis help, education and prevention programs can be built upon as a part of future directions.

Another important aspect of this present thesis is its sample characteristics. Caregiving as being responsible of raising up another human being both psychologically and physically healthy, is a great burden on mothers' shoulders. Even though there may be other caregivers than the mothers, traditionally in Turkish culture, mothers are considered as the primary caregivers. Moreover, younger children themselves seem to be risk prone due to their developmental stages and not being able to fully gain their autonomy in various aspects of their lives. Adolescents, on the other hand, have more autonomy, but along with peer-effect in their daily lives, mothers are still worried about their well-being. However, through the literature mothers are overwhelmingly treated as a source of data in studies focusing on children's well-being, not mainly on the mothers themselves. For instance, after 9/11 a number of studies with mothers as participants aimed to learn about their children's indirect traumatization or reactions (Philips, Prince & Schiebelhut, 2004; Fremont, Pataki & Beresin, 2005; Becker-Blease, Finkelhor & Turner, 2008; Prefferbaum et al, 2015). In this study, mothers were selected as the mothers of younger children and adolescents. Additionally, mothers' perceptions on their children's responses were also taken for two reasons (1) They have developmental differences in terms of cognitive capacities and responses (2) As indicated autonomy, especially in adolescents, has both individual and cultural dimensions and since familial relationship is important in Turkey, parent-child interaction may affect the autonomy development in children (Özdemir & Çok, 2011). Thus, in terms of implications, this research might address different mother profiles, in terms of their children's age.

Finally, this present research is important from a culture-sensitive psychological counselling perspective. As the issues and the therapeutic relationship is affected from the culture, it was recommended to test the literature within Turkish culture (Erdur-Baker, 2007). As a result, this present study would have implications for the Turkish practitioners, policy makers and scholars to deal with the terror-trauma and stress within Turkish cultural context.

1.4. Research Questions

In this present study, as the research methodology, the qualitative analysis were chosen, since it enables to researcher to interact and explore perceptions from a holistic approach (Yıldırım, 1999). Therefore, in this present study 21 mothers of 3-15 years old children were interviewed about their own reactions as well as their children's reactions to the terrorist attacks and their concerns related to their children within this context. As some mothers had more than one child and their concerns might have changed regarding each child; mother-child dyads were added, revealing a total of 30 dyads. Preliminarily the nature of mother-child relations had been elaborated to know the participants and to make sure that the sample is of mothers with normal profile and mother-child characteristics. Overall, the interview questions correspond to four main aspects of these relations;

(1) What are the mothers' experiences with terror, especially with the recent terrorist attacks occurred in Turkey since 2015?

(2) Based on mothers' testimonies, what are the children's experience with terror, especially with the recent terrorist attacks occurred in Turkey since 2015? How do mothers respond to their children's terror responses?

(3) What are the mothers' concerns over terrorist attacks?

(4) How does mothers cope with these concerns due to terrorist incidents they experienced?

Therefore, by the systematic content analysis of the interviews, a deeper insight into the mothers' experiences were attained to answer the questions given above.

1.5. Definition of Terms

Disaster: Ranging 'from natural events such as hurricanes or earthquakes, to human-caused incidents such as mass shootings or terrorist attacks, are typically unexpected and overwhelming.' ("Disasters", 2017, para.1) They may take emotional charge and people mainly respond by intense and unpredictable feelings, psychosomatic symptoms, trouble in cognitive abilities like concentrating and decision-making. ("Disasters", 2017, para.2)

Trauma: Trauma is an 'emotional response to a terrible event like an accident, rape or natural disaster' generally accompanied by immediate 'shock and denial' and long-term 'unpredictable emotions, flashbacks, strained relationships and even physical symptoms like headaches or nausea.' ("Trauma", 2010, para.1)

Terrorism: "The unlawful use of violence and intimidation, especially against civilians, in the pursuit of political aims." (Oxford, 2017, para.1). Terrorism causes terrorist attacks, which are human-made disasters, triggering the disaster response reactions in individuals.

Coping: Coping is defined as a process protecting individuals from psychologically being harmed, by eliminating the problem or dealing with its emotions (Pearlin & Schooler, 1978).

Overall, this present study aims to shed light into the experiences, concerns and coping of mothers. Such insights are important as the mothers are traditionally risk-prone in terms of terror-trauma and stress. Additionally, they are the primary source of information and comfort for their children in such cases. This thesis would end with the discussion of the findings from the Turkish case, and implications for mental health professionals, public policy makers and the future researchers.

CHAPTER 2

REVIEW OF THE LITERATURE

Unfortunately, the world is going through many catastrophic events like different types of natural disasters, fatal epidemics, poverty, wars, terror, and forced immigration. Some of those seem like a single time event, while others like wars, and terrorism continue over a course of time. Therefore, for societies and the individuals, there seems to be a need to find ways to deal with the negative outcomes of those as much as possible. Because, most of the time preventing these disasters might not be very possible. Thus, they pose risks and threats to our everyday lives, of which we need to be aware both as individuals and professionals.

As it was mentioned, there are a number of different ***traumatic events***. These were generally categorized as natural disasters (earthquake, storm, flood and so forth) and the human-made disasters (rape, wars, terrorist attacks and so forth), and the latter category is considered as causing more psychological disturbance to people (Abo & Zalsman, 2003; Mathewson, 2004; Abu-Ras & Abu-Bader, 2008). Since, the focus of this present thesis is the recent terrorist attacks in Ankara and Istanbul, which occurred since 2015, human-made disasters will be introduced more throughly. For instance, one of the most well-known terrorist attacks in the contemporary world history smashed down World Trade Center, Manhattan, New York in September 11, 2001- the 9/11 - and had a huge impact on psychology, sociology and politics domains. The event's impact on the general society (including all subcultures) is stated by Abu-Rass and Abu-Bader as the following:

> Traumatic events often have a devastating impact on individuals' health, community stability, and general ability to function. Psychological responses to human-made disasters, such as terrorism, are varied and usually cause intense fear, anxiety, isolation, stigmatization, and withdrawal. The 9/11 attack has left a severe impact on the entire U.S. population, regardless of ethnic and religious

> background. It has caused the loss of thousands of lives, and psychological and social disruption for millions of others (Abu-Ras & Abu-Bader, 2008, p.232-3).

Moreover, the prominence of the 9/11 tragedy underlies the fact that it affected both New Yorkers and the nation through shaking their sense of security. Baelo-Allué (2012) mentions the narrative/fiction written in post 9/11 period, and argue that they addressed two types of traumas as personal/psychic and collective/cultural, as it wounds not only the ones that are directly exposed but the nation's sense of identity due to its tragedy. Similarly, Janoff-Bulman and Sheikh (2006) claimed national collective trauma leaded to societal/political responses like moralization, social order, social control and restrictions. In addition, the feeling insecure response in such events can be argued to affect both individual and collective norms. Therefore, the literature after 9/11 will be helpful to understand the psychological effects of terror traumas on people, along with the literature on Israel-Palestine conflict, offering ways to analyze the Turkish case, which will be elaborated later.

Before proceeding to the effects of such traumatic events on mothers and children, their concerns and coping, we need to make the point that not all traumatic events turn to psychopathologies or need to be answered by the mental health professionals. One of the reasons for that, may be the fact that most of the time, people themselves use their different resources to adapt to different situation. Thus, here the American Psychological Association (APA) definition of trauma is important as it was given as an 'emotional response to a terrible event like an accident, rape or natural disaster', generally accompanied by immediate 'shock and denial' and long-term 'unpredictable emotions, flashbacks, strained relationships and even physical symptoms like headaches or nausea' (Trauma, 2010, para.1). The definitive paragraph continues with asserting that these are normal reactions and psychologists generally offer help to the ones who cannot continue their lives as normal (Trauma, 2010).

McFarlane, in his 1995 book chapter *The Severity of the Trauma: Issues about its role in Posttraumatic Stress Disorder* examines the transition from trauma to psychological disorder: That transition is affected by a number of factors like; other life events, biological traits, individuals' past experiences, personality, family history, support,

environmental responses and coping styles (McFarlene, 2011). Moreover, the exposure levels of the people might also affect as a hypothetical hierarchy of the traumatic components from mild to severe exposure, can be listed as 'awareness of destruction and loss', 'safe by change and guilt', 'duration of exposure', 'absence of control', 'risk of injury', 'panic', 'dissociation', 'threat to life', 'actions during the event', 'witnessing injury', 'actual injury', 'seeing death' and 'survival by freak circumstances' (McFarlene, 2011, p.42).

Therefore, the effects of terror attacks like stress and trauma needs to be dealt with mental health professionals, since it may transit to psycho-pathologies. In order to understand these effects on mothers, this present phenomenological study elaborates their responses, concerns and coping. Because, learning about the non-pathologized cases in such collective traumas might help the mental health professionals like pyschological counsellors, school psychologists, social workers and so forth to understand their clients with terror-related problems better. This way, they might help their clients to increase their resources and cope better with terrorist attacks. The related literature needs to be covered before proceeding to the study is as the following: (1) Literature on terror as a human-made disaster and its effects on human psychology; (2) Responses of mothers and children to terror-events; and finally (3) Concerns and coping of mothers in terror-inflicted societies.

2.1 Terror as a Human-made Disaster and Its Effects on Human Psychology

In his rather philosophical article, "Why does terrorism terrorize?" Zelic Freedman (1983) argues for a model of id-superego clashes "based on the public perception of a terrorist as being uncaring, vengeance-oriented, and single-minded in his aggressively" and the "randomness and unpredictability, infusing in their victims an extreme anxiety and an awesome sense of the uncanny" (p. 389) Even though his model should be discussed from the psychoanalytical perspective, his list of public perceptions seems quite right. Mainly used as a political medium, terrorist attacks are the disasters that inflict 'terror', 'confusion' and 'distress' in a society. Therefore, as it is suggested, all aspects of the political entity, such as "government and their military, public safety workers, and humanitarian aid workers are usually asked to reestablish order from the

chaos in the post-event period." (Stamm, Tuma, Norris, Piland, Van Der Hart, Fairbank, Stamm, Higson-Smith, Barbanel & Levant, 2004, p.149).

Nevertheless, it is not only the government who needs to re-establish the order from the chaos, as we, individuals need to deal with the chaos in our own psychology caused by the terror disasters. Kirschenbaum (2006) says like all other disasters, we adapt for terror by thinking about its threat and consequences. In his study of Israeli society, he models eight factors of adaptation like avoidance, religion, professional help, insurance, information, future plans, coping and protective actions, to mentally accept the fact and continue with their lives (Kirschenbaum, 2006). However, that is not always an easy task, as Klar, Zakay and Sharvit (2002) claimed after sequential terrorist attacks, the nationwide study of Israelis revealed a severe 'realism', instead of any 'optimistic illusions', in which they named their article after the words of a bus driver "…, if I do not get blown up, I will meet you at Dizengoff Center in about forty-five minutes" (p.203).

2.1.1 Non-clinical responses to terror: community and the individual

Based on the literature of terror and human psyche relationship, especially derived from the USA and the Israel, fear and risk perception, collapse of the sense of security and lastly stress and coping seem to be the main concepts affecting the public. Fear and risk perception is an important one, since from an evolutionary psychology perspective, it is what leads to our common fight-flight-freeze response, with a slight change of the nature of threats: today's true alarms are not a dangerous animal attack, but rather accidents and explosions (Zayfert & Backer, 2007).

Thus, after 9/11, not only the American public but also many other people around the world become familiar with a new modern threat as ***urban terrorism***. As Aly and Green's qualitative study of the Australians indicate without the actual terror risk profile, after 9/11 they also started to fear and tried to develop counter terrorism strategies as a community (2010). As describing fear as an intense response to threat, Aly (2011) link it to insecurity. However, this insecurity might also affect things beyond the well-being of the individuals: Aly concludes the fear of terrorism is a community fear and Australian Muslims also associate it with community identity as they are the

ones that the society fears. Thus, in an earlier study Aly and Balnaves (2005) name it as the 'fear of fears', such as being identified as a potential terrorist or person of interest which was pampered by political climate and media. Thus, they claim an "other" was created and harms the collective identity of Australia (Aly & Balnaves, 2005). However, when that other is perceived as an external one to the society like the Israeli-Palestinian case, it may enhance the group identity, and help individuals to cope. For instance, in one study it was found that the Palestinian children and youth believed they were victimized, had patriotism and collective hope dynamics (Nasie & Bar-Tal, 2012). That is in line with an earlier argument that how the conflict and terror is perceived has a greater impact on the society than the military, political or economic events' own realities (Bar-Tal & Jacobson, 1998).

Therefore, we need to focus on the perceptions, emotions and ***responses of terror*** to understand the clients and the community they live in. First of all, the common responses to terror trauma should be introduced. Mathewson (2004), emphasizing the previous literature indicating human-made trauma is more disturbing, focusses on the four types of reactions indicated by Deployment Health Clinical Center:

> (1) Emotional reactions: temporary feelings of fear, shock denial, grief, anger, resentment, guilt, shame, helplessness, and detachment from significant others in their lives. (2) Cognitive reactions: confusion, indecisiveness, worry, disorientation, difficulty remembering and concentrating, shortened attention span, self-blame and unwanted memories. (3) Physical reactions: tension, nausea, bodily aches and pains, change in libido, nervousness, sleepiness, insomnia, hyper-arousal symptoms like rapid breathing, sweating, being easily startled, and panic attacks. (4) Interpersonal reactions: distrust, irritability, withdrawal, isolation, feelings of abandonment or rejection, being judgmental, over-controlling or distant (Mathewson, 2004, p.200).

Additionally, ***constant distress*** caused by these societal issues needs to be taken into consideration while thinking about the responses. When the distress within the Israeli society was studied after the continued attacks, it was found that 39.6% of the population had seen security situation and terror attacks violence and its implications as the most important problem in causing distress, even higher than the economic situation which was 26.1% (Bleich, Gelkopt, Malemed & Solomon, 2006). This is not a surprising result as the security is a vital need for the human beings and both violence

and economy threats one's security: first one does it directly through claiming lives and the other through threatening the access to food.

Moreover, we need to take ***age and gender differences*** into account. Even though the whole society is affected from these issues, younger people and women sometimes have their own characteristic responses. For instance, younger people (children and early adolescents) developmentally may not understand the concept of terror and terror threat as adults:

> Children may benefit from interpretation and assistance with appropriate generalization of experiences. For example, a child may not understand statistical probability of an event or the geographic proximity of danger in the same way as an adult (Stamm et al, 2004, p.155).

On the other hand, women were also suggested to be more psychologically prone to security issues and threats than their male counterparts (Bleich, Gelkopf, & Solomon, 2003; Bleich, Gelkopf, Melamed, & Solomon, 2006).

The last discussion of adult responses to terror trauma would be on the positive psychology concepts like resilience and post-traumatic growth. To begin with, resilience, which etymologically comes from 'bouncing back' is defined as "the process of adapting well in the face of adversity, trauma, tragedy, threats or significant sources of stress — such as family and relationship problems, serious health problems or workplace and financial stressors" ("The road to resilience", 2010, para. 1). Besides the term *resilience* is considered as a dynamic process combined of multiple personal and environmental systems (Masten, 2015). Therefore, understanding it in relation to responses to terror events and familial relationships is important.

Resilience is an important concept in trauma literature, and especially for the psychological first aid practices, as it can be utilized in disaster response to help the affected ones (Uhernik & Husson, 2009). Moreover, according to *Psychological First Aid Field Operations Training Manual* psychological first aid should be consistent with the literature on risk and resilience following trauma (Uhernik & Husson, 2009). Here, the risk and resilience part is important, as the ones who are indirectly traumatized by

indirect/from distance exposure of such events including the media images, might not fall into the category of people who are able to get psychological first aid.

Butler and colleagues' (2009) study, on psychosocial predictors of resilience (like cognitive and emotional responses, coping abilities and social support) with those who are not directly affected with 9/11; argues that resilience and greater psychological well-being is correlated to less media exposure, higher educational attainment, less changes negatively in the worldview, less emotional suppression, less denial and self-blame along with larger social networks, active coping, more emotional and less instrumental support-seeking behaviours, lower distress (Butler, Koopman, Azarow, Blasey, Magdalene, DiMiceli, Seagraves, Hastings, Chen, Garlan, Kraemer & Spiegel, 2009). However, another large N telephone survey study with 52,752 respondents of New Yorkers six months after 9/11; showed that resilience is also very high with the adults who were having PTSD symptoms and shake the belief that resilience is observed in the heathy, non-depressed individuals after a traumatic event (Bonnano, Galea, Bucciarelli & Vlahov, 2006).

Therefore, resilience is an important concept for understanding the responses/reactions of mother's when facing to a life adversity, like the terrorist attacks in this present thesis and/or the stress caused by the terror events. Because, it combines personal dimension (emotions, behaviors, thoughts etc.), as well as the environmental system (i.e. family, children, locality etc.). Nevertheless, understanding the resilience may require researchers to understand the context and culture as well. For instance, from a cultural psychology background Tummala-Nara (2008) combines trauma and resilience studies as indicating that previous studies conceptualized resilience as a rather individual personality trait and coping style, however there are a number of social and cultural resilience factors present for different cultures. Thus, this present study might help us for understanding of Turkish mothers' responses and shed light to pieces that are similar or different from the Western and the Israeli literature.

Spirituality, turning to faith to cope with post-traumatic disturbances is another common response that is also supported with large N studies like Meisenhelder and Cassem (2009) survey with 5,231 participants from Massachusetts and 558 participants from NYC or McIntosh, Poulin, Silver-Cohen and Holman (2011) survey with 890

participants. That is also mentioned in *post-traumatic growth* research as Ai, Cascio, Santangelo and Evans-Campbell (2005) investigated the hope-spirituality link with quantitative analysis of 457 students' surveys' and qualitative analysis of 313 students' open-ended question responses. Three months after the 9/11, their findings indicated their perceptions, relationships, world-views and political views were changed. However, Peterson and Seligman (2003) claimed that for the secular ones such a search of spirituality was not the case. Nevertheless, some sort of spiritual awakening like reconsidering the meaning of life or justice-injustice issues and a significant potential of spiritual meaning in terms of empowering people (Ai et al, 2005). On the other hand, post-traumatic positive growth (and positive changes about ones' own cultural worldviews and belief system) can also be affected from the distant attacks, as it was in the case of British people perceiving 9/11 as a threat to their own values (Linley, Joseph, Cooper, Harris & Meyer, 2003).

Butler and colleagues, in their large N internet based survey of 1505 participants after 9/11, showed that initially high post traumatic growth was rather associated with higher traumatization, more denial, more positive worldview changes and less disengagement, however, as time passes they start to decline, except for the spirituality subtitle. They continued to exist with the follow up post traumatic growth only with a decline of the trauma symptoms, and coping strategies of active coping and planning was more related to new possibilities but less related to relating others and spiritual change, which was interpreted by authors as participants' attempts to find meanings (Butler, Blasey, Garlan, McCaslin, Azarow, Chen, Desjardins, DiMiceli, Seagraves, Hastings, Kraemer, & Spiegel, 2005).

Another study after the 9/11; taking positive growth, resilience and the role of positive emotions into account proposed that positive feelings like gratitude, interest, love and so forth will help to improve resilience and post-traumatic growth (Fredrickson, Tugade, Waugh & Larkin, 2003). Moreover, in a post-traumatic growth thesis written in METU (Arıkan, 2007) worked with 321 Turkish university students, coping styles affected post-traumatic growth and was significantly higher in females. Therefore, we may take subtitles like resilience, spirituality and post-traumatic growth into account while trying to understand the coping mechanisms of the mothers we would study.

2.1.2 Trauma, clinical responses and PTSD

The term ***trauma*** became even more popular in psychology and the social sciences especially with the popularity of diagnostic ***Post Traumatic Stress Disorder (PTSD)*** concept of early 1980s (Afuape, 2011). PTSD had been found with various names through the history and more than 10% of people experience it throughout their lives (Cantor, 2005).

Moreover, PTSD is also related to the perception of events, situations and circumstances, as how an event is perceived is also an important dynamic as mentioned before. Thus, as Afuape puts, trauma and its aftermath is not a private experience, as the surrounding society always interferes in many ways (2011). He also argues what is traumatic in one culture might not be such in another one, since cultural expectations, social norms, rituals and attitudes play a role both in traumatization and recovery (Afuape, 2011).

Similarly, PTSD is more complicated as, Cantor (2005) argues no pure PTSD can be found as there are confounds like loss and depression. However, as it can be found through Diagnostic and Statistical Manual of Mental Disorders (DSM) and animal studies; fear, unpredictability and uncontrollability of shocks are related to PTSD. That way, we may presume wars and terror also have a nature that might lead to PTSD symptoms due to their unpredictability and uncontrollability.

In addition to that, many traumatic events including the human-made disasters result from external factors, such as atrocities, wars or other individuals and figuring out the origin/reason of the event might be problematic or interfere with the individual's adjustment in a negative way (Afuape, 2011). As McFarlane (1995) puts most of the time we underestimate the link between stressor and the PTSD for political, social or cultural reasons. That might be the reason why most of the time traumatized individuals are held responsible for their responses and own healing processes, as the importance of the surrounding climate is ignored. For instance, in the Israeli context of exposure to terror around 44 months, telephone survey with 501 people revealed that women and ethnic-Arabs, the ones having a life-threatening experience, or major loss, ones with

low sense of safety and social support reported more PTSD symptoms (Bleich, Gelkopt, Malemed & Solomon, 2006).

Nevertheless, showing post-traumatic stress disorder symptoms after the attacks do not necessarily mean that people get psychologically ill for a long time. Laugharne and colleagues in their study found that even though most population showed PTSD symptoms after 9/11, most indirectly exposed ones soon normalized (Laugharne, Janca & Widiger, 2007). Therefore, as it was also put by Herbert (2002) in her self-help book for trauma survivors and their families, not all people need to receive psychological help to recover, not everyone's phase of recovery is the same, and even getting the support from one's own social network and talking to accepting family and friends can prevent one to develop a serious disorder. She also continues that the things we consider as related to the traumatic event might lead us to take precautions and cause anxiety but these as well as sleep problems would diminish as time passes and one heals. However, the healing process is not free from the type and intensity of the trauma, the responses one gives to them, previous experiences, coping strategies and abilities as well as the environmental support one gets (Herbert, 2002)

Thus, the profiles of people and ***the risk factors*** for developing negative post-traumatic responses somehow dominates the literature. For instance, within the terrorist attacks disaster experiences, witnessing attacks, having someone close killed, fear of death of injury, losing job, home or other financial means were argued as risks (Galea, Resnick, Ahern, Gold, Bucuvalas, Kilpatrick, Stuber & Vlahov, 2002). In addition to pre-disaster psychopathology, loss and injury Stamm and colleagues also cite female gender as a risk factor to develop more PTSD (Stamm et al, 2004). In line with that, the population who were under risk of PTSD even five years after 9/11 was the women, the ones with direct exposure, low income and education, people with low social support and high-media exposure and previous illness and drug use (Laugharne, Janca & Widiger, 2007).

Most of these results are also supported with the post-9/11 literature, especially checking the interactions of these symptoms with the risk factors. For instance, Nader's (2001) paper indicate guilt as another common response, Jehel and Brunet (2004)'s longitudinal studies shows the PTSD, coping mechanism, anxiety level and emotional

states relation with the direct victims of the France attacks and Hobfoll and Galea (2006)'s study argues the resource loss (the change that happened) is important in PTSD, depression, traumatic growth and so forth.

Another study based on the analysis of post-9/11 national data (n=2,240) suggests age differences: younger adults like 18-29 and 30-44 groups have more distress, post-traumatic stress than older adults whereas the older adults showed more fear of the future attacks (Scott, Poulin & Cohen-Silver, 2012). Since it was rather a quantitative database, the authors slightly mentioned that the role of concern about family members might be an issue especially for those who are younger, which is consistent with the research question of this present thesis (Scott, Poulin & Cohen-Silver, 2012).

Consequently, the risk factors of these mainly large-N studies were gathered together as the following: 'female gender', 'younger age', 'immigration status', 'low education', 'moderate religiosity', 'income loss', 'prior exposure to traumatic life events', 'proximity', 'ongoing sense of threat', 'lack of social support' and 'coping by means of avoidance, denial and disengagement' (Gelkopf, Berger, Bleich & Cohen-Silver, 2012, p.758).

Another evidence is taken from the Turkish context, as 2008 Diyarbakır terrorist bomb attacks indicated that the risk factors for PTSD change from having psychiatric history and being directly exposed and physically wounded in the first month to having psychiatric history only on the third month (Eşsizoğlu, Yaşan, Bülbül, Önal, Yıldırım & Aker, 2009).

Similarly, another large N study by DiGrande and colleagues, in 2003-4 with 11,037 adults living in New York City, Manhattan; argues that traditionally at-risk populations like older age, females, low SES people, divorced people, the Hispanics, the ones who witnessed horror have higher risks of developing chronic PTSD (DiGrande et al, 2008). Moreover, for women risk group based on the literature DiGrande and colleagues argue their caregiving role is another stress factor (2008). This last comment about the caregiver-middle aged adults is also in line with Baca and colleagues' findings indicating within the indirect victims of the terrorist attacks in Spain, parents and

spouses are more affected than children and siblings (Baca, Baca-Garcia, Perez-Rodrig & Cubanas, 2004).

Upon mentioning risk groups, another point to take into consideration about PTSD is the role of ***complex traumas***. The ones having complex trauma have several forms of traumatic experiences like childhood victimization, neglect, abuse, repeated and intense exposure to adverse events, identity-based traumas and discrimination, that keep them always in the survival mode (Courtouis & Ford, 2013).

In addition to those, ***taking culture and context*** into consideration especially when studying PTSD is important. Nicolas, Wheatley and Guillaume in their 2014 article conclude that while applying PTSD to other cultures, both researchers and practitioners should be conscious and critical: They should also take into account other psychosocial and cultural dynamics like "the impact of the critical incident on the society, government, local community, families, natural resources, and other institutions." (p.42)

As it was implied, the literature on PTSD and dealing with the patients with PTSD is quite broad. Even though this thesis does not deal with the PTSD patients, it had the necessity to introduce these concepts from the clinical psychology/psychiatry studies since seeing the whole picture is important for the professionals. Moreover, the link between personal and collective truma is given as it can help the professionals to address both individuals and the society (Summerfield, 1995).

In summary, traumatic events like war and terror have many clinical responses, the most famous of which is PTSD. However, none-existence of PTSD does not mean that the individuals are not distressed or traumatized; but rather the trauma did not turn to the disorder due to various factors. Therefore, the previous research on PTSD and the risk factors for developing it would help the audience to understand the mechanism and the groups which are in greater risk.

2.1.3 Collective traumas

As mentioned above, human-made disasters like war and terror are not free from societal and political dimensions and may interfere with the collective identity. It may

also lead indirect affects through this identity part and the risk perception. Moreover, collective and individual traumas might be interrelated, and collective traumas might be transmitted through communication means to create more individual traumas. Because, in collective traumas, the individuals within a society feel themselves connected even if they did not experience the traumatic event themselves (Shipilova, 2014)

Among the human-made disasters causing collective traumas, the most famous and relatively recent case is the 9/11. This frequently studied event had traumatized over 100,000 people who directly witnessed it in Manhattan, New York and countless others through media, and by different reminders such as news images, rumours about other attacks, increase in the visibility of security forces and so forth (Brow, Cohen & Silver, 2009). In other words, 9/11 and its media images caused both individual and collective traumas and increased people's perception of terror risk.

Moreover, the role of culture and national sentiments should also be taken into account as USA was not the only country experienced such a tragedy. On the other parts of the world, also collective traumas have been experienced. Japan's WWII atomic bomb experience (Shipilova, 2004); Holocaust trauma narratives recreated in the Israeli context (Alexander & Dromi, 2011), Latvia trauma of 1940s due to Stalin which was re-created during 1990s and 2000s (Procevska, Kaprans & Uzule, 2011) were examples of collective traumas. They had also turned to narratives, transmitting the traumas across time and space. In other words, the collective traumatization might turn into a historical chosen trauma, through narratives, intergenerational transmission and national sentiments (Volkan, 2001). Thus, in our case, one of the frequently mentioned terrorist attacks of 15th July coup attempt, might lead us to take the concept of collective trauma into account, through news, official narratives, curriculum responses and families' own experiences.

2.2. Psychological Responses of Mothers and Children to Terror

As mentioned in the above sections, women and children are traditionally considered as a higher risk group in terms of being affected from the traumatic events and development of PTSD. There are also studies where the women's health, including the genealogical health is affected from the stress in terror-inflicted societies, even if they

do not draw a clear causation link (Cwikel & Segal-Engelchin, 2005; Chaaya, Bogner, Gallo & Leaf, 2003; Glover, Novakovic & Hunter, 2002). However, selecting the mothers as the population is important not only because of their risk-prone nature, but also because of their role in affecting their children's behaviors. Children, who most of the time read the cues from their parents to figure out what is going on, might mimic both anxiety and resiliency of their parents. Moreover, to understand this role transmission between mother and the children, using systemic approaches was suggested (Goodman, 2013). In this present section, the literature on mothers' and children's responses to trauma will be presented.

2.2.1. Responses of mothers

As mentioned, not all traumas need to turn to a clinical case like PTSD and not all people who experience a traumatic event or disaster are affected as same. For instance, a study with Israelis suggest that the habituation process and coping mechanisms might be related to their participants not developing high levels of PTSD, despite still having distress and loss in terms of sense of safety (Bleich, Gelkopf & Solomon, 2003). Different intervention strategies and attempts to address different groups accordingly to their characteristics is recommended by the mental health professionals (Foa, Cahill, Boscarino, Hobfoll, Lahad, McNally & Solomon, 2005). However, the other way around, not all individuals who are traumatized by an incident are the ones directly exposed to it. For instance, many young Australians' death in a terrorist bomb attack in Bali was also a shocking, horrifying event that leaded to anger and grief also for those who were indirectly affected from the traumatic event (Raphael, Dunsmore & Wooding, 2004). Since, mothers are no different from other adults in terms of being traumatized by various disasters and giving the adult responses mentioned previously. Therefore, here, mother's role as the caregiver and their responses to terror disasters would be the focus.

Even though the literature on the ***caregiving*** role uses *parental reactions* term to be on the safe side, culturally mothers are traditional caregivers in the Turkish society. On the other hand, some earlier research argue that children's and adolescents' levels of stress are differently affected from mothers and fathers level of stress; as they were more likely to internalize fathers' distress and problems and the end results were affected from

mothers' coping styles and roles (Agaibi & Wilson, 2005). Similarly, in another study challenged the fathers presumed inferiority in reading and responding to the children's need during traumatic events, due to their traditional roles: Verhoeven (2012) analyzed father-child interaction of refugee and asylum seeker families and claimed fathers are not any worse than mothers in terms of parental caregiving. Another data challenging the traditional view is Fairbrother, Stuber, and Galea (2003) large N comparison of parents to non-parents and their results indicated that parents and non-parents did not differ greatly in terms of their post-traumatic stress, depression or other adversaries, whereas single parents compared to two-parent households were more vulnerable and more likely to experience stress, depression and adversaries.

Nevertheless, these research tell us about the scientific findings challenging mothers' presumed superiority in affecting the children and higher risk of facing adversaries, but not the perceptions of the mothers. In a cultural setting where mothers are thought initially as the primary caregivers; mothers' own perception of self as the main source of comfort for their children might affect their own abilities to cope with the terror trauma. Therefore, asking mothers also about their roles in their children's life and ability to emotionally respond to their children, in comparison to the father's role and ability might have some significance. This is also the reason to test these relations in cultural context and with a qualitative study.

Moreover, mother-child interaction studies on terror mainly focus on the caregiving role of the mother and emphasize the role of parents' psychologies in their children's reactions whether it is natural or human-made disasters (Gil-Rivas & Kilmer, 2003; Hamblen, 2002; Lee, Isaac & Janca, 2002). For instance, in severe cases like direct war traumatization of mothers in Kosovo war case, as Almqvist and Broberg (2003) put mothers were not able to respond their children in accordance with what their care-giving roles required. Therefore, their traumatization negatively affected their care-giving abilities and previous mother-child attachment (Almqvist & Broberg, 2003). Such cases have empirical evidence as Nomura and Chemtob (2009) indicated that the mothers with PTSD and depression after three years of 9/11 had children who had more aggressive, emotionally reactive behaviours and somatic complaints, even in preschool level. Similarly, Elbert, Schauer, Schauer, Huschka, Hirth and Neuner, (2009) mentions

such a damage to self and self-being-together-with-child perceptions that would eventually lead to mothers' care-giving problems and inability to perceive themselves as protective. For some, such harm to parent-children relationship, including negatively affecting their sense of attachment and not offering the responses they need and leading traumatization of children is related to parents' stress and the genetic factors (Kaitz, et al, 2009). Based on these theories Scheeringa & Zeanah, (2001) claim, especially when the preschoolers are considered, trauma of their mothers might be conveyed to them in various ways, roughly like a) traumatizing the child by not responding to their needs as the caregivers and affecting the relationship, b) conveying the trauma itself, distress and emotional difficulties to child who was not traumatized on its own, and c) both mother and child being affected and traumatized from the same event and increasing each others level of distress.

However, these interactions are not free from ***children's traumatic experience***s. Henry, Tolan and Gorman-Smith (2004) argued, direct exposure to trauma had more long-lasting symptoms even though it did not lead to physical injury or lost and this can lead to behavioural problems in children. Therefore, in an exploratory study, learning about the experiences of the children is necessary. However, the real necessity for studying children's traumas for Masten and Narayan (2012) is to find strategies to protect them and strengthen their resiliencies. The notion presented by Chrisman and Dougherty (2014) indicating the children's resilience is more dependent to their caregivers: therefore, the caregivers' stress might lead to anxiety, depression, interpersonal/social and academic problems in children; which was also put as loss of developmental and psychosocial gains by Pine and Cohen (2002). This might be the reason of why many researchers tried to work with parents by having children in mind. Moreover, Kerns and colleagues (2014) in their survey study of 460 families with children between 4-19 ages old in Boston area, up to six months after Boston Marathon bombing of 2013, found that highly distressed parents' children had more post-traumatic stress and conduct problems (Kerns et al, 2014). However, as the authors claimed, it is not always easy to draw direct links or causality between these two. Thus, it is another reason for the qualitative analysis proposed in the study, as most of these studies mentioned are quantitative in nature, they offer little explanation, in terms of answering why and how

questions. Therefore, I believe, this thesis of the qualitative nature would be better for clearing up such a case.

As mentioned before, such studies on how both parents and children react is the dominant ones in the literature. For instance, Laor, Wolmer & Cohen (2001) studied 77 children-mother dyads around 2.5-5 years after the SCUD Missile Attack and the results indicated that childrens' (especially younger childrens') symptomatization is correlated with mothers' psychological profiles: the post-traumatic problems of children intensified as the mothers had poor competence to relate securely, poor skills in coping with external and internal stress and poor behavioral expression of their symptoms. Drawing on the maternal psychological health and young children profile, Feldman and Vengrober (2011) worked with 232 Israeli children between ages 1.5-5 years, and among 1/3 of them were controls whereas others were either living in Gaza or exposed to similar terror-trauma: The results were again similar to the previous studies as reassuring the correlation between maternal PTSD, depression and anxiety with children's as well as arguing mothers level of exposure and PTSD is determinant in child's avoidance. Moreover, mothers' well-being, sensitivity, responsiveness as support helped the children to build resilience and have less symptoms.

Nevertheless, Henry, Tolan and Gorman-Smith (2004) argues that those trauma-related symptoms are not lasting effects, based on their study compared families, each approximately 100 days before and after the 9/11 terrorist attack, and found no differences in terms of anxiety, depression and feelings of safety. However, the attack seems to have changed the ***parental monitoring*** and their beliefs about family, which was argued to psychologically benefit parents rather than children themselves, as decreasing mothers' anxiety levels. Thus, mothers are as active and vulnerable as the children in terms of this relationship. Similarly, Pine, Costello and Masten (2005)'s claim in such cases, the need for physical proximity is in fact a reciprocal need as it aims to release the stress and protect both child and the mother.

Such monitoring of the children's safety, in addition to distress and difficulty in separation also considered as another common parental response of the people whose loved ones died in the 9/11 (Kinsel & Thomasgard, 2008). Another post-9/11 interviews were conducted with the parents of 180 young NYC children who were five years and

younger during the course of the attacks, and indicated that children's traumas has to be considered in care-giving and family relationships context. In terms of changes in parenting, increasing parenting anxiety like worrying the future of children, probability of their getting hurt, or anxiety about separation from the child; for negative parenting like finding being a parent harder than before, having less patience with the child, and couple tension like having disagreements about residential neighborhood or different perception of terrorism threat (DeVoe et al, 2011).

However, even though there are common responses by parents, Pfefferbaum and colleagues claim that other factors should be taken into account like ***culture's role in parenting style***, cultural expectations of parents' reactions, child's attachment to parents and so on (Pfefferbaum, Jacobs, Houston & Griffin, 2015). For instance, as the authors also cited, in one of the Turkish cases studying parental distress after 1999 earthquake found differences of mothers' and fathers' impact on children's reactions, based on the expectation that fathers would be stronger (Kılıç, Kılıç & Aydın, 2011).

In terms of ***parental reactions'*** negative effects on both Arab and Jew adolescents Cohen & Eid (2007) concluded parents' discussion of the terrorist attacks, sharing feelings and limiting their daily routines like going out adds to adolescents' distress levels. However, they also have the alternative explanation that the need to discuss the attacks might have been a parent reaction to the adolescents who are already traumatized by the events, and can be thought as parents' attempt to cope with their children's distress (Cohen & Eid, 2007). Some theories even claim that parents' own psychological recovery is more important since children have emotional regulation based on their parent's emotions (Frankel et al, 2012).

Another *parents' reactions and coping* study was about elementary school children's responses to 9/11 attacks three months after the event, especially in terms of exposure to news (Phillips, Prince & Schielbelhut, 2004). Similar to the literature, also a positive correlation between exposure to TV news about 9/11 and negative reactions were found, however the authors suggest a new understanding of TV monitoring. Based on their data analysis, they argue that monitoring children's exposure to 9/11 news might be a reactionary decision of the parents who figured out that their children are negatively

affected, risking the news' becoming more salient for the children (Phillips, Prince & Schielbelhut, 2004).

Additionally, life routines are important as reducing the daily activities and routine was a predictor for post-traumatic stress. Especially, with school children and adolescents, parents' reactions in terms of maintaining the life in its routine is important. For instance, in their study with 1336 junior high and high school students from Jerusalem, Horenczyk, Schiff & Doppelt (2006) found parents' reactions like encouraging them to turn back to their life routines helped them.

Other parental reactions can be listed as parental support and the psychological control, which was important in understanding especially adolescent-parent relations. Barber (1986) puts that parental support might come in various forms like general support, physical affection, companionship and sustained contact, which differs due to sex of the child and the parent, as well as culture. Additionally, his study of 7000 Palestinian families in relation to their familial experiences of Intifada, had shown even though the support was not a changed factor due to the incident, parent's use of psychological control and the conflict with daughters increased (Barber, 1999). The reason might be the nature of the political violence experienced in Palestine is more of a humiliation that triggers the national identity and sentiments of the adolescents, and their willingness to take part in demonstrations is defeated by the parents (Barber, 2008).

There are also advices for the parents to deal with the ***traumatizing TV coverage***. Moreover, media-trauma relationship for children and the adolescents is another parental concern after post-traumas. There is also a threat of what Comer calls a 'second hand terrorism' affecting the youngsters and parents by media representations, false alarms, increasing sense of threat, insecurity and feelings of anxiety (Comer et al, 2008). Therefore, Comer et al (2008) tries to give mothers strategies to discuss the news with the children as well as increasing their own coping with the news. Lee, Isaac & Janca, (2002) also indicate that disaster related media watching of children should be monitored and parents' emotional responsiveness should be high, whereas the issue of psychological debriefing can be doubted. Mathewson (2004) claims that correct information would calm down the people as it will diminish the sense of chaos and the impacts of rumours; but especially for children age-appropriate readings of these

situations and media images should be a good step to help to rebuild the sense of safety for all risk groups. Restating the manmade disasters like terrorism causes more psychological distress compared to the natural ones Abo and Zalsman (2003) advise parents to videotape those media coverages and discuss them with their children by reacting to children's needs to stop, skip and take breaks, to deal with the negative affects.

Bassuk, Konnath and Volk (2006) indicates the ***child's post-trauma healing*** is related to the support s/he receives from the caregivers, to feel safe, secure and protected. They also suggested that children should be surrounded with a good support system including their primary caregivers, other family members, friends/peers, neighbors, guidance counsellor, teachers, pediatrician, and clergy" (Bassuk, Konnath & Volk, 2006). Therefore, the primary caregiver, mostly parents and more specifically mothers in the Turkish context, should be considered as an important part of the support system. Moreover, the resilience and coping of these support groups themselves are important, as they may assist the children for developing their own coping styles and strategies. For instance, the Israeli preschool teachers presented by Brody and Baum (2007) had developed their personal resilience theories to cope with the crisis as well as creating a comfort buffer for children. Like teachers, mothers might come up with their own understanding of resilience, personal strength, coping and assisting their children. In order to figure out whether this is the case or not, this present study would ask mothers about their personal experiences of terror events, their coping and their responses to their children's reactions.

Another study, even though it was on single-incident traumas like accidents, violence or loss, reveals that parent's well-being and child's well-being are interrelated and parents' addressing children in a responsive style (i.e. being aware and acting upon their needs) are important aspects of recovery (Alisic, Boeije, Jongmans & Kleber, 2011). Moreover, in terms of early to mid-term trauma intervention promoting hope, calming, connectedness, sense of safety and self and community efficacy were argued to be a useful way (Hobfoll et al, 2007).

According to Alpert and Duckworth-Smith (2003), to deal with the terrorist threats, post-terror trauma and such terror related issues, school consultants should engage both

preventive and post-attack interventions when necessary. These consultants also need to work the terror threat through the community by interacting with parents and fostering resilience and coping skills of both family, parents and the school staff (Alpert & Duckworth-Smith, 2003). Therefore, the issue is a great concern for psychological guidance and counselling professionals, teachers and school psychologists.

Adolescents especially with their abilities to understand death as something that might be painful and cause suffering. Thus, Clements (2001) advised parents to ask their children whether they have talked to their friends about the attacks: Because it could be a good way of transporting both parent's concerns as well as acknowledging that talking to friends is normal. However, being able to initiate such a discussion in a healthy way might require parents to take time to reflect on their own emotions, thoughts and loss. Clements (2001) also suggests that adults should face their feelings and especially in times of loss, like the loss of loved ones, or the victims, the safety, and feel the emotions of grief.

Coates and Schechter (2004) argue that it is important to "listen, clarify, support the child's attachment bonds, facilitate symbolic expression and support the child's capacity to imagine repair" as well as "helping parents to contextualize their responses, understand their child's reaction, and facilitate communication between parents and children." (p. 487)

Moreover, mothers are ***sources of help*** especially when their children need their assistance to cope with the terrorist attacks. Warria (2016) in a qualitative study with six middle-class, educated, Kenyan mothers whose children were 9-13 years old at the times of attacks, interviewed them in depth about their assistance to their children. It was claimed in the Kenyan context, the social support from family is preferred more to the professional help from mental-health workers. Therefore, the parents had a crucial role in helping the child in terms of emotions and questions. Especially, having proximity to the child, when he was exposed to attacks or its news coverage, and discussing the issues child raises supports children better. However, having traumatised themselves and still trying to respond to the child is mentioned as a complex situation by the mothers. One of Warria's participant, Goko had claimed:

> Of course, the kids see and understand and you can't really protect them from such news and you are also in shock and the first reaction from the parent, leave alone the child is feeling scared… as parents we were not prepared psychologically… everyone was in shock and sometimes it made it hard to answer questions from kids and you also ask yourself how do humans do such things [perpetrate terror attacks]. It is hard for you to answer such things and it then even tougher to rationalize such things to children (Warria, 2016, p. 415)

In this paper on mothers' attempts to help their children to cope with terrorist attacks in Kenya, Warria (2016) claims mothers tried to address their questions, create a sense of safety for them, monitor their media exposures, challenge their misconceptions, indicate that bad things might happen in life, help them to build resilience, and keep their routines continue, as a successful way of assisting their children. After 9/11, the Islamophobic stigmatizations like *Muslims are terrorists* rised and became reflected in the popular culture (Awan, 2010) and it had also affected the Arab-muslims negatively (Abu-Rass & Abu-Bader, 2008). For that reason, especially parents' challenging their children's misconceptions like the Kenyan mothers did in Warria's case might also lead to a faster societal recovery.

Dekel groups mother's responses to traumatic events studies into two: (1) the ones about the relationship between mothers and children's responses and (2) the studies only explored mothers' responses, having less studies. Moreover, Dekel claims that except Shamai's 2001 article, the literature neglected the mothers' own experiences, concerns and behaviors (2014). As can be seen, most of the studies mentioned above falls into the first category. For that second category, Dekel's qualitative (focus-group) study with 11 Israeli mothers with children aged between eight months to 12 years can be an example. This study revealed that mothers are concerned mainly on their "physical protection, emotional protection, transmission of ideology, creating of normalcy and routine, and the question of what will happen to the children if the mothers are killed in a terror attack." (Dekel, 2014, p. 24).

Keeping in mind that both papers of Dekel and Shamai is on the Israeli case in which the terror concept and durability is different from the Turkish case. This study would definitely add to the literature from the cross-cultural perspective. Moreover, Dekel (2004) mentioned of his limitation as having only college educated; middle-to upper-middle SES, left-of-center political viewed mothers in the focus group. Despite

Shamai's samples are representative of the places studied in terms of religiosity, age, number and age of children, not much is known for the SES of the participants (Shamai, 2001). Therefore, this present thesis would introduce the participants in terms of their education, work and family status.

2.2.2. Responses of the children

Unfortunately, in many countries from east to west such as Pakistan, Syria, Palestine, Israel, Central Africa, Algeria, Bosnia, Finland, Guatemala and the USA, there are many cases of violence like school shootings, wars and terror attacks in which children are direct targets and get traumatized along with their families and communities. Even though Jensen & Shaw (1993) argues that children might mitigate such effects of traumatic events with their 'self-protective adaptive cognitive styles' and their 'cognitive immaturity, plasticity and adaptive capacities' (p. 697), one needs to be aware of the reactions the children give. For instance, previous studies in the literature finds out they have various psychological responses like anger, mistrust, resignation, avoidance, depression and anxiety (Mian, 2016; Nurmi, Rasanen & Oksanen, 2012; Jordan, 2003, Berk, 1998, Barber, 2001, Al-Krenawi, Graham & Sehwail, 2004, Almqvist & Broberg, 2003; Chrisman & Dougherty, 2014; Lykes, 1994; Measham & Rousseau, 2010, Khaled, 2004, Kaitz, 2011). Based on the literature, factors affecting severity and duration of these responses was listed by Jordan (2003), as previous experiences, spirituality, psychological and physical well being and internal resources like problem solving, intelligence, resilience, talking, journallin.

Studies to provide guidelines for clinicians and parents who deal with post-traumatic reactions (esp. terrorist attacks) of children and adolescents also consider the developmental differences that infants, toddlers, preschoolers, school age children and adolescents have (Munson, 2002). The importance given to the different actors also change: For infants, toddlers and most preschoolers, educating primary caregivers and family might be a good choice. For school age children and adolescents, training of school psychologists and psychological counselling and guidance professionals is important. For instance, Abel and Friedman (2009)'s paper on war trauma of the children in Israeli schools reveal that even though family cohesion and symptomatology of parents are important in understanding stress and anxiety, for children social support

of the school is a facilitator. Moreover, other ways of empowering children and adolescents are also present, one of which is post-disaster work groups aiming to help them to gain individual coping skills, like building a sense of safety, removing sense of helplessness, understanding the grief and so forth (Malekoff, 2008). Mental and social health professionals working in schools, and mostly PDR professionals in Turkey, could also help these youngsters with such group works.

However, especially understanding younger children's responses by just asking them might be somehow problematic. It is presented that, with the younger children there is a discrepancy between their self-reports and parents' reports which may either mean (1) children did not reveal all of their reactions and emotions to their parents or (2) they simply over-report when presented with different options (Philips, Prince & Schiebelhut, 2004). Nevertheless, most scholars seem to give more credibility to parents' reports. This might explain the fact that why most child-mother studies are actually child studies based on the mothers' reports, as working with parents is more practical and might help researcher to overcome over report biases. For instance, an early study by Bates and Bayles (1984) had revealed the mothers had both objective and subjective evaluations of their children aged between six months to three years.

Since media related indirect traumatization is also an important part of this present thesis, the literature on the fears, media-induced fears and media responses of children needs to be covered. For instance, Fremont, Pataki & Beresin (2005) indicates the need to develop strategies towards children's reactions requires professionals to understand the terror related news media coverage-child psychology relationship. On the other hand, Prefferbaum et al (2015) argue despite the literature indicating the media coverage is the reason for PTSDs of children who had neither direct nor familial contact and exposure during post-9/11 period, the current DSM do not cite media coverage as a qualifying source, because of the expectation that it would not reach to clinical levels. However, indirect traumatization seems to be as important as the direct ones in many cases. As an example, the study on 3,415 Palestinian adolescents that were exposed to war/terror trauma indicated that both individual exposure (like home or body searches, being beaten by Israeli army or settlers, being arrested, tortured, humiliated, stripped or their houses being sealed or demolished) or exposures as simply observing such cases

did not differ greatly in terms of the negative affect it created on the mental health of Palestinian adolescents (Giacaman, Shannon, Saab, Arya & Boyce, 2007). Moreover, Pfefferbaum and colleagues in their study of 1995 Oklahoma City bombing, surveyed over 2000 middle school children in the city and concluded that TV images might make a small contribution to stress symptoms whereas overviewing of these might be an indicator that the child is distressed and his viewing should be monitored (2001).

In addition to that, mentioning the distress on children's psychological and emotional worlds created by unavoidable, horrifying media images of violence, war and terrorist attacks Ferrara and colleagues (2016) claim resilience is an important reaction developed by children to cope with these media flow and images. Especially, addressing the professionals, they argue media image-induced stress responses should also be taken into consideration family awareness, intra-family and general environmental support systems should be created (Ferrara, Corsello, Ianniello, Sbordone, Ehrich & Pettoello-Mantovani, 2016).

Even though previously children's reactions to violence and war coverages dominated the literature, terrorism rapidly started to enter into the picture in post-9/11 period. Since children respond differently due to their developmental age category, understanding parent-child relations according to those stages is important. Roughly, for ages between 3-5 (preschool age), separation from the primary caretaker; for 6-11 (elementary school age) children death as a result of such attacks; and for adolescents, death and injury seems to be the general issues behind their distress caused by the possibility of terrorist attacks.

Erden and Gürdil (2009) also wrote about psychosocial intervention needs of the children exposed to war trauma, indicating that all children who are either traumatized directly or indirectly through the media might develop certain symptoms according to their developmental levels. They suggest parents to learn each children's needs and symptoms to respond accordingly: For instance, as the ones who are less than three years old might cry easily and feel anxious, sleep or eating relating disturbances whereas older preschoolers and school children might have regressions, get violent, become silent, feel guilty or start self-blaming, exaggerating their fears, having concentration problems or expressing their traumas through plays. Thus, authors argue that children

need to be responded towards their psychological needs of feeling safe and secure. Older children with better verbal abilities, including preschoolers and school children, might be encouraged by parents to turn back to their routines, express their feelings by games/plays, and communicate with them, reading/telling stories. Moreover, parents respond their needs and questions, especially to deal with the uncanny nature of the events.

As the ***responses of children exposed to terrorism*** they may have more anxiety and fears, may lose their sense of safety and security, might have somatic complaints, problems about their sleep, appetite, attention, concentration, routines and abilities, and with adolescents, risk behaviours like substance abuse, suicidal thoughts and so on might emerge (Danieli, Broom & Sills, 2004). Similarly, Schonfeld (2002) also listed the terror reactions for adolescents as sleep related problems, anxiety and distress, concentration difficulties, mood changes and depression, pessimism, change of habits, regressions, substance abuse and psychosomatic changes can be seen.

Moreover, previous traumatization of children and adolescents should also be taken into consideration. According to a study in Norway using 10,220 high school students seven months after the terrorist attacks in Oslo, the previous experience to traumatic events like direct exposure to violence, witnessing violence and unwanted sex; increased the post-traumatic stress risk in both genders; but for female adolescents, proximity to the event and life threat perception also increased the perceived risk (Nordanger et al, 2014).

Nevertheless, children's traumatization might be related to their ability to understand abstract concepts and verbal material; as preschool/early school-age children and older children differs (Smith & Wilson, 2002, Becker-Blease, Finkelhor & Turner, 2008). In addition, understanding the risk perceptions and factors related to the children might be important. Becker-Blease, Finkelhor and Turner (2008) with a sample of children between ages 2-17 exposed to the 9/11 attacks, summer 2002 kidnappings and 2002 sniper shootings, indicated that more stress-related responses were given by 10-13 years old children, low SES children, ones with prior adversities and geographical proximity. Especially, perceived likelihood of being the victim and proximity are important aspect increasing the impact of media exposure.

Finally, understanding the fears of children might also help us to realize their vulnerabilities and fears about parent-child relationship. In terms of children's fears preschoolers and primary school children between ages 4-9 in both Turkish and Moldovian context indicated they fear 'parents' death' even prior to 'myself dying' (Oghii, 2015). Another study indicated within the fear of children between ages 8-18, family members and close relatives' death was one of the most common fears and terrorist attacks was also listed (Serim, 2010). Additionally, Kandemir (2011) studied 186 children aged 8-13 with their mothers about their TV-news induced fears. For both mothers and children, children who get hurt, starved, getting murdered, fire and blood are listed in the most commonly feared contents, whereas mothers perceived their children having higher levels of fears due to TV news. Moreover, in the same study, the most fearful parts of news according to mothers' reports were dead or injured human beings and animals' images and sounds, and later gun, bomb and ambulance sounds, as well as the content claiming the country was under threat (Kandemir, 2011). Therefore, while questioning whether the children was exposed to any traumatic news coverage, taking these results into account might help us for better understanding and more culture-sensitivity.

Overall, mothers and children respond to traumatic events by fear, confusion, losing the self of security and so forth. Mothers' caregiving role is important as it makes them more vulnerable to risks, but at the same time, requires them to be strong since they would assist their children. The literature on the relations between mothers' responses and children's responses is growing, emphasizing the fact that mothers' well-being and coping is affecting the children.

2.3 Mothers and the Fear of Terror

In the previous sections, terror as a human-made disaster, its clinical and non-clinical responses, its implications on individuals and the communities were discussed. One of the best summaries for terror and its psychological effects seems to be the one made by Ben-David and Cohen-Louck (2010) based on the literature:

> Terrorism is psychological warfare waged on the public mind for political gains. Its aim is to paralyze the population with fear and anxiety to intimidate and to induce a sense of vulnerability worry and concern that is disproportional to and far exceeds the actual damage it causes. Terrorists terrorize by using threats or physical actions to kill and injure innocent people. In other words, although terrorist acts injure and kill some victims, their ultimate goal is to cause a sense of fear, anxiety, helplessness and vulnerability among the general population. As a result, these acts evoke feelings of potential victimization unrelated to the actual probability of becoming a victim. The fact that terrorist attacks are unpredictable creates a perception of uncontrollability, which affects one's capability of coping with the threat. (p. 66)

Moreover, as mentioned before, mothers, are important due to their ***caregiving roles***. In fact, mothers' caregiving role itself during the course of hardship might be producing stress over their own health and well-being for not only the mothers of young children, but also for older mothers of adults. For instance, it was found that ageing mothers felt intense feelings for adult daughters with cancer and wished it had had happened to them instead of their children (Raveis et al, 2010). Moreover, aging mothers of adults with mental illness and mental retardation felt stress due to their lifelong caregiving responsibilities but different coping strategies and social support helped them to deal with it. Similarly, parents of children with intellectual disability had both passive and active coping, as well as seeking social support (Kandel & Merrick, 2007). Thus, when the terror is the case, well-being of this traditional caregivers of Turkish society might be checked with great care as it is a psychological warfare as explained above. Moreover, safety and security also needs a public willing to share their resources with the police to increase the capacity for fighting against those, as proposed by Lyons (2002). For that reason, being calm and getting the true alarms over the false ones might help the security forces to break the vicious circle of constant fear and terror.

Additionally, Dekel (2017) claimed that as a child of a Holocaust survivor and an Israeli mother, she perceives, individual level, couple and community level implications of terror trauma and resilience. She also argues that one needs to study unrecognized populations from an ecological perspective, educate students and initiate academic and professional collaborations in this field (Dekel, 2017). Here, the role of media in mother's fear of terror; concerns of mothers in times of terror and their coping mechanisms should be elaborated.

2.3.1 The role of media

The human-made disasters of war and terror might have been in the collective memories of people for a long time. As Stamm and colleagues indicate war and disaster stories have been present in the oral and recorded histories of many cultures (Stamm et al, 2004). However, it was not until the rapid development in communication technologies that could easily transfer unedited, uncensored, raw images of human tragedies; in a brutal way that no human imaginary might bear with. Moreover, ***media coverages of vivid images*** seem to have a triggering or escalating effect on indirect traumatization. The role of media in such an indrect trauma is best put by a mental health professional, Dass-Brailsford (2008) who writes in relation to her Katrina-hurricane related work:

> "Ongoing media footage of the disaster did not help me shake off the images I tried to leave behind. Although, I was quite familiar with self-care practices that assist mental health professionals in the aftermath of stressful work, my subsequent vicarious traumatization came as a huge surprise." (p.29).

Another important issue to keep in mind about the media-coverage of these collective traumas is the capacity of them to traumatize lay people who did not experience the event directly. For instance, social/health psychologist Heidi A. Wayment (2004) in her article entitled, '*It could have been me: Vicarious Victims and Disaster-Focused Distress'* revealed that college students with no direct experience of 9/11 had general and disaster-focused distress even five months after the attack. Thus, she claims that the disaster-focused emotions on collective loss like grief and survivor guilt, bases on the individual's perceived similarities and identification with the direct victims. This phenomenon of traumatization through indirect exposure to terrorist attacks through repeated news coverage, graphic media images of terrorist attacks and wars, is also supported with the large N web-survey by Cohen-Silver (2013): The US national sample 2,189 initial (for 9/11 news) and 1,322 subsample (also for Iraq War news) indicated four or more hours of exposure to those images daily bases in the first few days of 9/11 incident might predict related stress up to 2-3 years later, as if the participants were exposed to the direct trauma. A similar study to Wayment's was conducted by Ben-Zur, Gil and Shamshins (2012) in the Israeli context with 203 university students, indicating the post-attack trauma after non-direct exposure, only due to media.

On the other hand, people who had experienced or had heard of such events and crisis might try to ***seek information*** to figure out what had happened, where the media becomes an important source. In other words, as Gortner and Pennebaker (2003) in their newspaper archive study of Texas A&M bonfire tragedy, put "newspaper reports can help individuals within the afflicted community to make sense and meaning of the tragedy and at the same time represent their community's emotions and its need to assess the consequences of the disaster." (p.583). However, the same media coverages attempted to provide knowledge to clarify such crisis, might be in great detail, sometimes the images of the exact moments which turns to vivid images in the memories. Moreover, Gortner and Pennebaker (2003) also mentions that the tendency and frequency of covering a trauma/tragedy story is parallel to the way community talks and makes sense of the event, in which leads them to reflect "how such traumatic experiences are 'worked through' and resolved on a collective and cultural level." (p.583). Turning to 9/11, Pollard (2011) combines the trauma and visual representation of it, and argues these broadcasts and media coverages/photography of 9/11 lead millions feel a kind of 'by proxy' trauma due to their indirect witnessing, which was new to the trauma theory since before these modern technologies had emerged such vivid images were not displayed as frequent as it is now.

Moreover, different intervention strategies are required to address different types of traumatic experiences and various dynamic variables like culture, gender and age as well as the size of the targeted populations whether be nations, communities, families or individuals. (Fairbank, Friedman, de Jong, Green & Solomon, 2004). Therefore, outcomes of our study, is not only important in terms of the sample's gender, age and the specific circumstance of being the mother (primary caregiver); but also, important since there are different levels of traumatization inherited due to the nature of the case, which leads to media-public trauma relationship. For instance, Doka (2003) in the article "What makes a tragedy public" claims:

> The news media play a critical role in defining public tragedy. They report what happened, describe its significance, and suggest social action. Beyond these functions, the news media influence in other ways. By the very allocation of time and space in coverage, the news media help frame the perception of the tragedy. While there may be debate about the degree to which the news media shape or reflect public interest, the amount of coverage testifies to the

> importance of the event. The fact that 9/11 pre-empted regular television and radio programming and dominated the print media for days was a continuing reaffirmation of the significance of the tragedy (Doka, 2003, p. 11).

However, the impact of these vivid and traumatic graphic images is also related to widespread consumption of these news coverages. Schuster et al, (2001) indicates most people in USA (98%) watched over one hour of television on 9/11. Based on this research, Ahern, Galea, Resnick and Vlahov (2004) presume that the TV would have a role in the psychopathology after the attacks. As a result, they found that for the ones who were directly affected from the attacks or had prior traumatization; a positive correlation between television watching and probable PTSD was found (Ahern et al, 2004). Moreover, Ahern and colleagues' (2004) results also indicate that the people having no prior-experience of any traumatic events and who were not directly affected by the attacks had no probable PTSD.

On the other hand, this exposure to terror-related news coverage might be related to the need of finding meanings in the uncanny, ambiguous events like terrorist attacks or express themselves which is actively initiated by the participants, rather than being passive victims of second hand terrorism. Nevertheless, the violent images after most terror attacks seem to work for the latter. Especially, prior and repeated exposure to terrorist attacks affects some negatively and by increasing vulnerabilities. Such people may have prolonged acute stress and as mass media spreads the trauma beyond the ones that are directly exposed to it (Holman, Garfin & Cohen-Silver, 2014)

Another important fact is that mediums we use for receiving and spreading trauma news, images and sometimes rumors are not limited to TVs. Even though the media coverage is generally considered as the audio-visual images of the TV broadcasts, various studies indicated ***other types of media*** like radio, print media, social media, and repeated internet coverage of graphic images are also related to possible distress (Pfefferbaum et al, 2015). Social media, included in collective trauma and terror attacks response, is considered as a backchannel to mainstream media. For instance, Eriksson (2016) shows of 2011 Norway attacks. Similarly, student newspapers of Texas A&M of 1999, after the Bonfire Tragedy was also another channel that students expressed themselves (Gortner & Pennebaker, 2003). Another study by Jain (2010) on post-9/11 blogs, claims that the blogging has the ability to show immediate reactions, without polishing or

refinement as the traditional media has to, thus a source to see authors emotions and accusations of system, self and media, perceptions of the attacks as well as collective identities of citizenship and patriotism.

In conclusion, studying the role of media coverages and the psychological reflections of feeling of insecure as a nation and the individuals would also help the counsellors to address such presenting problems as well as coming up with community-health based policies on rather indirect traumatizations. Especially with emerging technologies more and more people around the world may need to seek counselling due to such indirect traumatic experiences of tragedies, crisis, natural disasters and wars.

2.3.2 Concerns of mothers in terror inflicted societies

After the tragedic event of 9/11, the concept of ***security mom*** was introduced by columnist Michelle Malkin through 2004 American presidential elections. It was an important figure despite being criticized by some for being a political campaign rather than a real societal fact. In the quotation presented by Grewal, Malkin the security mom claims:

> I have studied the faces on the FBI's most-wanted-terrorists list. When I ride the train, I watch for suspicious packages in empty sears. When I am on the highways, I pay attention to larger trucks and tankers. I make my husband take his cellphone with him everywhere… We have educated our 4-year-old daughter about Osama Bin Laden and Saddam Hussein. She knows there are bad men in the world trying to kill Americans everywhere. This isn't living in fear. This is living with reality. We drive defensively. Now, we must live defensively too. (Grewal, 2006, p. 26)

Thus, one's ***daily routines*** are also affected from the terrorist events and they might try to change it especially when they perceive a threat. Another study from the terror environment of Lebanese city Beirut during the attacks of 2005 revealed people perceive this risk and try to adjust their lives in a way to accommodate them to live with terror. 14 focus group interviews with 77 people indicated that Beirutis had used two strategies as 'braketing', i.e. turning back to their previous routines in times they perceive as more silent and safe; and 'crisis normalization' as new routines and evaluations of risks are introduced to peoples' daily routines as they no longer feel safe in public places, avoid them and restrict their daily lives. (Borell, 2008).

However, people might not be as lucky as the Beirutis in terms of coping, especially in times of continued terror. For instance, in the Israeli case, Klar, Zakay and Sharvit (2002) mentions that optimistic hope might not be used sometimes especially 'when the threat is clearly realistic' and 'perceived absolute vulnerability' was high (p. 203). It was especially valid as they were striken severly by a continuum of terrorist attacks leading their risk of falling victim to an attack. After the intifada, a number of behavior changes found in their 2001 survey of 458 participants between ages 18-86:

> "34.3% Fewer visits to public and crowded places (e.g. shopping malls, theatres, etc); less time spent out of home, 25.3%; Less time spent participating in outdoor activities/trips/traveling abroad 22.9%; Less travel by public transportation/increased rate of travel by private car. 17.1%; Increased concern about children/restricting their freedom to go to places without adult supervision/allowing children to hitch rides to places 13.9%; Increased level of alertness in public areas/awareness of surroundings/suspicious objects and people; 11.0%; Less long-distance travel/less travel to specific areas. 11%" (Klar, Zakay & Sharvit, 2002, p. 210)

However, this fear does not only stress the people in their entertainment like going around and shopping; but also, the workers tend to perceive their jobs as more unsafe as it was presented by Roberts (2003). It may also affect the risk perceptions of a whole society as it is proposed that the health and safety risks are important for the public decision makers to manage better (Feigenson, Baillis, & Klein, 2004). A similar study to Feigenson's colleagues, over 73 questionnaires revealed some risks and their cognitive map by the Turkish people (Thomson, Önkal & Güvenç, 2003). Their results indicate that earlier disasters like earthquakes had affected the ratings of the Turkish people and women perceive greater risk than their male counterparts.

In terms of terror attacks reactions, Moscardino and colleagues' qualitative study of 17 primary caregivers about their experiences through Beslan/Russia terrorist attacks of 2004, it was found that ***the concerns over children*** had focused on their physical and psychological well-being, reorganization of family life, and the disruption in community ties (Moscardino, Axia, Scrimin, & Capello, 2006). In addition to those, the caregivers had cultural values like "pride, heroism, courage, and revenge" and resilience factors like "willingness to return to normality, social support, and the reaffirmation of positive, culturally shared values in face of the perceived threat of future terrorist attacks" (Moscardino et al, 2006).

On the other hand, terror related risk perception and constant threat might lead to ***continuous stress reactions***. From a health psychology perspective, stressful events might lead to chronic diseases, as well as affecting the immune system and to minimize its effects on health one needs to take several measures like relaxation, exercise, cognitive interventions, and self-efficacy enhancement. (Zakowski, Hall & Baum, 1992). In terms of mothers, Baker & Kevorklan (1995) in their study in 60 households, found that mothers have depression and anxiety twice as higher as fathers, which may be related to their gender and care-giving roles. Thus, mothers constitute an important risk-prone group in terms of terror stress.

Besides these general psychological effects of terrorism, how people perceive the terrorist attacks and its threat was an important question. In a qualitative study with 40 Israeli adults, revealed three important perceptions as (1) losing their sense of control, having increased helplessness since the threat is uncertain and unpredictable and vague, (2) feeling vulnerable and as a potential victim (3) feeling danger, anxiety, fear and distress (Cohen-Louck, 2016).

Clinical reactions of mothers need to be considered: It was suggested that continuous exposure to terror negatively affect mental health; however, over time even a large proportion of the ones living in a chronic terror recovered and even if they cannot recover, it may not trigger PTSD (Gelkopf, Solomon & Bleich, 2013). It does not necessarily require the individuals to experience the terror first hand, as traumatic tv images of terror might trigger PTSD (Pfefferbaum et al., 1999; Galea et al., 2002; Schlenger et al., 2002; Schuster et al., 2001; Somer, 2005).

In sum, these unpredictable terror events and its widespread images and rumours seem to contribute to the threat and terror-risk perception. People respond to such stress by taking many measures restricting their lives, increasing their alertness and concerns. Parents', especially mothers', concerns have another dimension reflecting their care-giving stress, which should be addressed and coped with, for the well-being of the mother and the child.

2.3.3 Mothers' coping mechanisms for the terror related concerns

Exposure to terrorism does not concern mothers only for its health impacts due to constant stress, but also it may lead violent behaviour among adolescents (Even-Chen & Itzhaky, 2006). Finding the resources of adolescents is important: It was found that family and social support, mastery, hope and life satisfactions were the environmental resources that could help the adolescents to deal with the impact of security-related stress over a course of time (Even-Chen & Itzhaky, 2006). Parents, especially mothers as in our case, are important mediators for ***helping their children to cope*** with such events. Hafstad and colleagues (2012) revealed important facts about how they support their children with 51 Norwegian parents after 2004 Tsunami disaster in Southeast Asia. The main strategies mentioned was consciously waiting, monitoring their reactions and providing support when needed. The support strategies of parents were mainly re-establishing a sense of safety, resuming normal roles and routines, and talking to their children (Hafstad, Haavind & Jensen, 2012).

The literature of terror-stress and trauma reveals after such a traumatic event many people with or without traumatic disorder try to turn to their friends (Stamm et al, 2004). That part of social support is important to feel safe and secure, despite the brutal reality. As mentioned before, mothers are a risk group and especially the ones with small children are considered to a high-risk group for distress than their male counterparts (Cwikel, Havenaar, & Bromet, 2002; Kimhi & Shamai, 2006; Solomon, Gelkopf, & Bleich, 2005, Cwikel, Segal-Engelchin & Mendlinger 2010). As mother fear from their own and their children's well-being (Dekel, 2004; Cwikel, Segal-Engelchin & Mendlinger 2010) it is important to examine their role in the mother-child interaction. Because, according to the literature, parental reactions might affect and even predict the child's post-trauma adaptation, resilience or psychopathology. Moreover, as parents' coping abilities change, their support for the child as adaptable, supportive and sensitive parents change (Cohen, 2009). However, there is no doubt that familial ties are very important for children as an important source of support. For instance, Anna Freud and Burlingham's 1943 study in which they observed children separated from their parents to be sent to safer places were more traumatized than children who stayed with their parents despite the bombs, and concluded family is a protective factor (Cohen, 2009). Moreover, there seems to be a vicious circle as mothers had learnt these adult coping

styles from their own caregivers, mothers and other female relatives (Cwikel, Segal-Engelchin & Mendlinger, 2010).

Moreover, it is not only the small children that affect their parents by creating concerns in the terror-stress climate. Mothers' role of social support is more important when we consider how the children of a terror inflicted society cope after a course of terror attacks. One study with adolescents between ages 12 and 19 indicated that after a missile attack, these adolescents mainly use problem solving coping strategies, but do not use maladaptive coping strategies (Braun-Lewensohn, Sagy & Roth, 2008). Therefore, their help-seeking strategies are not very common, but they try to solve their own problems. For that reason, the role of school counsellors and teachers after such attacks is crucial (Tatar & Amram, 2008), as they might be the ones reach out the children. Moreover, social support from parents, school and friends act as a protective factor for the Israeli adolescents who had witnessed community violence and these factors have a role in preventing their violent behavior (Brookmeyer, Henrich, Cohen & Shahar, 2011). Moreover, at the adolescence years, they might form their own societal beliefs like what Nasie and Bar-Tal (2012) found that Palestinian adolescents, as societal beliefs of victimization, patriotism and collective emotion of hope during the escalation of violence in Israeli-Palestinian conflict. Similarly, ethnic background also had a role in explaining stress reactions and coping during 2009 Missile Attacks in Israel, as the Jewish adolescents had more sense of coherence and used it for coping, Arab Israelis had more of state anger and less sense of coherence; therefore, used hope as coping (Braun-Lewensohn & Sagy, 2011). However, in some cases anger itself might play a role in coping as it was suggested by Saka and Cohen-Louck (2012) in their study with 40 parents who lost their children in terrorist attacks. Therefore, parents are also affected from their adolescent children's help seeking behaviors and try to help them with the coping strategy at the times of crisis (Tatar, Amram & Kelman, 2011).

First of all, there are many coping styles and activities found in the literature. For instance, Carver and colleagues mentioned different coping strategies like ***Problem-focused coping*** includes active coping, planning, suppression of competing activities, restraint coping, seeking of instrumental social support; ***emotional focused coping*** seeking of emotional social support, positive reinterpretation, acceptance, denial and

turning to religion and less useful coping strategies like venting of emotions, behavioral disengagement and mental disengagement (Carver, Weintraub & Scheier, 1989). Avoidance, similar to disengagement, might also be used as a coping mechanism by the mothers, but extreme of it might lead one to cut ties with the community, the intervention program suggested by Izhaky and Dekel (2006) was important. Therefore, they tried to raise the empowerment and sense of belonging of the 38 women of terror-inflicted areas, which at the end reduced their stress. This is particularly important, when we keep in mind that the avoidance coping as Blalock and Joiner (2000) concluded high adverse life events increased greater cognitive avoidance coping in females but not in males; even though the behavioral avoidance was unrelated.

In terms of gender differences, it was suggested that females use more of the avoidance coping style than males (Blalock & Joiner, 2000). However, a recent article from Israeli terror trauma literature examined the PTSD and Post Traumatic Growth (PTG) relationship in the Israeli mothers who had been exposed to rocket missiles without being hit or injured. That study revealed that the more traumatized mothers, the more they used problem focused coping and their post-traumatic growth became greater (Bitton & Laufer, 2017). Therefore, they argue mothers should be thought as a separate risk group and their PTG should be promoted with the appropriate intervention programs.

However, coping strategies can be quite various as an earlier study on coping responses and social resources relationship found that mood, symptom levels, quantity and quality of the social resources affect the coping responses of individuals (Billings & Moos, 1981). Vingerthoets and Van Heck (1990) on the other hand, found sex differences in the coping styles of individual, as males had more of problem focused strategies, positive thinking, daydreaming, humor and personal growth; women preferred emotion focused copings like self-blame, expression of emotions, getting social support and wishful thinking. On the other hand, some studies argue women prefer to use a variety of coping strategies than men and used more active, problem focused coping; whereas men had more of emotion-focused coping during the Gulf crisis period (Ben-Zur & Zeidner, 1996).

In terms of mother's coping styles over life stress, Cwikel and colleagues conducted 302 telephone survey with mothers having children under age 18 living with them, and tried to examine the mothers coping styles and the effects of Intifada. Despite 82% of the sample neither had direct exposure to Intifada or know someone who was hurt, a correlation between negative health effects of security-related stress over women, and the use of social leisure, loosening control and restlessness style copings were found (Cwikel, Segal-Engelchin & Mendlinger, 2010). The frequently mentioned coping styles found in Cwikel and colleagues' study was leisure activities like watching TV or playing computer; talking with friends, listening to music, walking and exercising, engaging creative activity. Second style named loosening control was overeating, shopping for unnecessary items, sleeping long, avoiding duties and behavioral restlessness like insomnia, restless sleep, and losing appetite. It was also found that the ones worrying about the security of their loved ones and especially children were less likely to use loosening control and more likely to have restlessness; however, concerns over health of the family members leaded more of the leisure type of coping (Cwikel, Segal-Engelchin & Mendlinger 2010).

In terms of marital status of women, it was generally assumed that single mothers are at risk during crisis situations as they lack many resources that the married women have, but it had been challenged by Kushnir (1994). In the study comparing Israeli divorced mothers and married ones about their coping during the Gulf War, it was found that the divorced ones were better in emotional reactions and coping, having more stable situation, since they were better in organizing their coping resources like social supports (Kushnir, 1994). The importance of social support might also lie in the role of "communication". It is considered as another medium that could help the individuals to deal with the stress during the terrorist attacks as it can be used in various ways to immediately doing a safety check for the loved ones and addressing their personal and social communication needs (Katz & Rice, 2002).

Finally, Cohen-Louck and Ben-David (2007) in their study examined 400 Israeli adults for stress and coping, taking problem coping, emotion coping, integrated coping and adaptive coping and decided "Ongoing terrorism in Israel requires the use of several coping styles. The combining of coping styles indicates that coping with terrorism is a

dynamic and interactive process" (2007, p.1). Therefore, instead of claiming exactly one coping strategy is superior than the other, we need to be aware of mothers might need to combine them for their needs.

All in all, this literature chapter tried to introduce the theoretical framework and previous literature related to the impact of terror-disasters on mothers who were not directly exposed. As mentioned, even such an exposure through proximity or media exposure leaves people in confusion, shake their notion of security, affects their collective identity and leads to a continuous threat perception causing constant stress. Mothers are especially risk prone, due to their child-caring roles and gender for the security threats and stress. However, this population should be addressed carefully not only for their own physical and psychological well-being, but also for their roles in the children's lives. Since children turn to their parents for information seeking, mothers might be helping them to cope or transmitting their anxieties. Even though there are the literature of terror stress and mothers' coping, they are generally based on USA post9/11 and Israeli cases. Therefore, the following chapters methodology, results and discussions would provide the reader with the snapshot of the situation with Turkish mothers.

CHAPTER 3

METHOD

This chapter presents the design of the study, partiipants, data collection and analysis. Design section introduces the overall research methodology, the interview protocol as the instrument, the participants subsection including the field journal about how they were recruited and interviewed, the incidents subsection, the most frequently mentioned terrorist attacks and lastly the data collection subsection. The analysis section is about how the data were analyzed in four parts as mothers' experiences with terror, children's experiences with terror, mothers' concerns over terrorist attacks and mother's coping. Moreover, to get a better understanding of the participants they were asked a number of questions about their familial relations. Finally, even though, the discussion of the study will be given in Chapter 5, some general commentaries especially about the participants will be given here.

3.1. Design

This study was designed as a qualitative, phenomenological study where the mothers were interviewed over their reactions, experiences, emotions, concerns and coping. Both face to face interviews and telephone interviews were used, based on various factors like time constraints, physical distance and choice of both researcher and the participant. Various prompts were used in the interview protocol, rationale of which would be elaborated in the below subsection. Related literature on our research topic was used as the initial source for the interview questions. Along with the interviews, researcher's journal and off-record unstructured interviews with the participants are also included in the form of reflections. 21 mothers, who have at least one child between ages 3-15, were interviewed. Through recruition process mainly snowballing technique were used whereas some of the participants were recruited from the research teams' convenience.

The reason for choosing snowballing technique was the vulnerable content of the subject, as people showed fear to talk about issues that they feared to have political dimensions. As it will be elaborated in the data collection section, snowballing helped the researcher to form rapport with the mothers easier. The interviews were conducted in Turkish. During the interview, there were either notes taken simultaneously where recording was not allowed or voice records to be transcribed later. The transcribed and anonimized data were analyzed with the Qualitative Data Analysis programme, Atlas.ti for Mac. For the reliability concerns, the data was co-analyzed, re-discussed and the inter-coder realiability rate was also calculated. The links were also formed based on what mothers had mentioned, to form the concept maps. More details about methodology, in relation to instruments, participants and procedure will be provided in the following sections.

3.1.1. Instruments: Interview protocols

The interview protocol was designed to cover the following parts: A preliminary section for "Introduction to mother-child relation" and three main bodies (1) Mothers' experience with terror (2) Children's experience with terror (3) Mothers' concerns over terrorist attacks. The questions in each part is produced in relation to the literature, mainly based on the findings of previous studies. All of the interviews were conducted in Turkish, and the original form can be seen in Appendix A and the English translation can be seen in Appendix B. The ethic committee permission is also provided in Appendix G. Nevertheless, in this present section, it is beneficial to introduce the interview protocol to the audience:

Each interview begins with the oral consent part most of which were voice-recorded. This introductory monolog includes greeting and expressing thanks, introducing the study, educating the participants about research ethics and her rights, lastly asking whether she agrees to continue.

As mentioned, the preliminary section was an introduction to the familial relationships. Within this section "Introduction to mother child relation"; parents' age, education, marital status, work conditions, other members of the family, close networks in terms of assistance to the child-care, how they perceive their children and their relationship

with them, how they perceive themselves as parents, and how they cope with any problem regarding their children or other familial issues were asked. These answers were coded mainly nominally for the descriptives of the participants. Even though the initial idea was to infer some analyzable data from this part, including mother-child relations and attachment styles, it was omitted later for the three reasons (1) the issue falls far from the focus of the study (2) what mothers present and what the researcher observes were usually different in terms of attachment like issues and (3) these subsections did not produce much variability in the data that could lead the researcher to cross.

The initial main section was "Mother's experience with terror" where four main questions with various prompts were asked. The questions were about (a) their experience of terrorist attacks; whether they had survived or witnessed or heard from any source; how they felt and what they thought (b) their experience with terror-related news; their content, most striking parts of these coverages and mothers' reactions; (c) the effects of these attacks; and lastly (d) how they responded to terror's claiming lives. The main aim of this part was to understand mother's reactions and psychological well-being during and after these attacks; and having an introduction to their overall fears, concerns and copings, primarily at that time.

In the second section "Children's experience with terror"; mothers' were questioned about (a) their children's experience with the attacks, whether they observed, survived or heard news of any of those; (b) whether they watched the news; (c) what was their reactions and responses and how they lasted. Here, the rationale for asking mothers' about their children was not to get the whole, real story of children's reactions, but rather how mothers' perceived their children's experiences. Moreover, the prompts were designed in a way to learn how mothers' try to protect their children from these effects they are concerned with.

The final part of the interview was "Mothers' concerns over terrorist attacks" (a) asking what they think of being a mother in such an environment; (b) how all these affected their routines and daily lives; (c) their concerns and future-related thoughts and lastly (d) their coping with these events; and what they perceive as the most unbearable and most empowering things. After the questions were finished, all mothers were asked

whether they had anything to add and were given an oral debriefing (see Appendix A and B).

After each interview were finished, unstructured notes and interviewer reflections were written about the overall reactions of the mothers, mother-child relationship if observed, or any other information they had given after the interview record is finished (with the permission of using them) including concerns and questions. All of these data were analyzed in Atlas.ti; to form codes and nodes for the specific patterns emerged.

3.1.2. Participants

In this qualitative study, 21 mothers, with at least one child of ages 3-15 were interviewed. Since the questionnaire were about familial relationships, their children and hardships of mainly terror-related events; the snowball sampling started with the ones close to own social network of the research team. One related problem was to reach out low educated profile women; as many of these networks gave connections to mothers with university and higher degree. Other attempts to find mothers with below-high school education level, especially those with middle school or below were rejected as they were more sceptical of social research. Some even claimed people might do many crazy stuff to slander and defame and they do not trust any research as it might serve other purposes. Some women of this group suggested that they needed to take their husbands' permission and responded as their husbands did not give the permission as they fear something might have happened. Neither showing and explaining the ethical consent and the interview protocol, nor assuring that no voice record will be taken, did not work.

In terms of descriptives presented in Table 1, mothers' ages ranged between 30-46, with a mean of 38; all of them were above high school educational level. Most mothers worked at most eight hours a day, and had some kind of assistance with the upbringing of their children. Only three mothers had three children, and the rest were equally divided as the ones having two children and an only child:

Table 1
Summary of category name distribution of mothers interviewed

Category Name	Groups	No. of participants	Percentage of participants
Age			
	30-34	7	33.3
	35-39	5	23.8
	40-46	9	42.9
Education Level			
	High School	6	28.6
	University	7	33.3
	Graduate Level	8	38.1
Work hours			
	Less than 8 h/day	8	38.1
	8 h/day Standart	8	38.1
	More than 8h/day	5	23.8
Assistance in child-care			
	No assistance	7	33.3
	Just one another person	5	23.8
	Extended family	9	42.9
Number of children			
	Only child	9	42.9
	Two children	9	42.9
	Three children	3	14.3

Among these descriptives, assistance in child-care is an important category to refer back. Because, mothers might have concerns like who would take care of the child in their absence or if they go for good. As observed in Table 1, it was again a good distribution over categories. The only participant who expressed to take the professional childcare assistance claimed it was necessary as the husband did not help much for the

cultural reasons, in the off-record part. Thus, the decision to combine those into the category of *just one another person*, either as husband or a professional had emerged for this reason. Another descriptives table was created for mother-child dyads, as some participants might have more than one child falling in the researched category. Overall, there were 30 children that the mothers gave information about. Their age-group frequency distribution is given in Table 2:

Table 2
Summary of children's age distribution of mothers interviewed

Age group	No. of participants	Percentage of participants
3-4	6	20
5-6	8	26.6
7-8	2	6.6
9-10	3	10
11-12	4	13.4
13-15	7	20.4

By this, it was aimed to take age-related developmental states of children into account. Therefore, all ages were addressed, enabling a split between age groups regarding their developmental differences. Additionally, from the sample, six mothers had all of her children before age six, whereas 14 of the mothers had all of their children after age six, and only one of the mothers had one child before age six and one above age six.

In terms of procedure, the interviews took about 45 minutes to two hours. They were either telephone interviews, video-chats or face-to-face interviews to enable mothers and the researcher to find the most feasible form of interaction for each individual interviewee. These records were transcribed and prepared for the analysis. However, the documents for each mother were not only composed of the interviews, as the reflections of the interviewer were also added. These reflections were mainly gathered in the field-journal, in which every mother had its own page; based on the researcher's observations. These notes according to their relevance were later added to the

transcribed documents' as reflection, mentioned during data collection subsection or reported in this subsection for the introduction of the participants. However, not every information in the journal was reported, as more of such information might threaten the anonymity of the individuals. Thus, as much as possible the following information about the participants may be provided below. All the names used here are the fake names given to the participants by the researcher:

Part ID #1: AHU

She is a married, academician in her early 40s. Even though she does not live in the city-centre of Ankara, due to her work she used to visit Kızılay frequently at the time of the attacks. She did not report any loss of known person during the attacks, however, had feared of security of a sibling due to its presumed presence to the attacked area in Ulus. However, at the time of the interview, she had just quitted her job in Kızılay district to spare time for her increased academic duties. She now has a flexible schedule, enabling her to spend time with the children. She tries to educate them well by personally taking the responsibility. Her both children are younger than age six, and her husband works full time. Ahu seems very concerned about the security issues. She reports increased mistrust and emotionality, despite trying to be calm and rational. She was quite willing to contribute to the research and the sampling.

PART ID #2: AYŞE

In her mid 30s, Ayşe is a married public administrator. She both lives and works near the city-centre of Ankara. Despite not reporting any loss of loved ones during the attacks, she had observed the blood-stains the day after the attacks and heard the jets flying during the coup attempt. She has one child of age 10, who reacted badly to the attacks. She has a strict-job and many work-related responsibilities. For the last two years, she had to have many business trips, leaving her children to her husband and the extended family members' care. This had affected the children, especially when their father had a serious health issue for a few months. However, her husband is now well and works full time, and shares some responsibilities like children's education with her. Nevertheless, combining all these adversaries, she is increasingly emotional and

stressed. She is also concerned about her children's well being and future and was willing to share.

PART ID #3: GÜLİN

Gülin, in her early 30s, is a married academician, neither lives nor works in the city center, Ankara. However, her husband is the opposite in terms of work and she also used to frequently visit shopping malls before attacks. Her husband is the main source of income and works for long hours, as she takes care of her two young children (both younger than age six) Nevertheless, she works part-time for a longitudinal project, has a flexible schedule as she may sometimes work home-office. On the day of coup attempt, a few hours before she learnt about the event, she was in the airport, where the events started. Having other opportunities like going Western countries where some of her relatives live, she started to consider them after the attacks. She has a hard time understanding what is really going on, and feels insecure. She is also concerned about these security and communal trust issues of her children's future. She was willing to contribute.

PART ID #4: JULİDE

In her early 30s, Julide is a married therapist having her own clinic in Istanbul. She also has close relations with Ankarains, as having friends and visiting the city. In terms of work, even though she sets her own work-schedule, it is rather busy disabling her to spend much time with her pre-schoolar and baby children at the moment. Having the social support of her husband, her own parents living nearby, and a close relative living with her she tried to overcome this child-care assistance problem. She had not been injured or knows anyone injured or killed during these incidents. However, she had heard of jets flying in the coup attempt and reported of restricting her social life after the attacks to a great extend. She even needed professional help to recover from the psychological disturbance caused by the coup attempt. She has concerns about her children's future and country's future. She was willing to share her concerns about the terror and her terror-stress.

PART ID #5: DENİZ

Deniz is in her early 30s and married with a young child of six y.o. She is a health professional living in Istanbul. She has mainly a standard shift of eight hours work and only one night shift in a month. She spares time for her child for education and leisure. She has extended family members living nearby, in whom she trusts when she needed assistance in child-care. Plus, her husband works similarly with a full time standard shift but does not have any additional shift like night shifts. Deniz had neither observed nor lost anyone in the attacks, however, reported rising concerns about her and her child's security at the times of rumours about attacks. Trying to answer her child's questions in a way that would not damage the child's psychological well being was what she tried at those times. She also immediately accepted the interview request upon snowballing.

PART ID #6: KÜBRA

In her early 40s, Kübra is a married university graduate, who quitted her job a few years ago due to her child's health issues. She has a supportive husband and supportive family members as she describes "the luck of their children". Her husband works full time and is the main source of income. The neighbourhood Kübra lives is highly politicized in her terms and there were many protests and conflicts between groups as well. Moreover, her house, her husbands work and her teenage child's language course was close to Kızılay. Even though now it does not pose a great threat to the family, she had to deal with her younger child's health condition and elder child's traumatization with the Kızılay bombing. Her elder child had observed the attack first hand and required psychological assistance during the last one and half year. They had also heard the jets during the coup attempt and her child again reacted badly. She was willing to share her experience and was found upon snowballing.

PART ID #7: EMİNE

In her early 40s, a married, high school graduate Emine, works as a housekeeper. She has to cross the city-center as a transfer point from home to work, despite not living very close to the city center. However, as she described her neighbourhood is in such a

position of Ankara that allows her to see and hear what happens in the center. She has a very busy work schedule, almost around 12 hours a day and seven days a week. She is the main source of income in her family as her husband is unemployed for the last few years. Her intense work hours and her husband's not having a close relationship with the children worry her. However, she has other resources and social support mechanisms from her teenage child's school, to keep an eye on. She had observed one of the attacks, by hearing the sound, passing with a bus on her way to home. Emine, also reported to hear the bombings during the coup attempt. She was a little bit skeptical at first but than became fully open in terms of sharing her experiences and concerns. She is not only concerned about the attacks side of the terrorism, but also fears of the side-effects like substance abuse, uncontrolled migrants, criminal groups and economic crisis.

PART ID #8: PELİN

Pelin is a married teacher in her mid 30s, both living and working near the city center in Ankara. She has a young child (before age six) and her workplace allows her to take her child sometimes with her. Pelin lives close to her family and relatives, having the resources to help her in child-care assistance. She and her child had observed the Kızılay bomb sound and smokes during a family meeting. Moreover, the child hears about the "bomb" and developed a fear from it in her school, and asks some questions. However, Pelin decided not to answer her child's questions much, and not to explain the child about the terror. During coup attempt Pelin reported fear and concern over their lives however her child had not heard the sounds etc due to falling asleep. As having a previous experience of earthquake, in which she did not get injured or lost someone but still has continuing concerns, she seems to be stressed out. She was very willing to share her experiences and feelings.

PART ID #9: RÜVEYDA

In her mid 30s, Rüveyda is a married, high school graduate housewife. She lives outside the city center of Ankara, however has fears about her husband's well being since he works in the crowded governmental buildings. She had neither observed nor lost anyone

during the attacks. Having her own safe heaven in the neighbourhood, she believes her children were not that much affected from the events, but talks about increased concerns for terror. Her responses include shaking, trembling, crying during terror events and feeling worry over the security of her husband. Even though she had an easy time accepting the interview request and voice-record at first, she then became clearly concerned about the voice-record part. When the interview and recording was finished and I was about to leave her house, she stated some concers, claiming people might make up new content from voice-record and people with bad intentions might use those against them. Even though she did not blame me directly, she stated she was not comfortable with the voice record part and asks me a way of undoing the record without undoing the interview, stating she was ok with sharing the experiences but fears of the recording part. Upon reassuring the ethical conduct, I transcribed the whole document in her house and made sure that I had deleted the record before her eyes, making sure she was ok. Nevertheless, none of the contacts she requested for snowballing gave permission for the interview.

PART ID #10: SILA

Sıla is a married, high school graduate, low income mother in her early 30s. Despite the main source of income is her husband working full time, she has a part time job as a baby-sitter. She lives outside of city center in Ankara, however, Kızılay was also a prominent transfer point for her. She had visited Kızılay with her family just before the Guvenpark bombings. Her children were also affected from the news of the attack and later from the sounds of the coup attempt. Even though she argued her children were affected, she did not take any psychological help, as she believed the more she thinks and talks about those, the worse these might go. After the coup attempt, she also had concerns thinking what could have happened if the attempt was successful. She was ok with the interview and voice recording, and argued she may take the gift of children testing package in the future.

PART ID #11: SARA

Sara in her 30s, is a teacher working near Kızılay at the time of the attacks. Sara has assistance of her own parents in child-care. Her work hours are rather less than the

standard, leaving her more time to spend with her pre-scholar child. She had not directly experienced any of the incidents, however, through news she was affected. While they were out of city during the coup attempt, her child before six y.o age, had reacted to the news, observing the family member's anxiety and talks. However, the family managed to take her attention back to other issues through play. She is also worried about the attacks and the future. Moreover, her child has a food-related health condition that makes her get concerned about any situation that might restrict the lives and the market. She was ok with the voice recording, and was also eager to share her feelings and experiences.

PART ID #12: ZEYNEP

In her early 30s, Zeynep is a psychologist in a private company. Since her husband is also working as a part-time instructor, they have more time to spend with their children than the average full time working parents. Having a young child, she believes her child was not affected from the issues as they also live outside of the city center. However, she works nearby Kızılay and shares concerns with other mothers. Moreover, Zeynep also fears that her child might experience and know about such an environment, even though she tires to provide the child with a rather isolated environment in which these events are not heard, seen or talked much. The insecurity and the psychological stress in the terror environment are the most important two aspects of these incidents for her. Nevertheless, she argues working as a professional of counselling helped her to be strong. Zeynep was also willing to participate and help the snowballing.

PART ID #13: KARDELEN

In her mid 30s, Kardelen is a single parent who works as a government officer. She claims her children were resilient as she had given both resilience and spirituality to them as their resources. She has two adolescent children, and the children's relationship with their father is also good. Kardelen believes her being raised in the Eastern Anatolia and with the phenomenon of terror, made her strong. She seems to be content with the idea of death, claiming it is a natural/spiritual reality, not a loss. Therefore, Kardelen argues they were not traumatized or stressed out by the incidents despite feeling sorry and unhappy. Moreover, as she reported, she was unhappy with the stereotype that

terrorism is caused by an ethnic group of Turkey, since she already knows the situation in the Eastern Anatolia. She was also very eager to share, and was ok with the voice recording; and also mentioned about how knowing the terrorism even before urban terrorism became so widespread made her family resilient and strong.

PART ID #14: JANSET

In her mid 40s, Janset is an academician living outside of the city center in Ankara. Janset visits their parents and in laws, but as the family there are only she, her husband and the teenage child. Even though Janset's both workplace and residence is in an isolated area, far from the terror-inflicted center, she used to visit Kızılay due to her work, for data collection. Thus, despite not being directly victimized by any terror event or neither observing any of the attacks, she was emotionally affected from the news. She tried not to make her child learn about terrorism but still, Janset tries to take some measures as she can in terms of protecting her child, however still feels concerned. Sometimes she has doubts about raising the child in an isolated environment might be harmful and make her more fragile, but her rationale is to expand the happy childhood days of her child as long as possible. She was also ok with both voice recording and sharing the experiences, and claimed this interview helped her to realize her feelings and concerns more, in a way she had the chance to reflect.

PART ID #15: NUR

Nur in her mid 40s, is a married low-income cleaning worker. Both living and working close to the city center of Ankara, she both heard the jets flying and the bombs during the coup attempt. She was ok with the interview but hesitated to be voice-recorded, claiming she trusts me but not to the environment. First few minutes I needed to ensure her the ethic rules as well as the fact that my questions were not political, they had nothing to do with the government and government policies as I was only interested in psychology and the mothers' experiences. Nur explains she has long work hours, more than ten hours including the time she spends on her way to home/work. However, her husband works more than her, and the parents leave their teenage children mainly to the protection of the two young-adult/unmarried siblings. During the coup attempt, one of her children were at military duty, thus the teenage child also feared the action was turn

to something that would harm the sibling. Nur also tries to take measures by avoiding public places for entertainment but shares the concerns with other mothers.

PART ID #16: NİMET

In her mid 40s, Nimet is a single parent who works as an office-girl. She both lives and works near Kızılay and heard the bombings and jets flying during the coup attempt. She is living with one of her parents, her sister and her child. She became overly concerned with the terror incidents and takes as much measures as possible to protect the child. Nimet is especially worried about the mistrust spread in the environment, claiming she herself became more suspicious of the strangers. Having no connection with her ex-husband, the father of the child, she is concerned about her child's future. She was also sceptical of the voice-records and wanted me to take notes instead, as she claimed voice records are always dangerous, no matter how much she trusts me. However, as she had seen the interview questions, she became more eager to share her experiences and concerns.

PART ID #17: CEREN

In her early 30s, Ceren is a married teacher with a pre-schooler child. She uses Kızılay as a focal point on her way to work and lives near it. Despite not being a direct victim of these incidents, or knowing anyone hurt by those in person, upon her own evaluation she was overly stressed due to news. Moreover, they also heard the bombings, jets flying during the coup attempt and indicated that both her child and she herself got traumatized. However, she did not want to get any professional or social help as she believed everyone was like it; as we are going through a collective truama. She did not let me for voice recording, and hesitated to talk much, however her comments revealed some important points. She tried to cope those concerns mainly through spirituality but felt as if the pain closes her to God. Moreover, Ceren was also important in terms of being the only participant mentioning the survivor guilt.

PART ID #18: SAİME

In her mid 40s, Saime is a widowed housewife. She does not work but still her social life is affected from the attacks. Especially in terms of entertainment and spending time

with her child outside home, she feels restricted. Moreover, she claims to lack the social support as she does not have anyone in Ankara except from her child. With her adolescent child, they heard the jets flying close and the bombings during the coup attempt. Despite her attempts to protect her child from learning what is going on, the child watched the news and they had to talk. She was stressed due to the terror environment and even feared that a civil war might be on its way. Saime recalls even storing food and bread in case they might need to stay at home in those days. She was eager to share her problems and was ok with the voice recording, and helped to reach out more participants through snowballing.

PART ID #19: VAHİDE

In her mid 30s, Vahide is a married low-income housewife. She also heard the jets and bombs during the coup attempt. She also claims her social life is restricted, as she stopped taking her children to social activities like theatres, movie theatres or parks. She was also concerned about the future and showed some over-protective behaviour patterns like spending whole day in the garden of the school waiting for her children. Vahide recalls calling her husband with short breaks, since she fears something might happen to him. She also argues she had restricted her family members to visit Kızılay since the attacks started. Even though she claimed to have a strong mistrust towards people, she let me to have the voice recording, saying she had trusted me and she would say the things she would be saying anywhere.

PART ID #20: HAYRİYE

Hayriye is an engineer. She works close to the city center and tries to protect her adolescent and a young adult, two children by keeping them away from the threating environment. She is in her mid 40s. She had neither heard nor experienced the incidents directly. Moreover, she claims to be less emotional than the other family members, despite being affected from the events. She was more or less successful in creating the rather isolated environment for her children as they usually had chosen the less crowded places. Hayriye also set up some rules of keeping in touch with the children due to being a working and travelling mom. Nevertheless, Hayriye believes one cannot escape from the terror incidents if it was the destiny. She was ok with the voice record.

PART ID #21 MELİKE

Melike is a government officer in her mid 40s. She works close to the city center. She has an adolescent child and many relatives helping her in child-care, as they live in her husband's family apartment-building. She had seen the traumatizing visual images of deaths in Kızılay bombings and was coincidentally on one place that were bombed just a few hours before the coup attempt. Thus, she had the idea that she needs to protect her only child, by engaging in open communication as her child is older enough to show interest in understanding those issues. She claims to provide a very isolated environment for her child, living in a neighbourhood far from the city center. However, she also tries to protect the child by monitoring during the visits to shopping malls and not letting to visit crowded places like Kızılay. She was also eager to share and was ok with the voice record.

Besides, the preliminary part of the interview (Introduction to Mother Child Relations) is analyzed to have a deeper look at the familial relations, especially the one between mother and the child. Nearly all of the participants indicated they had a beautiful relationship with their child, based on love, harmony, understanding, support. Moreover, the mothers claim she and the child shares emotions and special moments together, they try to support their children's development like "we talk, we share our secrets", "I try to encourage him for …" Most mothers also claimed their relationship as family is consisted of children's positive and healthy relationships with the child like having father-child events. Only two participants presented the father-child relation was not good, whereas most mothers with two or three children mentioned sibling issues like small fights or jealousy.

3.1.3. The incidents: Terrorist attacks mothers mentioned

Turkey, like many other Middle Eastern countries, had been dealing with terror since the cold war. Mainly the ethnic separatist Kurdish terrorist groups and Islamist terrorist groups had many attacks in the Eastern cities of Turkey, leading to a continuous war of terror in those regions. Moreover, there were some urban-terror attacks by these groups to appeal the political attention, however for the last two years the intensity and saliency of the attacks had caused a collective trauma: There has been a number of attacks in

Ankara and Istanbul that were mentioned by the mothers' in this research. Some related factual information is given as:

Ankara Ulus Train Station Explosion: In 10 October 2015, the square in front of the Ulus Gar (Ulus Train Station) was chosen as a route for a legal political demonstation. At around 10 am, a suicide bomb attack had taken place, claiming around a hundred lives and having 400 people injured.

Ankara Merasim Sokak Attack: The Merasim Sokak, near Kızılay is known for the military and ministry buildings situated around. In 17 February 2016, a car filled with bomb had exploded around 6.30 pm (when the military and ministrial personnel services take off). 29 people died and 61 people got injured.

Ankara Kızılay/Güvenpark Explosion: Kızılay is the traditional transfer point and city center for most Ankarains, and Güvenpark is the place where many public transports take off. In 13 March 2016, a car exploded near to one bus stop in Güvenpark killing 34 people and injuring 125 people.

Coup Attempt: Ankara & İstanbul: In 15th July 2016, some personnel from the military base started to take off the jets to bomb the key points for government to have a coup. In addition to that, in Istanbul these coup attempters had taken the bridges. President Erdogan called the public for defence, indicating it was a terrorist act. The event claimed 248 lives and injured 1535.

3.1.4. Data collection

After the literature review, defining the research questions and preparing the interview protocole; the research project was presented to METU UEAM for the ethics committee permission. The permission presented in Appendix F was given to be valid between February 7th and October 30th, 2017. The data collection procedure had started in February 17th, 2017 and finished in April 28th of the same year. As presented above, 19 of the participants were living in Ankara, whereas two of them had lived in Istanbul. It

was aimed to conduct the interviews in a short period of time, to eliminate the risk of any new traumatic events' taking place or dramatically changing the political agenda of the country which could affect the mothers. Fortunately, during that two months of data collection, not any major terrorist attacks affecting the lives of the people in Ankara or Istanbul had happened.

Snowball sampling was used as the main sampling methodology for three main reasons: (1) First of all, among the sampling methods suitable for the qualitative research, the purposeful sampling methodologies were the most suitable one for the research question. In other words, the participants were selected purposefully, with certain criteria like being a mother of a certain age group child, living in Ankara or Istanbul etc. Therefore, snowballing was more feasible for entering into the domain of mothers of a certain age group child as they had the chances of sharing some life-worlds. (2) Other purposeful sampling techniques like having the most deviant or the most variation were neither necessary in terms of research questions, nor feasible due to the unknown characteristics of the population because of the inadeqacy of prior studies since the attacks. Since the main focus of the study was to get a general snapshot of the situation in a relatively short period, snowballing provided the ease and pase required by the nature of this research. (3) Similar to ethnographical studies that required researcher to enter into a closed group, this thesis topic required the researcher to build trust and rapport prior to the interview, due to the assumed political nature of the research topic, i.e. terror. For that reason, having a reference point to introduce the researcher to the participant was a quick fix presented as a side benefit of snowballing. Since the previously contacted person or participant had assured the questions or the procedure does not include anything to be afraid of or she herself had been participanted in it before, it created a comfort zone for the mothers.

The first mother, with whom the pilot was made is from the own network of the researcher, who fits into the category. The reason for starting with someone close to the researcher was the availability of the participant for multiple interviews in case it was necessary. Moreover, even though the researcher was presumed of some kind of expert power during the interviews, starting with an already known mother eased the process by building on an already formed rapport. This had helped the researcher to ask the

participant to give feedbacks about the questions. Additionally, this first participant was asked to think-aloud when first hearing the question when necessary.

When each interview and the briefing was finished, the participants were asked whether they had known anyone who will be willing to share. It was also said that this person does not need to be a close friend or someone similar to that person, but any mother they know having children between ages 3-18, who would be interested in participating. By this means, a variety within the sample in terms of their ages, work and education status, places one lives and so forth were covered. Even though the age difference of children was an important one, none of the possible participants were rejected due to any quota, if they fit to 3-18 category. Due to ethical concerns, the interviewed mothers were asked to initiate the talk with the prospective participant and introduce the interviewever to the new participant if she had accepted. Thus, none of the women who rejected the interviewing were pressured. There were also the cases where the researcher approached to the new prospective participant and explained the interview but then was turned down. This was especially the case with women with lower educational level, who either got scared of the notion of social research or wanted to make a decision after their husbands give the permission. When the snowballs did not generate new participants, the research team was asked to generate new contacts for the researcher, to start the process again.

The ethical issues presented in the consent form was read to the participants to remind them the issues of anonymity, voluntary participation, confidentiality, and their right to take a break or discard if they change their mind for any reason. None of the interviews had been left unfinished; despite some mothers wanted to complete in two halves in preceding days, due to their time constraints. The decision of the mothers in terms of time (daytime or the evening), place (home or workplace), means of the interview (telephone or face to face), the recording style (voice record or simultaneous written notes) were respected and the researcher acted accordingly. The same ethical concerns were carried out during the transcription and analysis process, and the whole data was transcribed and anonymized by the interviewer herself.

Since the interview subject was related to a recent human-made traumatic event and concerns about one's life, family and children; it had the risk of causing emotional

disturbance, or triggering other emotions on the way. Plus, the issue of terror always has a political dimension that people might be fearful or unwilling to talk about. Additionally, the qualitative research has a huge impact from the researchers themselves and their own feelings, limitations, experiences and so forth. Therefore, through the process, they were needed to be addressed carefully.

Chronologically, the first thing for the researcher to be aware was to analyze where the interest in this specific research question stemmed from. Being a child of a government officer myself and living in the eastern cities of Anatolia at the peak of terror in the early 1990s as a young child got me interested in issues like intergroup conflict, war, terror and their psychological effects. Through years of insight into the issue, work in Eastern Anatolian cities, political psychology courses on terror I felt I was able to handle the issue more broadly with a curiosity to understand. These all helped me to gain more insight in what I am interviewing about, however, I needed to be aware of my limitations as well. I had listed all the possible prompts before applying for expert and ethical committee review and permission. Finally, I studied any possible hardship or need for referral, and become prepared for those.

The second issue was about the political dimension of the terror which was generally left out of the interview. Thus, the focus was the attacks and their effects, not the political debates, conflicts or groups behind those. As introducing the study, this point was made crystal clear, acknowledging though terror is a political-psychological warfare, the researcher is not interested in learning mothers' political stances, preferences, ideological tendencies and so forth. Omitting all the questions that might trigger political debate, mistrust or discomfort was also the point that helped the participants to engage in detailed interviews. Plus, contacting the participants through the reference person embedded in snowball sampling eased forming rapport.

The last issue was the emotional aspect of the questions. Mothers were given the information that, even though the questions were monitored by the experts before, they might trigger some emotions or disturbance as it is just the normal human factor that might change from person to person. The participants were told, if such a case happens, one can take a break or call off the whole session. There were some cases where mothers got emotional as their voices trembled or they had some tears, which was attended

respectfully by the interviewer, without turning it to a counselling session. One of the last questions was whether they had received or seek any professional help was a helper: As it was a standard one, it did not offend or triggered anxiety in the mothers, but helped the ones who needed to take this as an opportunity to confront. The offer for child-adolescent psychological evaluation test package worked the same way, as it did not offend the mothers due to being a standard gift, but was accepted by those who think their children needed help. Additionally, as the researcher was ready, the mothers who needed, or required to be referred to the professionals were done so.

The presumed expert power was another issue that occurred through the interviews, as some mothers asked for validation, or tried to learn what is right or what is wrong based on the presumed expert power of the candidate counsellor. It was replied with a mild smile and a statement as 'In fact, I am here to learn from you, it is your experiences, your concerns, and your coping.' and 'The literature sometimes claims some methods works better than others, but there is not much of a consensus as researchers, we are still learning. Plus, I am more excited to learn what you do and why you do so, as I will be learning from you right now.' At the end of the interview, in the debriefing part, the knowledge of the literature was presented without any judgment or evaluation, again claiming, my role was the role as a researcher, but if they were interested in further help, there are other more professional opportunities around that I may refer.

Finally, most of the time the participant thanked as she had thought the issue was important and she would be pleased if she can help to form something that as mothers they would all benefit at the end. Moreover, some claimed even though it was not like counselling, mentioning about the feelings that they had suppressed for some time helped them to have catharsis.

3.2. Analysis

In this present section, first, how the interviews were prepared for the analysis and analyzed through the qualitative data analysis program will be presented. Inter-coder reliability was calculated for the codes and nodes. The interviews were analyzed with the QDA program Atlas.ti, to enable concept maps and frequency tables. Thus, this

section first introduces the qualitative data analysis and then the supplementary quantitative part.

3.2.1. Qualitative Data Analysis: The Codebook

The interview notes and/or records were prepared in an electronic written format for each participant. Qualitative Data Analysis program Atlas.ti was used to code these interviews. Like grounded theory, each important segment was coded under new codes that emerged from the text. However, the main codes were taken from the interview questions, which were formed as a result of the literature research, based on the previous similar studies that mentioned before. After codes were finalized, they were re-read and restructured within the code forests. (see Appendix D) For each code and code group, the definitions were written in a codebook to enable the other coder to see and understand the codes and nodes. (see Appendix D) Then the coder was given the codes and the codebook to let her to analyze the project individually. After co-coder had finished, the coders discussed the codes and the quotations to get a better inter-coder reliability. Then, the results from both projects in their final forms, the one coded by the author and the one coded by the co-coder, were combined to calculate inter-coder agreement, which was given the Kappa value .982, with a SE: .003 and p=.000

Reporting the results, each code and related segments were re-read and the most striking ones were chosen as quotations to tell the summarized story. Moreover, each participant was coded in a spreadsheet to show whether a code exists or not in their interviews. This second document was used to have the frequency results to form a meaningful story. Moreover, the links between each code in terms of their qualitative nature is given in the map presented in Appendix E.

3.2.2. Quantitative Supplementary: The Frequency Distributions

For this present thesis, the interviews were coded in Atlas.ti program and turned into categorical data, in terms of whether a pattern exists or not exist in each participant's interview. Then this particular spreadsheet was analyzed in SPSS to give the frequency distributions that are mentioned during the results section, introducing whether a pattern is frequent or not. However, these should be considered different from the frequency distribution in the quantitative studies as the reason for a pattern not to exist in the

interview might be related to other issues like forgetting to mention, not being eager to talk about it, not thinking it was relevant and so on, even if that certain pattern was a part of the interviewee's experience. Thus, these numbers are rather supplementary numbers to let us have an idea over how many participants mentioned that pattern in our interview datas, especially to see the most frequently and less frequently cited ones.

CHAPTER 4

RESULTS

In this present chapter findings from the interviews will be presented in four sections like: (1) Mother's Experiences with Terror, (2) Children's Experiences with Terror, (3) Mother's Concern Over Terrorist Attacks and lastly (4) Mother's coping. In each section, the codes, nodes (links) and quotations will be presented for a clearer and in-depth picture of the interviews. How many of the participants mentioned a particular code is also given, but this supplementary information cannot be interpreted in the way we interpret a quantitative data of frequency. Because, the not-existing of a code in the interview, does not necessary mean not-existing of a phenomenon in one's life. In addition to those four parts mentioned, the child-family relations were also analyzed as a preliminary part. The general outcomes of the preliminary part were presented in the previous chapter, preceding the descriptives of the participants. As mentioned in the methodology chapter, that preliminary part had also helped the mothers and the researcher to build rapport during the interview.

4.1. Mothers' Experience with Terror

This part of the results is mainly based on the answers of the questions asked in the interview part with the same name. However, if the same pattern had emerged elsewhere in the interview, as an answer to a different question, it was also coded here. Most participants referred to more than one event, as 17 mentioned about the coup attempt; 14 mentioned about Güvenpark Explosion; two mentioned about Merasim Sokak and three mentioned about Ulus Train Station Explosion. For interpreting these numbers, it should be considered that most of the participants were Ankarains, whereas only two of them (Julide and Deniz) were from İstanbul. Moreover, the two frequently mentioned events are important for most citizens (a) Kızılay is the traditional transfer point and the city-center for most Ankaraians, and (b) the coup attempt was experienced by most

people in the capital city, despite posing a general threat to the whole country. The results are presented under four subsections; like 'Risk Factors'; 'Early Responses', 'Delayed Responses' and 'News Effects'. The summary of these results is given in the following Figure 1- Mother's Experience with Terror:

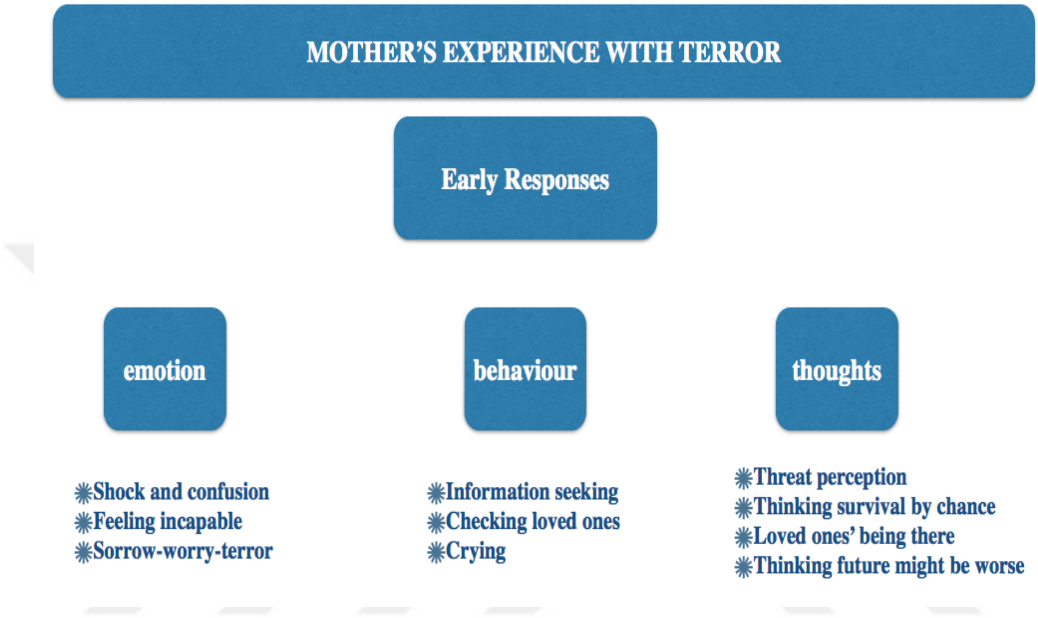


Figure 1: Mothers' experience with terror

4.1.1. Risk Factors

This section is about the ***Risk Factors*** that emerged, which are 'Exposure', 'Proximity to the place', and lastly 'Having children', the frequency distributions of which is given in the following Table 3. Moreover, the participants were asked whether they were exposed to any terror events, especially those occurring since 2015. As it can be seen, none of the participants had direct exposure, in the sense of being injured, survived or escaped from the explosion or the gunshut:

Table 3
Summary of risk factors distribution of mothers interviewed

Risk factor	No. of participants	Percentage of participants
Exposure		
Direct exposure	0	0
Hearing and seeing	10	47.6
Proximity to the place		
Herself	19	90.5
Loved one	10	47.6
Having children		
Younger than 6 y.o.	6	28.6
Older than 6 y. o	14	66.6

However, half of the participants (10 participants; 47.6%) claimed they were exposed as they had ***heard or seen*** the explosions, gunshots and especially jets flying which caused some kind of emotional, behavioral or cognitive responses:

> Of course, I was not exposed directly, but I think having bombs passing by our homes, hearing gunshots at my home, they were all a kind of being exposed…I heard the jets flying very close, the gunshots, the shaking house, I was so afraid, I was puerperant for 15 days and I was afraid as I got concerned whether my breasts would go dry because of fear. I was afraid, so afraid, nothing like I can tell.
>
> (Yani maruz kalmadım tabii direkt ama bence işte üstümüzden bombalar geçmesi, evimden silah seslerini duymam, bunlar da bir maruz kalma yani…. Yakın geçen jetler, sonra duyulan silah sesleri, evin sarsıntısı, çok korkmuştum, 15 günlük lohusaydım, dolayısıyla korkudan sütüm kesilir mi diye felan da korktum, ben çok korktum yani, bayağı bir korktum, anlatılabilir gibi değil.) JULİDE

Therefore, as the previous quotation indicates, hearing and seeing those from their homes in a close distance and feeling the quake created extreme fear, which might be due to the threat perception. Another important point was mother's thinking of their children under such threat perception, as the mother feared that her fear might cause

direct effects on her caregiving abilities such as being able to breastfeed the child. Sometimes traumatic images that were seen afterwards the events like the harm caused by the explosion is also coded, since mainly being a result of the ***proximity to the place.***

> I was working at the assembly at that time, thus one day, when the explosion happened, I was at home, I was not there. But the day after, when I go, these blood stains everywhere, destruction, moulding, all those ruins of the windows in the places where the explosion happened, I had seen all of them.
>
> (Yani o dönemde mecliste çalışıyordum ama o gün, patlamanın olduğu gün gitmemiştim, evdeydim. Ama ertesi gün gittiğimde her yerdeki o kan lekeleri, ondan sonra patlamanın verdiği yıkım, döküm, camların harabe şekilleri, hepsini gördüm yani.) AYŞE

Proximity of a loved one to the place was another risk factor within proximity to the place, as mothers are not only concerned about their own lives. Overall, 47.6% of the participants (10 participants) had mentioned even though they were safe, one of their loved one had the possibility of being at a close distance to the place which was perceived mainly as being at risk:

> The terror event in Ankara that affected me most was the one at Ulus train station. At that time, I was in the city center for a conference, and got affected from it much. And there is something like that, my brother escaped from it hairsbreadth. Because he would go to another conference in Eskisehir by train, due to the cancelling out of the event, he did not go. I mean, he could have been there.
>
> (En çok etkilendiğim Ankara'daki terör saldırısıydı bu Ulus'ta gardaki. O sırada ben de bir konferans için şehir merkezindeydim, en çok ondan etkilendim. Bir de şöyle birşey var, o saldırıdan kardeşim kıl payı kurtuldu. Çünkü trenle Eskişehir'e gidecekti o da başka bir konferans için, son anda konferansın ertelenmesi sayesinde gitmeyince kıl payı kurtulmuş. Yani belki o da orada olabilirdi.) AHU

Therefore, this risk triggered 'the idea of loved ones' being there' which would be elaborated later in the 'Early Responses' part. Lastly, ***having children*** was a risk factor regardless of the child's age. Nevertheless, child's age should be taken into account in some cases, as their developmental differences might trigger different problems, responses and interactions. However, how these factors affect the responses, relations, concerns and coping would be examined in the following parts.

4.1.2. Early Responses

Under early responses given by the mothers at the course of the events, there are three main categories emerged as (a) Emotional Responses, (b) Behavioral Responses, (c) Thoughts. The emotional responses category is consisted of 'shock and confusion', 'feeling incapable' and 'sorrow-worry-terror.' The behavioral responses were 'information seeking'; and 'checking loved ones' to see whether family and friends are fine and 'crying'. The last part, thoughts is composed of thinking 'threat perception', 'thinking survival by chance', thinking 'loved one's being there', and 'future might be worse'. These can be seen in the following Figure 2:

Figure 2: Mothers' experience with terror: early responses

Category 1: Emotional Responses: As mentioned above, there are emotional components of mothers' responses. One of the most cited code under emotional response category was ***shock and confusion.*** Six participants claimed they were *shocked*, could not believe or move when they first had the news:

> There was nothing to do about it, except from looking around anxiously. Everyone was in panic, we did not have the chance to jump outside from the bus. I had a cold blood, and in fact, since I have not lived something like that before, I realized what had happened later.
>
> (Yapacak birşey yoktu o konuda, sadece telaşlı telaşlı etrafa bakmaktan başka, herkes bir panik içerisindeydi, otobüsün içinden çıkıp gidecek halimiz de yoktu. Ama ne yani bir soğukkanlılık, bir de daha önceden öyle birşey

yaşamadığım için bir şeye varamadım, sonradan farkettim aslında ne olduğunu…) EMİNE

But in fact, I did not understand anything at first. I was engaging in my daily routine, I was cleaning the house at that time. Then the jets started to fly. I thought it was a normal flight. Then, someone from my folks, my family called, they said something like that was happening. I said, 'No way!', I did not believe.

(Ama daha doğrusu ilk başta ben hiçbir şey anlamadım. Ben normal rutin günlük hayattaki işlerle uğraşıyordum, hatta temizlik yapıyordum o anda. Sonra uçaklar geçmeye başladı. Uçaklar normal bir geçiş diye düşünüyordum ben. Sonra bizimkiler de ailemden birisi aradı, onlar dedi böyle bir şey oluyor diye. Hadi yaaa felan dedim, inanmadım.) AYSE

The other component merged with this code was *confusion*, as 81% of the participants (corresponding to 17 participants) was confused, needed to search the meaning as they could not understand what had happened and needed to figure out what was the event and its details:

It was confusion, my first response is always confusion. I mean, yes, we are in, we know, there are things broadcasted: there are warnings, here and there, there are warnings everywhere as do not go here and there. For protecting ourselves physically. But what came to my mind was confusion.

(Şaşkınlık, benim ilk tepkim hep şaşkınlık oluyor zaten. Yani evet içindeyiz biliyoruz, yayımlanan şeyler var, uyarılar var, sağda solda şuraya gitmeyin böyle yapmayın sağda solda uyarı var. Hani fiziksel olarak kendimizi korumak adına. Ama aklıma gelen şaşkınlıktı) ZEYNEP

The most shocking thing, the most fearful of all was the uncertainty. Where do these problems stem from? Who are these people? It was not clear…. What was the solution? It was not clear. When you do not know these, it is not clear to solve it. These uncertainty, these general circumstances, it really gave me anxiety.

(Beni en çok sarsan şey, korkutan şey de belirsizlik idi. Sorun nereden kaynaklanıyor? Bu sorunları yaratan kimdir belli değildi…. Bu olayların çözümü nedir belli değildi. Çünkü suç kaynağı, sorun kaynağı belli olmayınca, onu çözmek zaten belli değil. Bu belirsizlik, genel böyle bir hava vardı, ortam vardı. Bana gerçekten kaygı veriyordu…) GULIN

Some of the mothers had even mentioned that they had cried due to this shock and confusion. The anxiety that they mentioned can be interpreted as a part of the threat perception, and is clearly in line with the fact that one of the components in terror attacks

is this vague, unpredictable, confusing nature which could create chaos. As it can be seen from the mothers' experiences, they also felt that terror part of these attacks, by feelings shock, confusion, fear and anxiety.

Feeling incapable was another emotional response mentioned by many as 12 participants argued they felt they cannot do anything either to undo what had happened or to diminish the harm at that moment. It is sometimes coexisted with the first reaction 'shock', which may be due to the threat perception mentioned:

> We talk about those issues but what can we do? There is nothing because of you, or nothing that you can chase, you do not know what to come across, thus, all people are anxious, they are all anxious about it.
>
> (Ya işte bu konularda genelde konuşuyoruz, birşeyler yapma açısına gelince ne yapabilirsin ki? Senden kaynaklanan birşey değil, ya da takip edilecek gibi birşey değil, nasıl birşeyle karşılaşacağını bilmiyorsun, o yüzden bütün insanlar tedirgin, herkes tedirgin bu konuda….) EMİNE

Sorrow, worry and terror was the last code in this category mentioned by more than 90% (19) of the participants; who felt extreme fear, worry or sadness:

> For instance, we felt the shaking of the explosions, these bombs etc, in July 15th, it was something like an earthquake. I do not know why we felt it that much, especially with the ones that was around the sunrise, especially the building was shaken. I was asleep, I woke up. Where could you go, there is no where to go. That time, I felt the fear, I mean. The place that our house is very high, so we heard the sounds of bombs, had seen the helicopters, I felt like the end of the world has reached.
>
> (Mesela o 15 Temmuzdaki patlamaları çok iyi hissettik biz, o bombaları felan çok korkunç birşeydi, deprem gibi birşeydi yani. Niye o kadar çok hissettik bilmiyorum ama sabaha karşı olanda özellikle bina sallandı. Ben yatıyordum, yataktan kalktım. Nereye gidebilirsin ki, gidecek bir yer de yok. O zaman daha korku hissettim yani. Bizim olduğumuz yer biraz yüksek, bombanın patlamanın sesi geliyordu, helikopterler görülüyordu. O zaman böyle dünyanın sonu gelmiş gibi hissettim.) EMİNE
>
> There were too much of those sounds, I though we would not make it through the morning, in any moment a bomb would fall over us, and we would not be able to wake up the morning, I thought so… it continued, and I had prepared a bag for my kid, as saying May Allah protect, because anything might happen. I said, if the bomb fells to somewhere near us and we need to go outside of the home, I prepared a small bag for my daughter and it stayed as such for the following 15-20 days.

> (Çok fazla gürültü vardı, ben sabaha çıkamayacağız, herhalde her an bir bomba üzerimize düşecek ve sabah uyanamayacağız diye düşünmüştüm yani…devam etti, tekrar birşey olabilir Allah korusun diye o akşam hazırladığım çantam. Ben şey diyordum hani bir bomba etrafımıza düşerse dışarı çıkmak zorunda kalırız diye kızım için şöyle küçük bir çanta hazırlamıştım, o çanta uzun süre boşalmadı yani. Yani bir 15-20 gün o çanta hep öyle durdu.) PELİN

As it can be observed, mothers also felt terrorized due to the physical components embedded in these attacks like sounds and quakes. The fear that it might be the end of the world, or they may not be able to wake up implies extreme distress and threat perception at the course of the events. Some mothers had even got emotional while talking about their feelings of that event, even though they had been more than six months ago, which seems to be a sign for these events still cause emotional distress.

Category 2: Behavioral Responses: There were also behavioral responses, some of which were triggered by the emotions mentioned above. For instance, mainly as a result of shock and confusion, the mothers tried to understand what has happened, and had engaged in ***information seeking*** behavior such as checking the media. For instance, more than 65% of the participants (14 participant) reported they had the *information seeking behavior* to figure out what had happened and the details of the event:

> While going to the bus stop, everyone was like running, everyone was talking about things like the explosion happened, things like that happened. Then the line for the internet started to fire, so we learnt people had died.

> (Otobüs durağına doğru giderken herkes koşar şekildeydi yani, işte yani böyle patlama olmuş, şöyle şeyler olmuş herkes konuşuyor. O anda internet felan da çekti, işte ölenlerin felan olduğunu öğrendik.) SILA

> I checked the TV, the internet news. When you google the name of the event, it gives you the details of the news and also on Facebook, by looking at the posts of the people, by reading them.

> (Televizyona baktım, internet haberlerine baktım. Google'dan olayın adına girince sana haberleri veriyor bir de facebook üzerinden insanların yaptığı paylaşımlara bakarak onları okuyarak takip ederek haber aldım.) SAİME

> As I remember, we first heard the sound, then checked Facebook like news-website like sources, then started on whatsapp group to see if anyone knows or heard anything, especially from those friends close to Kızılay, we tried to take information from them as where it happened, what happened, was that a vehicle or a person, or a building, I do not remember the part I learnt about

> where and what but I remember the sources I checked, to figure out to see from where we can get information.
>
> (Hatırladığım önce sesi duyduk, sonra Facebook gibi haber sayfaları gibi kaynaklara whatsapp grubunda kimse birşey biliyor mu duydu mu işte Kızılay'a daha yakın yaşayan arkadaşlardan bilgi edinmeye çalıştık ama nerede olduğu ya da ne olduğu, işte araç mıydı, kişi miydi, bina mıydı, neresi ne olduyu öğrendiğim kısmı çok hatırlamıyorum ama başvurduğum kaynakları hatırlıyorum, işte nerede nasıl bilgi edinebiliriz acaba diye.) ZEYNEP

As it can be seen in the above, internet is an important source for mother's information seeking behavior, mainly for two reasons (1) It is convenient as people only need their cell-phones as SILA had mentioned and (2) It provides faster and more fulfilling information as some of the participants claimed as 'since there were not much in TV, I checked the internet'. However, the problem related to this might be the risk of uncensored images and rumours. Since, people use social media as a source of information, they quickly spread the terror news and rumours, sometimes with the traumatic and vivid images shoot by the ones very close to the event. Another risk might be a kind of transition of the anxiety, as people ask each other whether they had heard it or not, or share the experiences and anxieties of the videos broadcasted by directly exposed people, the anxious tone and risk-alertness might be widespread.

Checking the loved ones was the second most cited code as the people tried to call their family members and friends who were not with them, to figure out whether they are safe and secure or not. Thus, 11 participants (52%) mentioned they tried to check their loved ones:

> Then I called the people around that I know. Asking, where are you, what are you doing, are you ok?
>
> (Ondan sonra çevremdeki tanıdığım insanları aradım. Siz neredesiniz, ne yapıyorsunuz, iyi misiniz diye.) AHU
>
> I was at home when this event at Güvenpark happened, my son was at course, I heard the event and called my son, asked 'Where are you?' I said, 'there is something like that, have you heard?' He said I know mother, and came home…
>
> (Bu Güvenparktaki olayda ben evdeydim, oğlum kurstaydı, patlamanın olayını ben duydum, oğlumu aradım neredesin diye dedim böyle bir olay var haberin var mı, var anne biliyorum dedi ve eve geldi….) KARDELEN

This behavior was clearly a result of the proximity of loved ones, as it can be seen. Moreover, one mother had claimed, she was not concerned about her child since the child never goes there, but was concerned about the nephews and nieces, who like to go Kızılay for education and entertainment. However, since the terror events took place in the city center, most mothers argued for a kind of proximity of themselves and their loved ones and felt threatened by it.

Crying was the last code in this section and even though it was not a frequently cited one, it was observed to be triggered by the previous emotional response group, sorrow-worry-terror mentioned by the mothers:

> I remember being very upset and even I had cried. When I saw that images from teh press, I remember crying. There were little videos published by people around, that they took at that moment, I remember crying.
>
> (Çok üzüldüğümü hatta ağladığımı hatırlıyorum. O patlamadaki görüntüleri gördüğümde basından ağladığımı hatırlıyorum. O insanların, küçük küçük videolar yayınlanmıştı, o sırada insanların orada olanların çektikleri videolardan, ağladığımı hatırlıyorum.) AHU

The behavioral responses codes were not only related to the emotional responses but were also related to different thought dimentions. Therefore, elaborating on the links between these different dimensions of responses would help us to draw a clearer map, like the ones presented in Appendix E.

Category 3: Thoughts: Finally, there were thoughts like *thinking of survival by chance*, composing another frequently cited code. More than 60% (13) of the participants especially in situations when the mother claims they were at the place a few minutes/hours before, or the only reason they were not there at that precise moment is because of chance. As it can be seen, from the risk factor codes, 'proximity to the place' is related with this thought response:

> We were affected from the one in July 15th as such, we were on road at that time. If we were one hour, one hour and half late, we would be catched up in between the gunshots and bombs, thinking that we got affected, I mean if we were 1-1.5 hours late, we would be passing the police station, we would be there. It might have happened to us.

(15 Temmuzdakinden de şöyle etkilendik, o esnada yoldaydık, 1-1,5 saat sonrasında biz arada kalıyor olacaktık onun etkisiyle, çok etkilendik, yani 1-1,5 saat sonra emniyetin önünden biz geçiyor olsaydık biz orada olacaktık…Bir saat sonra geçsek biz olabilirdik orada, bu bizim de başımıza gelebilirdi.) MELİKE

Idea of loved ones being there was another thought responses in link with the proximity code from the risk factors' section like the proximity of a loved one. Because, the response 'Idea of loved ones being there' sometimes emerged from this risk perception and around 30% of the participants (six of them) mentioned it:

For instance, if it was two minutes later, their school bus would be passing there. There, something might have happened to him as well, I mean, I do not know, it did not happen two-three minutes later. I do not know, I, myself, was there a few hours ago, we first think of ourselves all the time. I do not know, it is as if saying we are saved at hairsbreadth but these all came to one's mind.

(Mesela, iki dakika sonra olsaydı, servis de oradan geçiyor olacaktı. Orada ona da birşey olabilirdi, yani işte ne bileyim iki dakika üç dakika sonra olmamış. Ne bileyim işte ben kendim üç beş saat önce oradaydım, öncelikle nedense hep kendimize çeviriyoruz. Ne bileyim işte kıl payı kurtulduk der gibi. Ne bileyim, bunlar geliyor insanın aklına.) KÜBRA

I felt that fear only in the one in Guvenpark, did not have much outside of that. It was the weekend, I guess we watched it on news. My children are not connected to that part, we are not the people going to Kızılay much, thus, I was concerned about my sister, and her children, because her husband goes out there, my nieces go to courses in Kızılay, thus I called to check whether there is something, a problem or something. I did not have the attachment to that place myself, but my relatives, the people I know, their children, of course it is bad to happen to anyone, even you won't wish it to your enemy, but immediately you think of your loved ones, whether they were harmed or not, you are concerned. The loved ones who had the possibility to be there, you fear, your loved one's being among them, of course it is a selfish thought but.

(Korkuyu sadece Güvenparktakinde yaşadık, onun dışında çok olmadı. Haftasonuydu, sanırım haberlerde izledik, benim çocuklarımın çok bir bağlantısı yok o tarafla, Kızılay'a çok giden insanlar değiliz, o yüzden daha o taraflarda bulunan ablamı ve onun çocuklarını merak ettim ben, çünkü onlar, eniştem oralarda takılıyor, yeğenlerim Kızılay'da dershaneye gidiyor, o yüzden aradım birşey var mı yokmu, bir sıkıntı var mı diye. Kendim açısından çok bir bağlantım yoktu, sadece yakınlarım, tanıdıklarım, onların çocukları, tabii böyle bir durumda herkesin başına gelmesi çok kötü bir olay, düşmanın bile olsa olacak birşey değil ama hemen sevdiklerinize zarar geldi mi gelmedi mi onu merak ediyorsun, ondan kaygılanıyorsun. Orada olma ihtimali olan

> sevdiklerimizin başına, tabii korkuyorsunuz, kendi sevdiklerinizin içinde olmasından, bencilce bir düşünce ama.) HAYRİYE

The behavioral response of 'checking whether family and friends are fine' is in-link with this code 'Idea of loved ones being there', as some mothers claimed that they called their loved ones afterwards. In addition to that, it sometimes triggered the emotional response sorrow-worry-terror:

> I felt as if the end of the world came at that moment. You think of your children, your loved ones. My son was not at home, I thought of him.
>
> (O zaman böyle dünyanın sonu gelmiş gibi hissettim. Çocuklarını düşünüyorsun, sevdiklerini düşünüyorsun. Oğlum evde değildi, onu düşündüm.) EMİNE

Threat perception is the most important and frequent pattern as 20 participants (95.23%) claimed the had perceived a threat to their lives or well-being at the course of the events or later:

> You go as normal, but I used to feel as if there would be explosion anytime anywhere. At least, I was crossing Kızılay everyday, thus whenever I went there I feel the anxiety. I say, if it happens in the subway, if it happens, there are many people there, May Allah protect us, they are all people going after their breads. Then someone comes, bombs explode, everybody dies, how much it hearts the people, it hearts. Their children, siblings… And also, when you sleep, especially when you go to bed, it is as if something would explode again…
>
> (Ya işte yine böyle normal gidiyorsun ama yine heran heryerde patlama olacakmış gibi hissediyordum. En kötü ben hergün Kızılay'dan geçiyorum, oraya geldiğim zaman ya da gideceğim zaman insan bir tedirginlik hissediyor. Diyorum ki metroda felan olsaydı, ya olursa, o kadar çok insan var ki orada Allah korusun, işinde gücünde ekmeğinin peşinde insanlar. Bir kişi geliyor bomba patlatıyor, herkesler ölüyor, ne kadar insanların içi acıyor, canı yanıyor. Çocuklarını, kardeşlerini... Bir de tabii ki uykuda en çok insan yatıyor ama tekrar birşey patlayacakmış gibi…) EMİNE

As it was also observed in the quotations above, this threat perception is mostly related to the proximity to the place, in the sense of either being physically close to the place some time at that day or frequently visiting and knowing the place:

> The most striking thing on my mind, was that specific place of the event. As I said, for instance, maybe for thousands of times I had passed by that bus stop, it was very much like 'Oh, no! It can be anyone at that moment!'. It was the

> places that we pass by everyday, it might have been us. I mean, I remember thinking very clearly, the only reason for that is to be coincidentally there.
>
> (En çok aklımda kalan yeri oldu, saldırının olduğu o spesifik yeri odu. Mesela, dedim ya, belki binlerce kez o durağın yanından geçtiğim için, çok çok böyle eyvah herkes olabilirdi o an. Hani hergün yanından geçtiğimiz yer. Biz de olabilirdik, yani, işte tamamen tesadüfen orada olmanız bunları düşündüm çok net hatırlıyorum.) JANSET

*Though of '**Future might be worse**'*, was the last code in this category and especially in relation to the event and their near future, 13 participants reported they thought of it just after the event. It was also in relation with the emotional code 'sorrow-worry-terror':

> It was too scary, I was so afraid, I did not know what would happen tomorrow, and I had children. I thought what I would do. Fear and worry especially. I did not know what would happen tomorrow. I thought about tomorrow. If they restrict us to go out, I check the house, we don't have anything to eat, nothing much, what would I prepare for my children, there is not any bread, any floor. As these comes to my mind, I think about the most necessary items. I did not know what to do. It was a complete chaos.
>
> (Çok ürkütücüydü, çok korktum, yarının ne olacağını bilmiyordum ve çocuklarım vardı. Naparım diye düşünüyordum yani. Korku ve kaygı özellikle. Yarın ne olacağını bilmiyordum. Yani yarını düşünüyordum. Sokağa çıkma yasağı olursa, işte çocuklar, evde bakıyorum yiyecek yok, çok birşey yok, çocuklara ne yaparım, ekmek yok, un yok, bunlar aklıma geldikçe en zaruri ihtiyaçları felan düşünüyorum. Ne yapacağımı bilmiyordum yani. Artık bir kaos.) AYŞE

In this section the early emotional, behavioral and thought responses of mothers were provided with their links to each other. While none were directly exposed, and only around half of the mothers had seen or heard the terrorist attacks, most mothers were traumatized, feeling sorrow, worry and terror; and had threat perception to their lives. This might be related to the perceived proximity to the place, as even if they were not physically in close distance, the attack places were quite familiar for the Ankarains. Moreover, these attacks also caused continues/delayed responses that would be elaborated in the following section.

4.1.3. Delayed Responses

Even though the mothers had initial responses in emotional, behavioral and thought aspects, their responses continued days after they had heard of the attacks. Thus, in

terms of their delayed responses, there were emotional responses as feeling insecure, continued worry and anxiety, feeling emphatic with victims and their families and survivor's guilt. The behavioral responses were mainly finding ways to protect themselves, not going to malls or crowded places, trying to protect their children, talking to friends. Lastly the thoughts were continued threat perception, mistrust to others as thinking others cannot be trusted or be dangerous, trying to avoid details about the events and thinking immigration. These are presented in the following Fİgure 3:

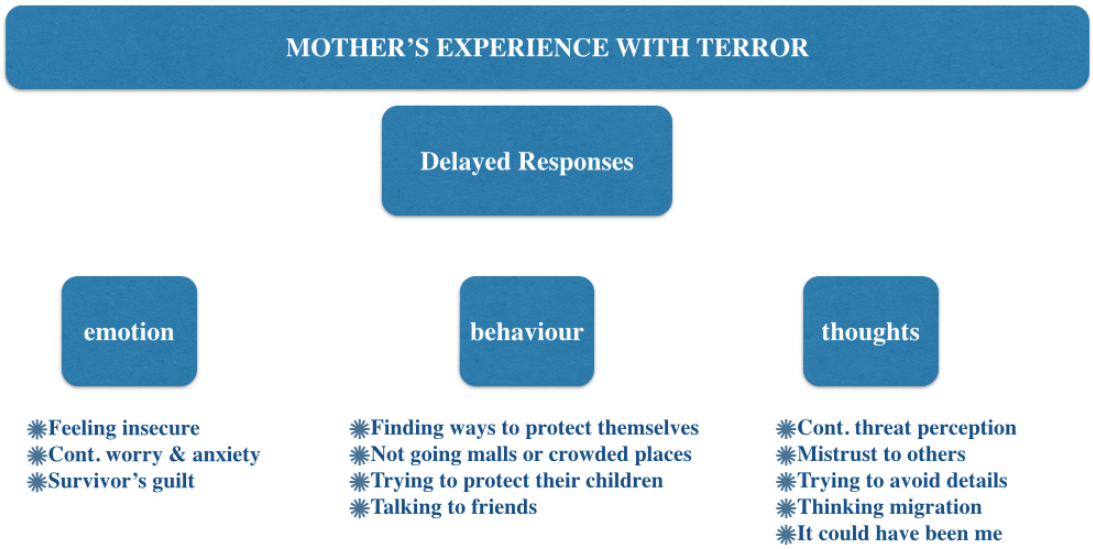


Figure 3: Mothers' experience with terror: delayed responses

Category 1: Emotional Responses: Among the emotional responses category the code ***feeling insecure*** is one of the most frequently cited one, as all of the participants claimed, they felt insecure even after the event. This was in relation with the thought response of continued threat perception, in which people perceive some risk in their everyday lives, either because of rumours or due to "the shaken sense of security":

> Afterwards, always, at those times there were mails and news such and such started to spread, like this country warned, they declared a curfew. And you think that you are not secure, you don't feel yourself secure. You do not think you and your loved ones are secure. When it happens, I want my children and

> I be together in a place, never split from each other, sit together and live whatever would happen together, you think like that at those times.
>
> (Sonrasında hep, bu dönemlerde böyle böyle mailler ya da haberler gelmeye başlıyor, işte şu ülke uyardı, dışarı çıkma yasağı koydu. Ve sen şeyi düşünüyorsun, güvende hissetmiyorsun kendini. Kendinin ve sevdiklerinin güvende olduğunu düşünmüyorsun. Bu öyle olunca da şeyi istiyorsun, hani çocuklarım ve ben hep bir yerde, hiç birbirimizden ayrılmadan oturalım. Ne olacaksa birlikte yaşayalım, diye düşünüyorsun o zaman) AYSE
>
> Of course, one's sense of security is shaken at that moment, of course, because of the city I live in, I might have been there of course. I might have been working at Kızılay at that time, or I might have gone there that Sunday to go out, all those comes to one's mind…
>
> (O anda tabii ki insanın güven duygusu sarsılıyor, tabii ki, içinde yaşadığı şehirde tabii ki ben de orada olabilirdim. Ben de Kızılay'da çalışıyor olabilirdim, o pazar kızılaya gezmek için gitmiş olabilirdim gibi düşünceleri insan kafasından geçiriyor…) ZEYNEP

As presented, this feeling insecurity is also related to the though response as "it could have been me"; which might have caused because of the perceived proximity. Moreover, as mothers were confused and did not figure out what would happen next, their protective side leaded them to keep the children at their sides.

Worry and anxiety was another most frequently cited emotional response as 19 participants out of 21 (90.5%) mentioned feeling worry and anxiety even after the event, still in link with the thought response "continued threat perception":

> A big change happened the days after the attack as we changed our ways of life. For instance, we hesitated to go to the shopping malls. In fact, while I was going to work there were other attacks too, it can be considered as a total of all these, not only a result of that one. I always took the road for work in worry, wondering if something might happen? I started to look the people around me in worry like who is he, does he has a bomb or something in his hand, or any other place of his body?
>
> (Saldırıdan sonraki günlerde de çok büyük bir değişiklik oldu çünkü yaşam tarzımızda bir değişiklik oldu. Mesela alışveriş merkezlerine gitmekten kaçınır olduk. Ben işe gidip gelirken tabii bunun dışında başka saldırılar da oldu tabii, hepsinin total bir sonucu olarak da değerlendirilebilir bu sadece bu saldırının bir sonucu değil. Hep kaygıyla yola çıktım işe gidip gelirken, acaba birşey mi olacak? Etrafımdaki insanlara da hep kaygıyla bakıyorum, kim acaba, elinde bomba mı var, acaba bir yerinde bomba mı var?) AHU

Increased worry and anxiety had resulted in more threat perception and risk-alertness and measures that change and restrict daily lives. This is especially important since more anxiety seems to create more alertness and turns to a vicious circle of anxiety and threat perception, leading to chronic stress. Another change mentioned by mothers in terms of their emotions, were panic and fear of another explosion, and they did not only fear from their own well beings but also became worried about their family members, more specifically children and partners:

> For instance, when my partner also goes, there were messages one after the other, when they say in the shopping malls, since mine also goes there too, I became soo worried, panicked, what if something happens, an explosion happens…
>
> (Mesela ben eşim gittiği zaman mesajlar geliyordu arka arkaya, alışveriş merkezlerinde dedikleri zaman mesela benimki de gidiyor ya oralara, öyle nasıl panik yapıyorum birşey olursa patlama olursa diye…) RUVEYDA

Among mothers' worries, the fear of a civil war was mentioned by some, which seems to be related to the earlier thought response like future might be bad. Multiplied by the increased terror threat, mothers took some measures as a part of their behavioral responses. Inability to protect and provide children, which is an important concern mentioned in the following sections, was again embedded in their responses:

> I do not know, if something happens like the one in July 15th; if a civil war starts, what could I do, who could I go to, where could I run to, I thought such. Also, I need to say this, I did stocks of food for some time, saying Alas! I did that too, I had put all the breads to the refrigerator, bought lots and lots of packages of pasta and bulghur, I was afraid if we cannot go outside of the house after July 15th
>
> (Ne bileyim, 15 Temmuzdaki gibi birşey olsa, bir iç savaş çıksa mesela, ne yapabilirim, kime gidebilirim, nereye kaçabilirim diye düşündüm. Bir dönem şunu da söyleyeyim, stok da yaptım eve, eyvah diye. Onu da yaptım, ekmekleri dondurucuya koydum, paket paket makarna bulgur aldım, 15 Temmuz'dan sonra, işte sokağa çıkamayız, savaş olur diye çok korktum bir de ben…) SAIME

Survivor's guilt was the last emotional response which was coded only in one interview, as the participant mentioned:

> I first thought of their body's dismemberment, how their families must have felt, then I thought it might have happened to someone from my family, I put myself into their shoes, and became so sad. When there is a news like that, I feel a twinge of guilt, when people die innocent, when I was to get entertained, I cannot get entertained, I cannot even buy and eat something sweet, a good meal or something, even the water that I drink is like twinge of guilt, I do not want entertainment. I think of those innocent people who died.
>
> (İlk onların bedenlerinin parçalandığını düşündüm, ailelerinin ne hale geldiğini düşündüm, sonra bunun benim ailemden birinin de başına gelebileceğini düşündüm ve kendimi onların yerine koydum, çok üzüldüm. Böyle bir haber olduğunda ben vicdan azabı çekiyorum insanlar suçsuz yere ölünce, ben eğlenecek olsam eğlenemiyorum, ben bir tatlı dahi alıp yiyemiyorum, güzel bir yemek dahi istemiyorum. İçtiğim su bile vicdan azabı geliyor. Eğlence istemiyorum, o insanları düşünüyorum. Masum yere ölen insanları.) CEREN

Though, survivor's guilt response was important, as she mentioned, even the basic needs like eating, or small luxuries like having a dessert or going for an entertainment was mentioned as a twinge of guilt. This may be interpreted as a trauma-response, and may alarm the mental health workers as there might be more of such cases and may be addressed in their intervention or prevention programmes. However, as it was mentioned by only one participant, it can be thought as in line with the previous literature (Erdur, 2002) indicating survivor's guilt is not a phenomenon as common as it is in the western cultures. Besides emotional responses, behavioral responses were also coded as the second category of delayed responses:

Category 2: Behavioral Responses: In terms of behavioral responses, it seems that mothers started to take measures aiming to protect themselves and their families and started to talk about the incidents to get social support. Thus, one of the most frequently cited code is finding ***ways to protect themselves*** as 12 participants (57%) claimed they tried to take measures to protect themselves in the following days like avoiding risks:

> Such situations continued a little while too, even for some time my partner gave me a lift to work with car. In those days, I used to use the subway for turning back home from work, for some time I did not use the Kızılay subway, my husband gave me the lift between a specific place. It continued like that for 15-20 days.
>
> (Bu durumlar bir süre daha devam etti, bir süre hatta eşim beni arabayla bıraktı bu süreç içerisinde, ama akşam dönerken metro kullanıyordum ama bir süre Kızılay metroyu kullanmadım, başka biryeri kullandım ama belirli bir noktaya kadar eşim beni bırakıyordu. Bir 15-20 gün bu durum böyle devam etti.) SARA

> For instance, I remember not going to the malls but rather to more tranquil places for shopping, the places that would not attract those peoples' attentions.
>
> (Ya mesela alışveriş merkezine bile değil de daha böyle kuytu yerlerden alışveriş, o insanların çok dikkatini çekmeyecek yerlerden bile alışveriş yapmaya çalıştığımı hatırlıyorum.) JANSET

This one was a common response, as in terror inflicted societies, trying to adjust their life-styles for the threat is also common. Moreover, from an evolutionary psychology perspective, trying to find ways to increase our survival fit can be considered as a basic human response. As a part of "finding ways to protect themselves", avoiding public places like ***not going to malls or crowded places*** was another important behavioral response. Since it was coded separately from the previous code, which indicates mothers had taken active measures aiming to protect themselves; 16 mothers (76.2 %) openly referred to avoiding malls or crowded places as a life-routine's change:

> We still fear from going to shopping malls, airports, subways… We fear for going to another city. We tried not to go to the shopping malls, not to go out, not to send my sibling to abroad, not to use train and subways.
>
> (Alışveriş merkezlerine gitmekten, havaalanlarından, metrolardan hala korkuyoruz. Şehir dışına gitmeye korkuyoruz. Avmlere gitmedik, dışarı çıkmamaya çalıştık, kardeşimi yurtdışına göndermemeye çalıştık, hızlı tren ve metro kullanmamaya çalıştık.) CEREN

Protecting children mentioned by 14 participants (66.7%) was another frequent behavioral response. It indicated some life-routine change since mothers tried to take measures to protect their children from the perceived risks in the following days:

> You cannot go out for some time. We could not enter into the crowded places like the shopping malls, we tried to be more protective, even when we had to go, we left our daughter to my mom. We did not take her to out in that sense. Because, all in all, there might be death or injuries in that sense.
>
> (Bir süre dışarı çıkmıyorsun, AVM'ler gibi kalabalık ortamlara girmedik, biraz daha koruyucu olmak durumunda kaldık, biz kendimiz gitmek durumunda kalsak bile kızımı annemlerde bıraktık. Dışarı çıkartmadık, o anlamda. Çünkü sonuçta olabilecek olan ölüm ya da yaralanma o anlamda.) SARA

Talking to friends about the events was the last frequently behavioral response code, mentioned by 16 participants. Most of them indicated their talks are the attempts to make sense of the events and mainly to take measures about the events if they can do:

> I discuss with my partner much, not in a bad sense, to figure out what to do, what to make, obviously we slept less, I mean we cannot talk in the morning, we talk at night…
>
> (Eşimle çok tartıştığımız için, yani kötü anlamda değil, ne yapacağız ne edeceğiz diye daha az uyuduğumuz kesin yani çünkü gündüz konuşamıyoruz, geceleri konuşuyorduk…) GÜLİN
>
> We talk. But I think the only measure to take for that is I don't know, maybe not going out for some time, going out only in the compulsory situations, but there is no measure to take from our points. Thus, our talks were based on what was the event, who did it, saying it was inhumane, why something like that had happened, why something like that occurred, to have a sense of meaning about it.
>
> (Konuşuruz. Ama bunun bence bir tedbiri, ne bileyim ancak işte bir süre dışarı çıkmamak, sadece zorunlu durumlarda belki dışarı gitmek ama onun dışında bir tedbir kendi açımızdan yok zaten. Bu konu olduğunda kimin neden yapmış olduğu, bunun çok insani olmadığı daha çok neden böyle bir durumun ortaya çıktığı gibi daha çok anlamlandırmaya yönelik.) SARA

Therefore, this code is different from talking as an emotional coping mechanism to relieve stress, as it is more instrumental and problem focused: Mothers tries to deal with the confusion that the events had caused, try to analyze the situation and find measures to take to protect themselves. Moreover, the thoughts components of these responses are quite important and will be provided as the third category.

Category 3: Thoughts: In terms of thoughts, the codes emerged were (1) continued threat perception, (2) mistrust to others, (3) trying to avoid details and the thought as (4) it could have been me. Among those, an important code observed in the quotations above, was ***continued threat perception***, seen especially in the emotional responses. Similarly, a rise in ***mistrust to others*** which was the idea that "others' cannot be trusted" or "may be dangerous/terrorists" was also mentioned by eight participants. They started to have a change in their attitudes towards strangers, becoming suspicious of them and felt others might pose threat to their well-being:

> Even when we went to the holiday this summer, there were two men talking Arabic but I do not know where they were from in the same hotel we stayed in. I remember being concerned about that, because ISIS have attacks to touristic places as such and I wondered who are they, what they are doing here, why don't they enter into the sea, if they would not enter into the sea, why they are here, I caught myself asking these questions on my own. Thus, one starts to approach with anxiety to a lot of things, and whether willingly or not one's life-styles changes.
>
> (Hatta şey bu yaz tatile gittiğimizde, kaldığımız otelde iki tane arapça konuşan ama nereli olduğunu bilmediğimiz, o an şeyden kaygılandığımı hatırlıyorum, sonuçta IŞID'in bu tarz turistik yerlerde yaptığı saldırılardan ötürü bunlar kim acaba, burada ne işleri var, bunlar niye denize girmiyor, denize girmiyorlarsa buraya niye geldiler diye kendi kafamda kendi kendime soru sorarken yakalamıştım kendimi. Dolayısıyla bir kaygı ile yaklaşıyor insan birçok şeye ve yaşam tarzını da değiştiriyor ister istemez.) AHU
>
> I was feeling as if in any moment, I would have gone through the same stuff again, I had the fear that the planes would pass by my house, the same things would be lived. I was not even able to take the subway, it lasted like a month or so. But I had to take the subway, but I was very afraid, I used to check people's necks with my eyes, to figure out whether they are suicide bomber or not. I was so bad those days, I was getting anxious of the ones that have the backpack. I was even afraid of the ones having the holter device.
>
> (Heran sanki aynı şeyleri yaşayacakmışım tepemden uçaklar uçacak da aynı şeyler yaşanacak korkusu vardı, metroya bile binemiyorum, rahat 1 ay sürmüştür. Binmek zorundaydım ama çok korkuyordum, sürekli insanların yaka kısımlarını oralarını buralarını gözümle kontrol etmeye çalışıyordum, canlı bomba mıdır vs diye, o zaman çok kötüydüm, sırtında çantası olandan huylanıyordum. Holter takılan insanlardan bile korkuyordum…) NİMET

Trying to avoid details about the events was another frequent response. Even though the news were used to get the information about the events, in the following days, some mothers (seven participants) mentioned that they started to avoid details about the events as stopping or avoiding watching the news or learning/searching the events-related content:

> I try not to think of it. For instance, I try not to watch the news now. I try not to hear something painful because now I am in such a condition that I cannot help myself for not to cry while watching the news.
>
> (Düşünmemeye çalışıyorum. Ya mesela ben şu an haberleri izlememeye çalışıyorum. Sonra, hiç acıklı birşey duymamaya çalışıyorum çünkü artık öyle bir hale geldim ki haber izlerken ağlamadan duramıyorum.) AYSE

> For that reason, I never watch or listen to the news, generally I hear the event, know the news, to be up to date, but do not know much of it.
>
> (O konuda haberleri mesela hiç izlemiyorum, dinlemiyorum, genel olarak olayı duyuyorum, haberi biliyorum, gündemi takip ediyorum ama daha fazlasını bilmiyorum) JULIDE

Thinking immigration was also mentioned by two participants as they tried to take that as a permanent measure:

> In the morning of that night, we were too anxious but my thoughts continue, I want to move away from this country… I mean, when those ideas come to my mind, I search for the options in abroad. I search the England, try to find ways to go there….
>
> (O gecenin sabahında çok endişeliydik ama düşüncelerim devam ediyor, ve ben taşınmak istiyorum bu ülkeden…Yani bu düşünceler aklıma geldiğinde genelde yurt dışı opsiyonlarını araştırıyorum. İngilitereye bakıyorum, oraya gitmenin yollarını arıyorum…) JULIDE

Thinking "it could have been me" was also mentioned by more than 75% of the participants (16 participants), and were seen as mothers' putting themselves into the shoes of the victims or their families, in the following days or while thinking about the event or news:

> I mean, human figures out how close death is to himself. I mean I passed by there and also, I might have been passing by at that moment. Or my child might have been there that day. Or someone that I loved might have been there. It does not matter in fact, how many mothers, how many fathers felt this pain. It is very painful. And they were all innocents… One feels so much sadness, then your own life flashes before your eyes.
>
> (Yani, insan ölümün kendisine ne kadar yakın olduğunu hissediyor. Yani geçtim ve o an, ben de oradan geçiyor olabilirdim. Ya da benim çocuğum da o gün orada olabilirdi. Sevdiğim bir insan orada olabilirdi. Hiç önemli değil zaten kaç tane annenin, kaç tane babanın canı yandı. Çok acı. Ve hiçbir suçu yok, hiçbir günahı yok, hiçbir şeyi yok... Çok üzülüyor insan, sonra kendi hayatınız bir şerit gibi etrafınızdan geçiyor.) AYSE
>
> I did not want to listen to the news any more, and the thing that strike me much was the place of the event. Second thing that I was affected from was that, I was going there to collect data, another young boy had gone there to give lessons and was waiting on that bus-stop. I remember it crystal clear, and I was very much affected by it. He lost his life. I did not know the child but in fact I made such a connection between us: from Metu, from Metu… I was there

> solely for work, to add some value to this world; and he was there to do something good and… I thought those, and most probably I formed a link between us.
>
> (Daha fazla dinlemek istemedim, sadece beni etkileyen şey orada olması. İkinci çok etkilendiğim konu da şuydu, ben veri toplamaya gidiyordum oraya, Odtü'lü başka bir çocukcağız da ders vermek için o sırada gitmiş ve o durakta bekliyormuş. Onu da çok net hatırlıyorum ve çok etkilendiğimi hatırlıyorum açıkçası. O da hayatını kaybetti. Çocuğu tanımıyordum ama açıkçası şöyle bir bağlantı kurdum: Odtülü Odtülü. Ben tamamen iş için, bu dünyaya birşey katmak için oradaydım; o da güzel birşey yapmak için oradaydı ve...Onları düşündüm açıkçası, büyük bir ihtimalle bağlantı kurdum ikimizin arasında.) JANSET

It is also important that, despite mothers keep searching to deal with their confusion, and have an early response of information seeking behavior and a delayed response of talking to others about the events; they seem to be unhappy with the details of the news. Their delayed response, avoiding details about the news might also be a sign of their being affected by their content, which is a part of this thesis. Thus, this far, the early and delayed responses of the mothers were given. Since news was an important factor affecting their responses, in the following section, the content of the news affecting mothers would be introduced.

4.1.4. News Content Affecting Mothers

This group includes "No content remembered", "Being affected by young deaths", "Being affected by illness and death of children" and "Being affected by Martyr news". It was important to note that, 14 participants (66.7%) indicated they were affected by the news, since the content of the events are traumatizing, which caused disturbance. Their examples are like dead bodies, bloods etc:

> I think the one that affected me most was the Guvenpark explosion, because I got affected from the visual images much. I had just come to house, I opened the Tv, and heard the event at that moment, but there were no visual images. Then the door bell rang, the nieces came and showed me those, I was so affected from them. While I say the visual images, I may say the corpses just after the bomb, we saw them, and they were not given in the TV, but it was widespread in the internet. It affected us much. We did not see those live, but it affected. Especially the corpses that became stiffen, they are not like that can be forgotten really…. Since I was affected from these imageries much, I did

not search any other source of news. They were all appearing before my eyes, thus, I did not check the rest, I did not want to check any other thing.

(Ama herhalde en çok etkilendiğim Güvenparktakiydi, çünkü görsellerden çok etkilendim. Evimize henüz gelmiştik Kızılay'daki olayda, patlamada, geldim, televizyonu açtım, anında olayı duydum ama tabii görseller yok. Kapı çalındı, yeğenler geldi gösterdiler felan çok etkilendim. Görseller derken de patlama anı sonrasındaki cesetler diyebilirim yani onları gördük, ki televizyonda verilmedi bunlar ama internette yayılmıştı. Bu bizi çok etkiledi, gözümüzle görmedik ama yine de bu çok etkiledi. Özellikle duraktaki patlama sonrasındaki kaskatı kesilmiş cesetler felan unutulacak gibi değil hakkaten…. Gördüklerimden çok etkilendiğim için başka bir kaynaktan da haber aramadım. Gözümün önüne geliyordu zaten görüntüler o yüzden devamına hiç bakmadım, herhangi birşeyden de bakmak istemedim.) MELIKE

In terms of content of the news, the mothers are generally being affected by ***young deaths,*** and ***the martyr news***, mentioned by 12 and 8 participants respectively:

Let me be clear, it is not only Ayşe-Fatma, anyone who found herself in the middle of these events, all of the teror victims, I do feel sorry for them all. Because when we start our lives, we have an aim. We have a goal, we educate, in order to become something, for instance, to have a job, to earn money to support ourselves, for instance what do I want to be, a doctor. I want to become a doctor, to be helpful to people, to help them to remove their disturbances. Everyone try to have a road of herself. But unfourtunalteyl, for nothing, all lives of these people fade.

(Ya ben açık konuşayım, sadece Ayşe-Fatma değil de gerçekten olayın içinde kalıp da terör mağduru olan insanların hepsi için çok üzülüyorum. Çünkü biz hayata başladığımız zaman bir amaç için başlıyoruz. Bir hedefimiz oluyor, okuyoruz, birşeylere gelmek için yani sadece ne bileyim ben kendi adıma konuşuyorum, ne bileyim işte benim bir mesleğim olsun da işte para kazanayım da geçimimi sağlayayım değil, ben ne olmak istiyorum mesela, doktor olmak istiyorum. Ben işte doktor olayım, insanlara faydam olsun, işte insanların sıkıntılarını gidereyim. Herkes kendine bir yol tutmaya çalışıyor. Malesef bir hiç uğruna insanların bütün hayatı sönüyor.) KÜBRA

Where was it, a few days ago, he was 26 years old, he would have the wedding ceremony in the fete, he became martyr, I was very affected from that. The other one, he was about to be a dad, 20 days away from his wife's labor, I was also affected from these two. Most of the time, one life goes but there are the ones stays behind, poor fiancee waiting for the wedding, the other should she be sorry for the ones behind, the child in her womb?

(Geçenlerde neredeydi, 26 yaşında, bayramda düğünü olacakmış, şehit olmuş ondan etkilenmiştim bir de bir senedir evliymiş, baba olacakmış 20 gün kalmış eşinin doğumuna o iki şehit haberinden etkilendim. Çoğunlukla giden bir can

ama geride kalanlar için nişanlı yazık düğünü bekliyor, diğeri de geride kalanlarına karnındaki çocuğa mı acısın?) VAHIDE

Additionally, the two less frequently mentioned issues are news about ***illness and death of children*** and ***no content remembered.*** As it was presented in the quotations, news might have played a role in the making the exposure of mothers' terror stress and trauma more intense, due to its content and saliency.

In sum, in terms of mother's responses, one of the salient thoughts that participants reported was that they were alive by chance. The proximity factor leaded participants to think that they survived by chance. A delayed response version of this thought was observed as the idea that "it could have been me". The ones claiming to have seen or heard the events were about half of the mothers, who usually responded with shock. Another emotional response accompanying shock was confusion, as more than 80% of the participants referred the confusion, claiming they could not understand what was happening. These seem to lead the mothers to engage in information seeking behaviors, checking loved ones' security at the course of the events. Since the incidents were unpredictable, more than half of the mothers seems to fear that future might be worse and reported they even after the event continued to feel insecure. Additionally, almost all of the mothers perceived terror threat, which still continues as related to their daily lives. Mistrust to others, and trying to take some measures to protect themselves and their families were other delayed responses that are linked to the threat perception. Finally, as an emotional response almost all of the participants, even the ones had observed the incidents through media, indicated that they feel sorrow, worry and terror. The overall picture can be seen in the concept map, provided in Appendix E.

4.2. Children's Experience with Terror: Testimonies of mothers

The section is based on the interview questions in the interview part of the same name. Since the population and sample of this present study is the mothers, this part is related to how mother's testimonies over their children who experienced these traumatic events. Thus, three categories as risk factors; child's responses and mother's responses to the

child's responses emerged in this part. The summary of these codes is given in the following Graph 4:

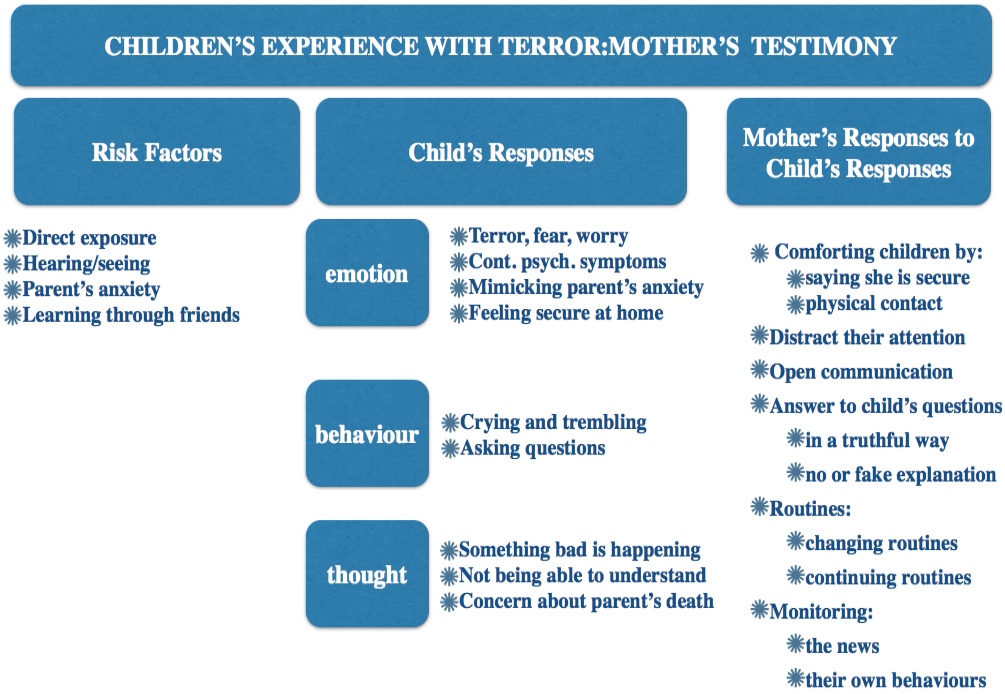


Figure 4: Children's experience with terror: Mothers' testimonies

4.2.1. Risk Factors

This subsection is about the risk factors that the children had, and as presented in the methodology chapter, all of the children were in their normal developmental stages, none were with any disability physically or mentally:

Table 4
Summary of risk factors distribution of children mentioned by mothers

Risk factor	No. of participants	Percentage of participants
Direct exposure	0	0
Hearing/seeing	10	47.6
Parent's anxiety	15	71.4

Table 4
Summary of risk factors distribution of children mentioned by mothers

Learning through friends	10	47.6

Even though none of the children had ***direct exposure*** to the event, there was only one teenage child who had observed the Kızılay explosion closely:

> Let me tell you like that, last year in the explosion in Ankara Kızılay Guvenpark, my son was there, I used to send my son to an English Language course. But we were not with him as his parents. The course's building is on the opposite-cross of Guvenpark, a little bit upwards. While my son was leaving the course to take on his school bus, the explosion happened, and my son lived many traumas since he had experienced (seen) these flames, siren sound, that chaos; and called me crying.
>
> (Şöyle söyleyelim, geçen sene Ankara Kızılay güvenparktaki patlamada benim oğlum oradaydı, özel ingilizce kursuna gönderiyordum ben oğlumu. Ama ebeveyn olarak, anne ve baba olarak biz yanlarında değildik. Zaten güvenpark'ın çaprazında o kursun yeri, çok az birşey yukarıda kalıyor. Onlar kurstan çıkıp servise binerken patlama oluyor, işte oğlum o alevleri, o siren seslerini o hengameyi yaşadığı için çok travmalar yaşadı, ağlayarak beni aradı.) KUBRA)-

Additionally, as mentioned in the previous section of mother's risk factors, another type of exposure like ***hearing and seeing*** needs to be added to the risk factors. Thus, mothers claiming their children had been affected due to hearing/seeking some cues during the events (10 participant, 47.6%) and as the opposite of the previous code, nine participants (42.9%) claimed their children did not hear/see the events, were important to note:

> 15th of July, that sound affected us most, the sounds of the planes, the bombs being dropped, they scared us really, both me, my family and my daughter. My mom is panicky, tried to run to the streets, my sister cringed somewhere, the children were crying. There was my male niece at the age of 11 and my daughter, they started to cry.
>
> (15 temmuz, o ses bizi çok etkiledi, uçakların sesi bomba atılması felan bayağı korkuttu, beni de ailemi de kızımı da. Annem panik ataktır, o direk kendini sokağa atmaya çalıştı, kız kardeşim bir yere sindi, çocuklar ağlıyordu. Misafir kızkardeşim vardı 11 yaşında erkek yeğenim ve kızım ağlamaya başladı.) NİMET
>
> My child heard that noise, the sounds of the planes etc, did not want to sleep, was afraid and could not give it any meaning, because they are not that

> conscious about these issues, they all hear that terror events but never in Ankara or Istanbul, no matter how much they hear, they hear them in the east, there was a worry but he did not understand what had happened.
>
> (Çocuğum da gürültüleri duydu, uçak seslerini felan duydu, uyumak istemedi, korktu tabii ki de anlam veremedi çünkü çok da bilinçli değiller bu konularda, terör olayları hep duyuluyor ama Ankara'da, İstanbul'da felan hiç duymuyorlar, ne kadar duyuyorlarsa da doğuda duyuyorlar, bir endişe oldu ama ne olduğunu anlamadı.) MELIKE

As it can be observed, children like their mothers was confused and could not really understand what was going on regardless of their ages. The older children were able to understand something bad was happening and wanted to search the meaning of what was going on. In the first quotation, the behavioural response of crying was mentioned as in link with children's relatives' responses, implying the need for a systemic approach in understanding their reactions.

Parent's anxiety was another risk factor code, especially since 15 mothers (71.4%) claimed their children learnt what had happened with them at the same time or from the parents:

> In fact, she did not experience that directly, but she had seen that from the TV, July 15th he had seen it from the TV, we were not in Ankara that time, but she had experienced it through TV. In fact, there, she became scared and started crying mostly because of our worries or talk and could not make sense of what was happening she also became anxious. We became more careful of our speech, than tried to motivate her for playing, and recovered from that situation better, by calming her. Then, she did not ask any questions, but she had asked what is happening at first. We told her not to be scared, because she had first had the concern that whether something would happen to us.
>
> (Yani birebir olarak tanık olmadı ama tabii ki de televizyondan gördükleri oldu, 15 Temmuz'daki olayı televizyondan görerek, biz Ankara'da değildik ama o da televizyondan görerek bu olayları deneyimlemiş oldu. Aslında oradaki şeyde bizim konuşmalarımızdan, endişelerimizden belki kaynaklı olarak o da bu anlamda korktu ve ağlamaya başladı, ne olduğunu anlamlandıramadığı için ister istemez kaygılandı. Biz de konuşmalarımıza dikkat ettik, onu oyuna yönlendirdik sonra süreci daha iyi atlattık, onu sakinleştirdik. Sonrasında soru sormadı ama ilk başta hani ne oluyor gibi soru sordu ona korkmaması gerektiğini söyledik. O ilk başta bizlere birşey mi olacak gibi bir kaygıya düştü.) SARA

As mentioned before, people as social animals are affected from each other and parents might transmit their feelings to their children. Therefore, parent's anxiety would clearly send the child the assurance that there is something wrong. Especially for younger children, who cannot read the threat alarms of the surrounding as much as an adult or adolescent does, parent's anxiety may be a clear indicator of threat. Another risk factor was ***learning it through friends.*** Even though some parents consciously tried to prevent her children from learning what is going on, some children learn the attacks or terror-related concepts from their friends as in Pelin's case. Pelin's child had observed the smoke in Kızılay explosion, however the child's learning of the concept of bomb and developing a fear from it was related to the experiences with friends in kindergarten:

> She had learnt the first explosion because of us, most probably, then in 15th July case, most probably in school there were things like while they were asleep they used to open the windows to let the fresh air in. Say, there is a passing motorcycle and while they go they make the sound "pat, pat, pat". There her friends used to say "bomb, bomb, bomb". She said my friends do not sleep, they say bomb, bomb while the motorcycle passes, because of that I also mistake it for a bomb, and I cannot sleep as well. But she does not make something, she just hears from her friends, if I say a bomb or not, nothing would make her to go through a trauma.
>
> (İlk kızılaydaki patlamada muhtemelen bizden öğrendi, sonra 15 Temmuz olayında da muhtemelen okulda şey oluyormuş, bunlar uyurken camları açıyorlar hava girsin diye, diyelim ki bir motor geçiyor, motor geçerken pat pat ses çıkartıyorlar ya, arkadaşları ona bomba bomba bomba diyorlarmış, onu diyordu. Anne motor geçiyor ama bomba bomba diyor arkadaşlarım, uyumuyorlar, ben de onlar yüzünden bomba patlıyor zannediyorum, uyuyamıyorum felan diyordu. Ama hiçbir şey yapmıyor, sadece arkadaşlarından gördüğü bomba mı, bomba desem de birşey olmayacak, travma yaşamayacak, demesem de birşey yaşamıyacak.) PELIN

Moreover, for older children, such a learning experience might be risky as they may be affected from their peers without a proper explanation or security-claim of the parent. For instance, cases like SILA's and KUBRA's children, who lacked a proper adult-assistance when they had traumatizing experiences like friends' losing a parent in coup attempt and seeing the explosion was examples of such risk. Both being adolescents, these children had been comforted only after they reach home and received their mother's comforting responses. However, before proceeding to how mother's responses to their children's experiences; the question of how children responds to terror events in the eyes of their mothers, should be answered.

4.2.2 Children's Responses

Mother's perception of children's responses to the event is composed of nine codes in emotional, behavioral and thought aspects. From the emotional perspective, terror fear and worry responses, continuing psychological symptoms, mimicing parent's anxiety and feeling secure at home are important codes. Behavioral aspect of the responses is composed of children's crying and trembling, and asking questions. The last category is cognitive aspect is understanding/thinking something bad is happening, not being able to understand and concern about parent's death. Even though there are some in the literature claiming there might be gender differences between adolescent's reactions to trauma, such as Barber (1999, 2008) since the focus of the study was not children's reactions, and the sample was not wide enough to grasp such differences, and the children's reactions were similar across genders, sex of the child was not studied as a variable.

Category 1: Emotional Responses: In terms of emotional aspects of children's responses, ***terror, fear, worry responses*** of the children code; cited by 57.1% (12 participant) of the mothers was an important code. Keeping in mind that only half of the mothers indicated their children had seen/heard the attacks, it is a high rate. Moreover, this emotional code generally co-existed with ***crying, trembling responses of the child*** as 33.3% (seven mothers) claimed such:

> Others were asleep, they did not realize but the older daughter was afraid, each time the jets pass by. We were outside for some time, then when we came home, for a long time, whenever the jets passed, she felt the fear that something might be happening…. First, she was trembling like an aspen leaf. She was trembling, she was afraid. You know, it is, one's heart skips a beat due to fear, she was like that, in a desperate situation. She was crying, trembling.
>
> (Diğer çocuklar uyuyorlardı, farkedemediler. Onlar farkedemedi ama büyük kız korktu, her uçak geçtiğinde. Dışardaydık bir müddet, sonra evde her uçak geçtiğinde bir şey olacak diye ağladı, titremeye başladı. Bayağı uzun bir müddet her uçak geçtiğinde birşey oluyor diye korku yaşadı... Valla ilk şeyi diyim zangır zangır titriyordu. İşte titriyordu, korkmuştu. Hani bir insanın eli kalbinde küt küt atar, çaresiz bir vaziyetteydi, o haldeydi. Ağlıyordu işte, sarılıyordu…). AYSE
>
> I mean, at the Guvenpark suicide bombing event, just around 10 minutes before the explosion we were also in Kızılay. When we entered the subway, they told us that there was something like a bomb exploded. But we did not realize the

> importance of that at first, but when my daughter also heard the news she became extremely afraid. When she came home, her fear started again. She started to cry.
>
> (Yani bu kızılaydaki bir canlı bomba patlamasından bir 10 dakika kadar önce kızılaydaydık. Patlamadan, metroya bindiğimizde söylemişlerdi canlı bomba patladığını. Tabii ki işin ciddiyetini biz çok fazla anlayamadık o zaman tabii işte o haberlerden duyduğumuz kadarıyla tabii ki yine kızım çok aşırı derecede korktu. Eve gelince de korkusu başladı yine. Ağlamaya felan başladı.) SILA

Both mothers of these quotations given had also mentioned that they were terrorized too, and suspected that their anxiety's might have affected the children or at least prevented them to give an effective assistance. Moreover, similar to mother's responses' division of early and delayed responses, some children were claimed to have delayed emotional responses. In terms of these responses, six mothers argued their children had ***continuing psychological symptoms***:

> My daughter for instance, now fears more, even from the things that she would not be fearing, now she is more anxious and fearful, from sounds and like, they all started after those. When I am not at home, I could not monitor her eating etc lately, but I remember her not sleeping, saying I am afraid and this lasted very long and even still she does not want to stay home by herself, sleep at the room. It cannot be said that we got recovered but we try not to make it bigger, we try not to mention more about it, we say "there is nothing" and try to pass it off.
>
> (Kızım mesela, daha çok korkuyor artık, korkmayacağı birşeyden bile, daha tedirgin daha korkak, seslerden felan, bunlardan sonra oldu hep. Sonraki dönemde evde olmadığımdan yemesini felan çok takip edemiyorum ama korkuyorum diye uyumuyordu bunu hatırlıyorum, bayağı sürdü bu ve hala daha tek başına evde kalmak, odada uyumak istemiyor. Daha da geçmiş sayılmaz ama, çok büyütmemeye çalışıyoruz açıkçası, çok şey olmasın diye çok dillendirmemeye çalışıyoruz, yok birşey felan diyoruz, geçiştirmeye çalışıyoruz.) EMINE
>
> She started not sleeping alone, she used to not to go to bed before her elder sister, but now, luckily, she forgot it.
>
> (Yalnız yatamamaya başladı, ablasından önce yatağa giremiyordu ama şu an unuttular çok şükür.) NUR

The most common of these psychological symptoms can be listed as continuing fears and anxieties, sleeping problems, increased alertness. In this code, the role of media was another important aspect to take into consideration. As the effects of news were

discussed in related to mother's being affected from them, similarly for the fear responses of children, the news also seems to have played a role:

> He was affected from the martyr news and I could not think at that time that he would have been affected, sometimes parents also make mistakes. They cannot foresee these. When he had seen the martyr news, the ones became martyr there, having children or having a pregnant wife, people crying, you know, it was frequent for some time, everyday there were this news. He assumed that when he grows up and goes for the military duty, would be martyr too. Also, our dad was not with us when the coup event happened. We were affected at that time too. That time there was these tensions between Russia and Turkey, I do not know how he caught it from the news but when the jets started to fly, he told me to shut down the windows and doors, I know they are the Russian jets flying. They came here to shoot us, they would drop bombs over us, they would kill us! and started to tremble and cry.
>
> (Şehit haberlerinden çok etkileniyordu ben de çok o ara düşünemedim hani etkileneceğini, bazen ebeveynler de hata yapabiliyor. Kestiremiyorlar bunu. Şehit haberlerini görünce, orada şehit olanı, işte çocuğu vardı ya da eşi hamileydi gibi insanların ağladığını felan görüyor, bir de bir dönem çok artmıştı biliyorsunuz, her gün şehit haberleri. Kendisinin de bu şekilde büyüyüp, askere gittiği zaman şehit olacağını hesaplıyordu. Bu darbe olaylarında da biz yalnızdık evde, babamız yoktu. O zaman da çok etkilenmişti. O zaman haberlerde de Rusya ile Türkiye'nin arasında gerginlik olayı olmuştu ya, mesela haberlerden orayı yakalamış nasıl yakaladıysa, o jetler uçmaya başladığında bana kapıları kapat, camları kapat, biliyorum, Rusya'nın uçakları uçuyor. Onlar bizi vuracak, bize bomba atacaklar, bizi öldürecekler diyip titreyip ağlamaya başladı) KUBRA

Additionally, some children from different age groups became anxious observing their parents, as from the interviews of 8 mothers, the third emotion-based code ***mimicing parent's feelings/anxiety*** emerged:

> We told her to calm down, said her everything would be all right. But of course, since we were also afraid, she felt that we were afraid. I had screamed with her, since she had known I was also worried, she became anxious, becoming calm for her became harder… In fact, what we say does not matter there, because mother might be worried too. … She does not say anything but she has the worries. Her fear and panic, she looks inside my eyes. To figure out whether I am sad or worried or is there something bad?
>
> (Sakin ol dedik, düzelecek herşey dedik. Tabii biz de korktuğumuz için o anda bizim de korktuğumuzu hissediyor. Onunla birlikte ben de bağırdım, benim de endişelendiğimi bildiği için sakinleşmesi de onun için... Aslında ne söylesek orada boş, anne de endişelenebiliyor orada. …. Ya aslında böyle direk dile getirdiği birşey yok ama endişesi var tabii. Korkusu paniği diğer, benim

gözlerimin içine bakıyor. Acaba birşeyden üzülüyor mu, endişe ediyor mu diye ya da acaba kötü birşey?) AYSE

He heard while watching TV or I talk to my partner. Once, I cried so much to the event that was in Istanbul, I cried a lot. When he wanted to play a game, I couldn't make it and cried. He cries whenever I became emotional. When I locked my door, and started crying under the blanket, he was affected from that and he also cried. CEREN

(Televizyonda izlerken ya da ben eşimle konuşurken duydu. Bir defasında çok fazla ağladım. İstanbuldakinde. Çok ağladım, ben o oyun oynamak istediğinde dayanamadım, ağladım, her duygulandığımda ağlıyor. Ben kendimi odaya kapatıp battaniyenin altında ağladığımda o da benim duygularımdan, tavırlarımdan ağladı. CEREN)

For a deeper understanding of whether the relationship between children's feelings and mothers' feelings the following table is, Table 5 created, and as it can be seen, especially for younger children who had experienced the event with the mother; their responses were quite similar.

According to the table, the emotional responses were similar to the ones provided by the mothers, which leads to various behavioral responses for similar rationals and needs, which would be elaborated in the following sections. In this preceding Table 5, it can be seen that if the mother's reaction is available to the child, mainly the child had the similar reactions. Thus, the confusion, fear and anxiety of the mother seems to be mimicked by the child:

Table 5

Summary of the mother-child response dyads mentioned by mothers

Children ID	Mother	Child's age	Mother's responses	Child's responses
Child ID#1	Ahu	3	Anxiety, Sorrow	NA*
Child ID#2	Gülin	3	Confusion	Confusion
Child ID#3	Zeynep	3	Confusion	NA*
Child ID#4	Jülide	4	Anxiety, Fear	Worried

Child ID#5	Kübra	4	Anxiety, Sorrow	NA*
Child ID#6	Pelin	4	Anxiety, Fear	Fear
Child ID#7	Rüveyda	5	Anxiety, Worry	NA*
Child ID#8	Vahide	5	Anxiety, Worry	Fear
Child ID#9	Ahu	5,5	Anxiety, Sorrow	NA*
Child ID#10	Sara	5,5	Anxiety, Confusion	Anxiety, Fear, Confusion
Child ID#11	Deniz	6	Worry	NA*
Child ID#12	Ceren	6	Anxiety, Sorrow, Fear	Anxiety, Fear
Child ID#13	Ayşe	6,5	Anxiety, Worry	NA*
Child ID#14	Ayşe	6,5	Anxiety, Worry	NA*
Child ID#15	Rüveyda	8	Anxiety, Worry	NA*
Child ID#16	Sıla	8	Anxiety, Confusion	Anxiety, Fear, Confusion
Child ID#17	Janset	9,5	Anxiety, Worry	NA*
Child ID#18	Vahide	10	Anxiety, Worry	Anxiety, Worry
Child ID#19	Ayşe	10	Anxiety, Worry	Anxiety, Fear
Child ID#20	Sıla	11	Anxiety, Confusion	Anxiety, Fear, Confusion
Child ID#21	Kübra	12	Anxiety, Sorrow	Anxiety, Sorrow, Traumatization
Child ID#22	Kardelen	12	Resilience	Resilience
Child ID#23	Nimet	12	Anxiety, Fear	Anxiety, Fear

Table 5 (continued)
Summary of the mother-child response dyads mentioned by mothers

Children ID	Mother	Child's age	Mother's responses	Child's responses
Child ID#24	Nur	13	Anxiety, Sorrow, Fear	Anxiety, Fear, Worry
Child ID#25	Saime	13	Anxiety, Worry	Anxiety, Fear
Child ID#26	Hayriye	13,5	Worry	Nothing
Child ID#27	Emine	14	Anxiety, Fear	Anxiety, Fear

Child ID#28	Melike	14	Anxiety, Fear	Nothing
Child ID#29	Kardelen	14,5	Resilience	Resilience
Child ID#30	Rüveyda	15	Anxiety, Worry	Nothing

Category 2: Behavioral Responses: There are also some behavioral implications of child's emotional responses. ***Crying and trembling responses*** was mentioned in above quotations. The second most frequently mentioned behavioral response was ***asking questions,*** as some children needed more explanation from their parents:

> She asked what the coup means, I told that from the google.
> (Darbe ne diye sordu, googledan açtım söyledim.) NİMET

> Now he asks "Mom, I wonder, whether has a bomb exploded?" whenever an ambulance passes by, askes whether something had exploded, when the he hears fireworks.
>
> (Artık her ambulans geçtiğinde diyor anne acaba bomba mı patladı diye soruyor, bir havai fişek patladığında patlama mı oluyor diye soruyor.) CEREN

The behavioral responses obviously have some thought dimension, especially can be learnt from the older children. However, the focus of this present thesis is the mothers, and their perceptions and testimonies are more important than the child's real responses for our purposes. Because, a mother who thinks their children is not affected might have a quite different response or stress level than the traumatized mother who keeps thinking her children are affected too. Therefore, the last category: thoughts should be interpreted keeping these in mind.

Category 3: Thoughts: As it can be seen, this code is rather related to the cognitive abilities or development level of the child, thus is mentioned mainly by the mothers of older children. It is in line with the previous information that 14 mothers had children older than age of six. Thus, the code "***thinking/understanding something bad is happening***" was related to its opposite cognitive code "***not being able to understand***", mentioned by 10 mothers, especially by the mothers of younger children:

> Also, since he is young, he would not be able to understand… I mean, maybe he could understand but we did not want to tell already. We did not feel the necessity as well. Thus, he had not still seen those news…

Hem de yaşı küçük olduğu için zaten kavrayabileceğini ... Ya belki anlardı ama anlatmak istemiyorduk zaten. Gerek de duymadık. Hala da bu haberleri görmedi…) GULIN

She was asleep, then woke up because of the sounds, wanted to play in her room, but I did not want her to play there, I was afraid that something might happen, tried to take her to my side with excuses, then she became asleep again. I think she had realized something dangerous might have been happening, but of course she could not understand what was happening mentally, she must have felt something only.

(O uyuyordu sonra uyandı gürültüden, odasında oynamak istedi, ben onun odasında oynamasını istemedim, birşeyler olur diye korktum, bahanelerle yanıma çekmeye çalıştım, sonra da zaten uyuyakaldı. Tehlikeli birşeyler olduğunu hissettiğini düşünüyorum ama hani tam olarak elbette zihnen ne olduğunu anlamamıştır ama bence birşeyler hissetmiştir.) JULIDE

I assume they do not feel and realize those things since they are young but I do not know whether it is true. We try not to make them realize since we want them not to be afraid.

(Hiç, onlar küçük oldukları için hiç hissetmiyorlar diye düşünüyorum, doğru mu bilmiyorum Hissettirmiyoruz da zaten korkmasınlar şey yapmasınlar diye.) RUVEYDA.

However, some of the codes were based on the children's confessions about their concerns as the most important of all was ***thinking/concern about parent's death,*** even though it was the least frequently cited. For instance, AYSE claimed her daughter has developed a fear of losing the parents, not only because of these terrorist events, but also because of his father's heart attack last year. NIMET on the other had claimed her child started to see nightmares about Nimet's dying, which started only after the attacks. Even though they are not widespread in this present sample, it might show an alarming picture for the mental health professionals.

4.2.3 Mother's Responses to the Child

Mother's responses to children's reactions to the events were important as six codes emerged like (1) "comforting the child (a) saying she is secure and it is normal and (b) by physical contact like cuddling, holding hands, (2) "distracting the child's attention" to motivating the child towards other stuff, (3) "open communication with the child" leading her to ask questions and tell his/her concerns, (4) answers to the child's question

(a) in a truthful way (b) by no or fake explanation, (5) decision about routines (a) by continuing the routines, (b) by changing it; and finally (6) monitoring (a) the news (b) their own behaviors. Except from distracting the child's attention and setting new rules for the changing routines, all of the codes were frequently cited by the mothers.

Category 1: Comforting the child: To begin with, 12 mothers (57.1%) reported they tried to comfort their children ***by saying s/he is secure and it is normal***:

> When I woke up, we do not know what is going to happen, we were also worried, but we did with only saying "don't be afraid, my daughter, there is nothing", because if we say something, she would be more worried, we said all would pass, everything would be all right and she told us of course, "If there is nothing, why all these people are awake and in roads, why there are these much of events?"
>
> (Ben kalkınca, ne olacağını biz de bilemiyoruz, biz de tedirginiz ama sadece korkma kızım birşey yok demekle yetinebildik çünkü birşey söylesek daha çok tedirgin olacak, geçecek hepsi düzelecek felan dedik sadece. O da şunu söyledi tabii ki, birşey yoksa niye bu kadar insan sokakta, niye bu kadar olay var?) EMINE
>
> She did not cry but I understood that she feared when I cuddled her, then she told me that she was afraid. I tried to say things to calm her down, like nothing will happen, these are temporary etc.
>
> (Ağlama olmadı ama sarılarak korktuğunu anladım, sonradan çok korktuğunu söyledi. Sakinleştirici şeyler söyledim, birşey olmayacak dedim, bu durumların geçici olduğunu söyledim.) SAIME

It may sometimes be related to comforting the child, especially after hearing the traumatic news like the death of a friend's father during the coup attempt, especially when the children make the analogy between their own parents and their friends. Both SILA and JANSET had faced such a case and comforted their children saying death is natural, normal and can happen to anyone, but they do not need to be worried about those. Along with all those comforting attempts, some mothers (6 participants) claimed they tried to calm their children by hugging, kissing, holding hand or sleeping together, coded under ***comforting the child by physical contact***:

> While my son came back home, he was trembling and he did not stop holding my hand even in his sleep, and as I said before, we slept together like a month or so.

(Eve geldiğinde oğlum titriyordu ve sabaha kadar elimi hiç bırakmadı, hiç ama hani uykuda bile elimi bırakmadı, dediğim gibi bir aya yakın beraber yattık.) KUBRA

Only in 15th July, I had my sister, my nephew, mom with us, and my other sister who lives with us. I was cuddling her, saying "be calm my daughter", they would all end soon. She was crying and was afraid, she was closing his ears while the jets pass by.

(Bir tek 15 temmuz, kızkardeşim vardı, yeğenim, annem vardı, birlikte kaldığım kız kardeşim. Sarılıyordum ona kızım sakin ol bitecek biraz sonra biter. Ağlıyordu ve korkuyordu, uçak geçerken kulaklarını kapatıyordu.) NİMET

As it can be seen, mothers most of the time tried to comfort their children by these two means. Feeling secure was obviously an important need for the children, however, as the literature had suggested and the previous section's data implies these responses of mothers might also benefit both parties: Because mothers also need to keep their children by their side, be in contact with them, and make sure that they in a distance at least they may attempt to protect them. Moreover, there were other measures taken by the mothers in their attempts to assist their children, which will be given in the following categories:

Category 2: Distracting child's attention: Even though it was mentioned only by 2 mothers of the young children; another attempt to calm the children was to attract their attention to other stuff like games:

We became more careful of our speech, than tried to motivate her for playing, and recovered from that situation better, by calming her…. It happened as much as we had seen those in TV but it did not last long, and she forgot it since we motivated her for playing.

(Biz de konuşmalarımıza dikkat ettik, onu oyuna yönlendirdik sonra süreci daha iyi atlattık, onu sakinleştirdik… Televizyondan izlediğimiz kadar oldu dolayısıyla daha kısa sürdü o şekilde oyuna da yönlendirdiğimiz için sonra onu unuttu.) SARA

That night of the coup, children in reality used to rejoice when the planes pass by but when they became a lot they started to fear…. First their dad said, "look there are more of the police and the military; they are protecting Turkey", when he said so they started to believe a little bit but from his reactions it was so clear that he had feared, it was obvious. Even I was afraid. Then I took my daughter back to her room, put the laptop in front of her, opened a game and

said, “take and play”, I did something that I do not want at all, but opened some foreign music and gave her the earphones and said, listen; to the boy I gave my own phone, opening a cartoon. While we were watching the news in the living room, we left them as such, then when I checked them they were both asleep.

(O gece de mesela darbe gecesi çocuklar normalde uçak geçince seviniyorlardı ama çoğaldıkça korkuları başladı. … Önce babası işte bak polisler askerler çoğalıyor, devriyeler artıyor, bak Türkiye’yi koruyorlar dedi, babası öyle diyince biraz inanmış gibi oldu ama tepkilerinden korktuğu o kadar belliydi ki. Bariz belliydi, hatta ben bile nasıl korkmuştum. Ben de kızımı alıp içeriye götürdüm, kızın önüne laptopu koydum, al oyun oyna dedim, hiç istemediğim birşey yaptım, ama kafasını dağıtacak yabancı müzik açtım, kulaklığını verdim dedim dinle; oğlana da kendi telefonumu verdim, işte çizgi film açtım. Biz içeride haberleri izlerken onları odalarında böyle bıraktık, sonra gidip baktığımda ikisi de uyuyakalmıştı.) VAHİDE

Category 3-4: Open communication and answers to child’s questions: Open communication with children was a frequent code as 11 mothers (52.4%) mentioned it. The ones had chosen the open communication pattern claimed they prepared an environment for the child in which s/he can ask any question about those events; and parents would answer.” That was also in line with the ***responses to child’s questions: truthfully in a way that they could get:*** in which mothers (9 participant) explained what had happened to their children:

Let me tell you about the coup, we were outside of Ankara that night but getting ready to turn back, we were at home with all the daughter-in-laws, nephews and nieces. They called us and told us such and such, I immediately told those to the children, all children asked questions, because they do not know, what is happening, what they need to do, what is a coup, at max they are 15-16 years old children, I said it means military elites’ taking off the power by suppressing the civilians and the rulers, it is against to the existing system, maybe in their lists, our names might have been there, let’s come and take wudu and read salah, don’t be afraid, even if they take us, it is just a period.

(Ben Darbeyi anlatayım mesela, biz o zaman il dışındaydık ama Ankaraya gelecektik, hazırlanıyorduk, biz gelinlerle evdeydik, yeğenlerle. Bizi aradılar böyle böyle diye, ben hemen çocuklara anlattım, tüm çocuklar sordular çünkü bilmiyorlar, ne olduğunu, yapmaları gerekeni dediler darbe nedir, hepsi mak. 15-16 yaşında çocuklar, dedim askeri yönetimin sivilleri ve yönetimi kendi baskısı altına almasıdır, varolan sisteme karşı durulmasıdır, belki bizim de ismimiz vardır, gelin abdest alalım, namazımızı kılalım, dedim korkmayın eğer biz alınırsak bu bir süreç.) KARDELEN

> When the one's herself did not realize what was happening, I could only say, when he asked what is going to happen tomorrow, mom, I said maybe for a few days we cannot go out my dear, I said, that's all, I could not say anything else. I do not remember whether he said, "What is happening mom" or how I responded if he asked so. I might have said coup or attempt, may be… They talked with his dad, he explained everything about a coup situation, since my partner is a few years older than I and based on his previous experiences he told, we talked with his dad.
>
> (Bir de kendisi algılayamayınca insanın zaten ne olduğunu, o yüzden sadece şunu söyleyebildim, yarın ne olacak anne dedi, belki birkaç gün dışarı çıkamayabiliriz canım dedim, o kadar yani başka birşey diyemedim. Valla anne ne oluyor diye sordu mu, sorduysa ne cevap verdim hiç hatırlamıyorum. Darbe ya da kalkışma demiş olabilirim…Babasıyla konuştular, darbe durumunda babası bu durumu izah etti, eşim benden birkaç yaş daha büyük, kendi geçmişinden bildikleriyle anlattı, konuştuk, babasıyla.) MELIKE

On the other hand, there were the mothers who hesitated to tell the whole truth to their children, so that they did not answer to the children or prepared a fake explanation like the sounds of a bomb is a firework, or the jets flights are due to their exercise for a demonstration show. It was coded under the code ***no or fake explanation*** (10 mothers, 47.6) express the frequent strategies:

> When the jets started to fly, he heard the sounds first and said "mom, what is happening etc", I immediately realized something was happening. I said, my son, you know there are jets going for a demonstration, they have their rehearsals for that, but of course when they started to fly even closer, when its severity and sounds had increased, he also understood something had happened, and told me "mom, they are not rehearsing, you say so because you don't want me to be afraid but these are Russian jets, the Russians will kill us."
>
> (Jetler uçmaya başladığında ilk o sesleri duydu, anne ne oluyor, falan filan dedi, ben zaten hemen birtakım şeyler olduğunu anladım yani. Dedim ki oğlum işte jetler gösteri yapacak, prova yapıyorlar, ama tabii çok yakından uçmaya başladıklarında, işte şiddeti ve sesler artmaya başlayınca anlıyor birşey olduğunu, o zaman işte bana anne bunlar tatbikat değil dedi. …Sen dedi ben korkmayayım diye söylemiyorsun ama bu dedi Rusya'nın uçakları, Ruslar bizi öldürecek.) KUBRA
>
> I do not respond to her, I change the subject. I did not see ever that she had asked to someone else, even if she had asked to her teachers at school, I do not think that they responded too.

(Cevap vermiyorum konuyu değiştiriyorum daha çok. Benden başkasına sorduğuna da hiç tanık olmadım, okulda öğretmenlerine soruyor olsa bile onların da pek cevap verdiklerini zannetmiyorum.) PELIN

However, not providing answers to them is not free from self-criticizing, as some mothers like JANSET mentiones of criticizing herself for not talking to those issues, even though she had not made up her mind yet about letting her child know about such adversaries in life:

Yes, and like I had already mentioned, whenever we have a problem what comes to my mind is "Do I raise her up in a too sterile surrounding?" I question myself saying "Do I really not prepare her to the adversaries that she might go through or any of us might go through?". I mean, I still question myself, asking in fact, would it be better to talk to her about those, tell her those?

(Evet, ve zaten hani başta bahsetmiştim ya problem yaşadığımız zamanlarda hep aklıma gelen, çok mu steril ortamlarda yetiştiriyorum? Acaba gerçekten onu yaşayabileceği, hepimizin yaşayabileceği sorunlara hazırlamıyor muyum diye bunu kendimde sorguluyorum demiştim ya. Hani hala da sorguluyorum açıkçası, acaba hani bunları söylemek ve konuşmak mı daha doğru olurdu?) JANSET

Category 5: Decision about routines: Another pattern of decision to explain or not is embedded in changing routines, as some mothers claimed they had some routine changes like not going to the places they used to go without giving a real explanation, but setting rules like "we do not go there":

Ok, did he ask anything about those routine changes?
Yes, he did, his father said things like we cannot go today, we are going to stay at home today, today we are not going. We said things like "Let's spend this day at home" He did not insist or something and we did not think about that much.

(Sordu, o zaman da bugün gidemeyiz, bugün evde duracağız, bugün dışarı çıkılmayacak gibi açıklamalar yaptı babası. Bugünü evde geçirelim gibi şeyler söyledik. Zaten üstelemedi ve tutturmadı da biz de çok fazla üstünde durmadık.) DENIZ

I try to behave as if I continue to my routine like there is nothing, nothing has happened and they continue their normal lives, as they are supposed to do. If we were not able to go out, I say other stuff, instead of there is bomb, I say we cannot go there today, I have job, I need to do the housework, such excuses, other stuff I say.

> (Birşey yokmuş, hiçbir şey olmamış gibi günlük rutin hayata devam ediyormuş gibi yapmaya çalışyorum. Normal hayatlarına devam ediyorlar. Yapmaları gereken şeyi yapıyorlar, dışarı çıkamayacaksak mesela başka birşey söylüyorum, işte bomba var demiyorum da bugün oraya gidemeyiz, işim var, temizlik yapmam gerekiyor gibi bahanelerle, başka şeyler söylüyorum.) AYSE

However, when the children asked, "why not" or did not believe in their responses, they were re-introduced to the previous loop of decision as explaining truthfully and openly or giving fake explanations or leaving the questions unanswered, for instance SAIME mentioned she had to explain everything to her child, since her excuses was not good enough for the child.

Another frequent pattern was trying not to change the routines of the children, as eight mothers argued they managed to continue the previous routines of the child. This was also in line with the coping strategies of the mothers who tried to keep up with their routines, thus, as it can be seen in the following quotation, the children may also be affected from their parents' behaviors in a good way as such:

> When he looked and saw we continue our routine lives, he continued too. For instance, in the morning I asked, "Son, would you go to the market?" He said, "Weren't we supposed to not to go out?" I said, no son, there was nothing like that. We made it normal.
>
> (Baktı ki biz rutin hayatımıza devam ediyoruz, o da devam etti. İşte ertesi gün, oğlum markete gider misin dedim, hani dışarı çıkmayacaktık dedi. Yok oğlum yokmuş öyle birşey dedim. Biz normalleştirdik.) MELIKE

Category 6: Monitoring: The two important responses by the mothers were about the monitoring of the news and their discussion, especially in the presence of the children. Thus, the code ***parent's monitoring of the news watch (by child & themselves)*** was mentioned by 42.9% of the participants (9 mothers) and 6 mothers claimed they did not discuss such issues in front of children; trying not to show their fears or anxieties; which was coded under "parents monitoring of their behaviors and discussions):

> I try not to make them come face to face with these type of things, I try to keep them away, the younger one does not understand those, but the older can understand and ask some questions. Thus, since I do not want her to watch those, I change the channel and try not to make them come across, to violence images, also news.

(Valla ben çok fazla karşı karşıya getirmemeye çalışıyorum onları böyle şeylerle, uzak tutmaya çalışıyorum, küçük anlamıyor ama büyük anlayabiliyor, sorabiliyor. Ama şey ben de onun izlememesini istediğim için değiştiriyorum, kanalı vs değiştiriyorum, karşılaştırmamaya çalışıyorum. Şiddet görüntüleriyle, haberlerle de.) AHU

He had not experienced any of these attacks. He does not watch the TV news much, and in his presence, I try not to turn on the bad news especially.

(Bu saldırılardan herhangi birini de deneyimlemedi. Televizyon haberleri felan çok fazla zaten izlemiyordu, onun yanında özellikle kötü haberleri çok açmamaya çalışıyorum.) DENIZ

I do not open consciously, I never turn on the TV, we don't, there is only some cartoons that my daughter watchs, in TRT1, TRT Kids, besides there is not any. It is the normal thing; the TV was never turned on. I mean, she watches everything under the monitoring of us.

(Ben hiç açmıyorum bilinçli olarak, televizyonu hiç açmıyorum, açmıyoruz kızımın yanında sadece sınırlı izlediği çizgi filmler vardır, TRT1'de çocukta, onun dışında yoktur zaten. Bu normalde hep olan, televizyon hiç açılmadı. Yani bizim kontrolümüzde, izlediği herşey bizim kontrolümüzde izler.) PELIN

This was a conscious decision for us, because as you appreciate, you cannot know what they will show on TV, in the news programmes or in other stuff, even in commercials. Thus, in order to be careful about those we try not to turn on the TV, even if we do, we try to watch documentaries to prevent him from hearing such subjects, seeing such images, knowing these are being presented.

(Bizim için bilinçli bir seçimdi çünkü televizyonda ne göstereceğini hani takdir edersin ki bilemiyoruz, işte haber programlarında ya da diğer şeylerde, reklamlarda bile ne gösterileceğini bilemiyoruz. O yüzden bunlara dikkat etmek adına zaten genelde televizyon açmamaya çalışıyoruz, açıyorsak da dediğim gibi belgesel gibi şeyler izlemeye çalışıyoruz ki bu tarz konuları duymasın, görüntüleri görmesin, bunların gösterildiğini bilmesin diye.) ZEYNEP

In conclusion, similar to their mothers, children also felt terror, fear and worry and especially younger children mimicked their parent's anxiety. While mothers tried to comfort their children, most children asked questions to their mothers as an information seeking behavior. However, mothers' attitudes towards answering them was different, as some hesitated to tell the truth and told lies, which did not work much with older children. Another important protective response of mothers was to monitor the news

and their own behaviors, especially when they realized it might be affecting the children negatively. The concept map of this present section in terms of links between the concepts can be seen in Appendix E.

4.3. Mother's Concerns Over Terrorist Attacks

Mother's Concerns Over Terrorist Attacks were coded under subsections like terror-related, future related and general concerns presented in the following Graph 5:

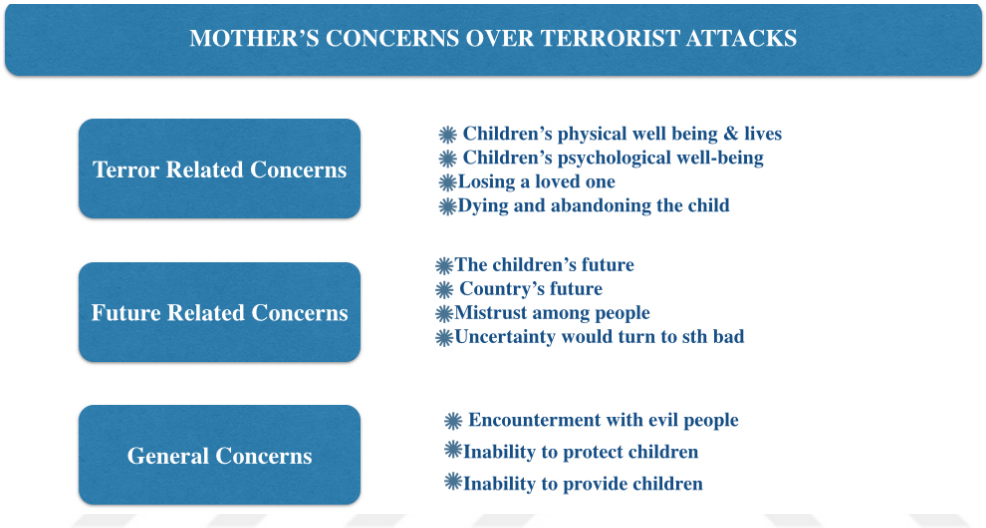


Figure 5: Mother's Concerns over Terrorist Attacks.

4.3.1. Terror-related concerns

In this present subsection, mother's concerns related to the terror were grouped together, which were mainly with regard to their children. The codes were concern about children's physical well being and lives; concern about children's psychological well-being; losing a loved one like the partner and lastly, concern about dying and abandoning the child. Among those, the most frequently cited code is ***concern about children's physical well being and lives*** mentioned by 85.7% of the participants (18 mothers) as they claim:

I also realized as I talked to you, in fact, I caught myself. I think the thing that I fear most is to have a physical harm to my child. Her security.

(Seninle konuşurken ben de farkettim, kendimi yakaladım aslında. Sanırım en çok korktuğum şey çocuğuma fiziksel olarak birşeylerin olması. Onun güvenliği.) JANSET

I first want my children to be alive and healthy. I do not want any harm to their lives, my deepest concern is that, all the time, for all other my relatives, my sibling, my parents, my partner, that's my first concern. Of course, for myself too. Because everything else comes afterwards… For all of my life, the thing I feared most was to lose my loved ones.
(İlk önce çocuklarımın hayatta olmalarını, sağlıklarının yerinde olmasını istiyorum. Onların canlarına bir zarar gelmesini istemiyorum, en derin kaygım bu her zaman için diğer yakınlarım için de kardeşim, annem babam eşim için de, ilk kaygım bu. Tabii kendim için de. Çünkü diğer tüm konular bunun arkasından geliyor…Hayatım boyunca da benim için en korktuğum en yaşamak istemediğim şey sevdiğim insanları kaybetmek.) AHU

Of course, we live in entrusted to Allah. Any moment, anything might happen in Turkey. As a mom, I try not to think of bad things, but everything might happen. The school might be bombed, the school bus can be raked with gunfire, there is nothing like it cannot happen, it may and it comes to my mind from time to time. We are going to shopping malls, there might be an explosion. We are all people going out, we obviously go out.

(Tabii ki, Allah'a emanet yaşıyoruz. Heran herşey olabilir Türkiye'de. Anne olarak aklıma kötü şeyler getirmemeye çalışıyorum ama herşey olabilir. Okuluna bomba atılabilir, servisi taranabilir, olmayacak diye birşey yok, olabilir, aklıma geliyor zaman zaman. Alışveriş merkezlerine gidiyoruz, bir patlama yaşanabilir. Sonuçta hepimiz dışarıda yaşayan insanlarız, mutlaka çıkıyoruz.) SAIME

On the other hand, as 13 mentioned, mothers are also concerned about their ***children's psychological well being*** due to these hard times:

(She sighs) It is not a secure place in terms of security… For education and raising up the children, this insecurity affects them in a negative way. Because these kids will grow up and will want to have friends, what kind of friendship they are going to develop in a place where no one trusts the other, if it becomes an environment like that, I mean I leave the educational system aside, that's another problem but I cannot think of it as such.

((İç çekiyor). Yani zaten güven olarak güvenli bir yer değil güvenlik açısından. …Eğitim ve çocukları büyütme açısından da bu güvensizlik zaten çocukları olumsuz bir şekilde etkiliyor. Çünkü zaten bu çocuklar büyüyecek ve arkadaş ortamı kurmak isteyecekler, nasıl bir arkadaşlık olacak, kimsenin kimseye güvenmediği bir yer olursa nasıl bir ortam olacak yani onların eğitim sistemini

> bir yana bırakıyorum, o başka bir sorun ama böyle nasıl açıkçası düşünemiyorum.) GULIN

> Of course, the security concern is my basic concern. Having a harm to their life-securities. Then, a harm to their emotional integrity. And also, there is the Syrians in the country, it is not secure generally. Child abuses, they affect the people emotionally, thus, I fear their psychological integrity would be harmed as well.

> (Tabii ki güvenlik kaygısı en temel endişem. Can güvenliklerine bir zarar gelmesi. Ondan sonra duygusal bütünlüklerine bir zarar gelmesi. Bir de ülkede Suriyeliler var, genel olarak güvenli değil. Çocuk istismarı felan duygusal olarak da insanlar çok etkileniyor dolayısıyla bir yerde psikolojik bütünlüklerine de zarar gelmesinden çok korkuyorum.) JULİDE

Mothers were also concerned about the physical security of their loved ones, as five of them mentioned about concern about ***losing a loved one.*** Another concern about physical security is the one that mothers have regarding their own lives; however, their concern is rather about ***dying and abandoning the children.*** This was mentioned by more than half of the participants, by 12 mothers:

> My biggest concern is what would happen to my children if something happens to me. What if, if someday I was caught up in between this chaos? What if, if I do not reach my children in such a situation, what would I do?

> (En büyük endişem, bana birşey olursa çocuklarım ne yapacak endişesiydi. Ya birgün bu şeyin içinde ben kalırsam çocuklarım ne olacak? Ya da böyle bir durumda çocuklarıma ulaşamazsam ne yaparım, endişesiydi) AYSE

Sometimes these are rather related to other codes like protecting and providing the children, as it would be elaborated later, but also leaving the children emotionally helpless is another concern:

> I think about my children more. In fact, I did not feel anything for myself, I mean if I die, I will die, but I am looking after my children, I work, but who will take care of my children if I die, who will take care of them? In fact, my son is older, he works but now I think my daughter most. May Allah protect, if something happens to me, my daughter would be down, of course there would be someone to care of her but no one can replace me, no one can understand her like I do. Why do I work, to provide a good future to my daughter, than she goes to sports everyday, she needs money for that, if it is not me, who would replace me? I lost my own parents, and no one can replace a mother, in any issue.

(Çoluğumu, çocuğumu düşünüyorum bir de daha çok. Aslında kendim için hiçbir şey hissetmedim, hani ölürsem zaten ölücem, ama mesela ben çalışıp ben çocuklarıma bakıyorum, ben öldükten sonra ben ölürsem çocuklarıma kim bakacak, onlarla kim ilgilenecek, her birisi bir tarafa gidecek? Şimdi açıkçası benim oğlum büyük, çalışıyor, ama şuan için en çok kızımı düşünürüm, Allah korusun bana birşey olsa kızım ortada kalır, muhakkak bir sahip çıkan olur ama benim yerimi kimse tutmaz, benim gibi onu kimse anlamaz. Ben niye çalışıyorum ama kızımın geleceği iyi olsun, sonra spora gidiyor hergün, işte ona para lazım, ben olmasam benim yerimi kimse tutar mı? Ben anne-babamı kaybettim, ve annenin yerini kimse tutmaz ki, her konuda) EMINE

Similarly, some other mothers like JANSET argued her life changed as before and after her daughter and she tried to take measures to increase her possibility to live, saying she was more of an adventure lover before her child was born, but she had ever rejected an extreme sports invitation and even changed her way of shopping after the attacks just because she thinks:

Do you know why? You are not a mother now, right? Before I was a mother I did all sorts of extreme sports, but after I became a mother, I think I have a specific responsibility and I need to be alive for that. This is because of my daughter, because she is too young now. Thus, I need to be engaged in the behaviours that would keep my probability to be alive more.

(Çünkü neden biliyor musun? Sen şu anda anne değilsin değil mi? Anne olmadan önce, tüm ekstreme sporları yaptım, ama anne olduktan sonra belirli bir sorumluluğum olduğunu ve hayatta kalmam gerektiğini düşünüyorum. Ve o da kızım için, çünkü çok küçük daha. Dolayısıyla daha hayatta kalma olasılığını yüksek tutacak davranışlarda bulunmam gerekiyordu.) JANSET

This code of dying and abandoning children is also related to another frequenly mentioned idea that mother is more important for a child than fathers and other family members and relatives. Among the participants five mothers claimed such, like the following qoutations:

It is twice responsibility, first being a mom is harder than being a dead, because you need to form different relations in the family, [not clear] and especially for the younger children mother is different.

(Valla iki katı bir sorumluluk bir kere anne olmak baba olmaktan daha zor, çünkü ailede farklı ilişkiler kurmak (anlaşılmıyor) bir kere şöyle birşey var, özellikle daha küçük çocuklar için annenin yeri çok farklı oluyor.) AHU)

> May Allah protect, if something happens to me, my daughter would be down, of course there would be someone to care of her but no one can replace me, no one can understand her like I do.
>
> (Allah korusun bana birşey olsa kızım ortada kalır, muhakkak bir sahip çıkan olur ama benim yerimi kimse tutmaz, benim gibi onu kimse anlamaz.) EMINE

Related to this terror-related concerns many mothers indicated that it caused stress in them. Additionally, six mothers expected the end of terror to live in a good future, even though some of them were not so optimistic. Some older mothers like KUBRA, MELIKE and SAIME even compared the salience of the terror news with their youth days. However, one of the most interesting comparison was the following, referring back to the Ottoman times:

> Of course, I want that terror never happens. I want and in fact we are accustomed to it from the Ottoman empire, we are accustomed to living with people from other religions, other races, other ages, we need to remember this first, for me, for Turkey, our strength lies there…. just because of one' merits and abilities, in the Ottoman, one can have promotion. It is something never seen in the Europe up until that time, we need to remember this. Thus, in fact the name "eternal empire" was given to the Ottoman at one point, it was because we continued together without seeing much differences, we need to remind these to all.
>
> (Ay, tabii ki istiyorum terör hiç olmasın. İstiyorum … ama yani Osmanlı imparatorluğundan biz aslında alışığız, farklı dinlerden farklı ırklardan farklı yaşlardan insanlarla birlikte yaşamaya alışığız, asıl bunu hatırlamamız gerekiyor bence Türkiye adına, bizim gücümüz orada. …sırf becerisinden dolayı, sırf yeteneğinden dolayı Osmanlı'da birisi yükselebiliyor. Avrupada o güne kadar görülmemiş birşey, bunu hatırlamamız gerekiyor. Böylecede aslında Osmanlı imparatorluğuna eternal empire diye kazanıldıysa hep birlikte çok fazla farklılık görmeden devam ettiğimizi hatırlayalım.) JANSET

As it was presented mothers had many terror-related fears about the security and psychological well-being of their children. This is especially important, since mothers perceive the current environment as threatening due to terror, which definitely adds to their risk-perception and security-related continuous stress.

4.3.2. Future-related concerns

Other most frequently cited codes were grouped under future-related concerns. Among these codes, "mother's concerns about the children's future", "concern's about

country's future", which was accompanied by the belief children's future and country's future is inter-related were the most important ones. Besides, two other future related concerns were "mistrust among people" and "uncertainty would turn to something bad". As mentioned, ***mother's concerns about children's future*** is a frequent one mentioned by15 participants;

> One gets scared a little bit especially in such periods. Of course we though of it in that 15th July incident, our daughter has a condition about the food, thus if there is a similar situation again and most of the things get restricted, how would we manage to feed her?, we got concerned. In this last two years our concerns increased, of course in such times you send her to the private schools because there is the security problem, thus, started to think of such things and started saving some money, we haven't thought of those before.
>
> (İnsan biraz korkuyor tabii ki de özellikle böyle bir dönemde. Bir de tabii ki bu 15 Temmuz olayında şunu düşündük, kızım hasta olduğu için ister istemez yiyecek sorunumuz var, eğer böyle bir durum olur ve pekçok şeye kısıtlama gelirse, o zaman onun beslenmesini nasıl yapacağımızın da kaygısına düştük. Bu son iki senede bir de ebeveyn olmakla ilgili kaygılarımız arttı bu anlamda, tabii ki de ister istemez bundan sonraki süreçte özel okula gidiyor çünkü güvenlik sorunu var, bundan kaynaklı biraz daha farklı şeyler düşünmeye, para biriktirmeye başlıyorsunuz, öncesinde bunları düşünmüyorduk.) SARA

The concern about country's future was another code mentioned by 13 mothers. Mothers mainly linked their children's future and country's future, even though it was only directly mentioned by JULIDE and DENIZ. Nevertheless, country's future in terms of its political climate and possibility of war like the Syrian case was mentioned within this concern:

> You became concerned, for instance, when these events started we thought what would our children do if the Turkey's situation becomes even worse, will there be something bad?
>
> (Ha işte şey oluyorsun, tedirgin olduğum yönler oluyor, mesela olayların başında çocuklarımız ne yapacak Türkiye'nin hali daha kötüye giderse diye, birşey olur mu diye.) RUVEYDA
>
> I do not say it only thinking about the terrorism but as we grow, does the world get dirtier? For some reason, our responsibilities increase and we start to enter into various environments and we try to perceive people around us differently. … Thus, when she grows up, life would not be that easy. If such events continue, we see the Syrian kids. They were quite happy in their homes, having all of their needs answered, being provided, having bread and security now

> they are in a different country and their parents might not provide them the same standards.
>
> (Yani sadece terörizmi düşünerek söylemiyorum ama büyüdükçe kirleniyor mu diyim dünya, nedense sorumluluklarımız artıyor, farklı farklı ortamlara girmeye başlıyoruz, biz de etrafımızdaki insanları daha farklı görmeye başlıyoruz…. Zaten büyüdüğü zaman o kadar kolay olmayacak hayat. Bu tip olaylar da devam ederse, Suriyeli çocukları görüyoruz. Şöyle birşey, gayet mutluyken evinde, gayet işte herşeyi sağlanıyorken, ekmeği ve güvenliği varken şimdi farklı bir ülkeye geldi ve annesi babası ona aynı standartları sağlayamayabiliyor.) JANSET

Additionally, while mentioning their concerns, 10 participants mentioned about their expectation of a happy life and a happy country for their and their children's future, even though some of them thought they were not that optimistic:

> I am hopeful, anyway it will be got overed, it would go away, it will be coped with. Thus, I am hopeful for that, because at most we live and die, and all these has an end, at worst, we would die, it would be like fatalism but in that sense, we are going to live whatever we have in our destiny and continue, but I am hopeful because I believe human beings are wise and logical creatures, they are going to fix it within the frame of wisdom and logic and objectivity, and it would not be like that forever.
>
> (Ümitliyim, yani bir şekilde, halolacaktır, geçecektir, başa çıkılacaktır. Yani o açıdan gelecek için ümitliyim, çünkü hiç olmadı yaşayıp ölüyoruz, bir şekilde işin bir sonu var yani, en kötüsü ölüp gideceğiz, yani o anlamda da kadercilik gibi olacak ama işte bir şekilde neyse kısmette kaderde onu yaşayıp devam edicez ama ümitliyim çünkü insanların akıllı mantıklı yaratıklar olduklarına inandığım için akıl, mantık ve objektivite çerçevesinde artık işlerin düzeleceğini, sonsuza kadar böyle gitmeyeceğini düşünüyorum) ZEYNEP

Mistrust among people was another striking pattern emerged as around half of the participants (10 participants) claimed they were concerned. They also argued that not trusting each other would affect their children in the future, and they also complained about that mistrust; even though they were also feeling mistrust towards the people mentioned above in section 4.2.:

> In fact, that much of uncertainty, that much of mistrust, this much of polarization amongst people, even leaving the politics aside, this much mistrust in societies makes me afraid, in fact. I mean, a muslim country and no one trusts one another, we came to such a point or at least I perceive it as such, everyone is suspected from everyone, no one exactly knows who the other person is, what he does or thinks and people are also afraid of talking

> and living in such an environment… in fact, I do not want to live and do not want my children to live in such an environment…
>
> (Yani bu kadar belirsizlik, bu kadar çok güvensizlik, insanlar arasında bu kadar çok kutuplaşma, yani siyasette olanları bir tarafa bıraksak bile toplumda insanların arasında bu kadar çok güvensizlik beni çok korkutuyor açıkçası. Yani, müslüman bir ülke, kimse kimseye güvenmiyor, öyle bir noktaya geldik ya da en azından bana öyle geliyor, herkes herkesten şüpheleniyor, kimse kimsenin kim olduğunu ne olduğunu tam olarak bilmiyor, ne yaptığını ne düşündüğünü, ve zaten insanlar haklı olarak biraz da konuşmaktan korkuyorlar, böyle bir ortamda yaşamak...) GULIN

Uncertainity would turn to something bad was another concern about future, as they kept complaining about not being able to know what would happen in the future or how much things might get worse if they do:

> You think of your child, since you do not know what will happen in this uncertainty.
>
> (Çocuğunuzu düşünüyorsunuz. Ne olacağını bilmediğiniz için belirsizlikte.) PELİN
>
> Very hard of course, because you do not know what would happen to you in any moment. When, what would happen, or would we be the victims of an explosion or something, we do not know. We have the concern but at least I am grateful as at least we are not living in another country. If we were in another country, for instance in Syria, things might have been worse, we see the children there, we hear, they are worse of course. I hope we never became like that, we pray but we do not have anything to do except from this.
>
> (Yani zor tabii ki çünkü her an başınıza ne geleceğini bilmiyorsunuz. Ne zaman ne gerçekleşir, yoksa bir patlamaya mı kurban gideriz bilmiyoruz. Tedirginliğimiz var ama yine de başka bir ülkede yaşamadığımız için şükrediyorum. Orada olsaydık, Suriye'de mesela, daha kötü tabii, oradaki çocukları görüyoruz, duyuyoruz, daha perişan tabii ki. İnşallah o duruma düşmeyiz diye dua ediyoruz ama bunun dışında da elimizden başka birşey gelmiyor.) SILA

Even though these were future related-concerns they still had some impact of terror, like increasing alertness causing the mistrust, unpredictability and lack of relevant information leading to uncertainty, or a concern of a civil war, similar to the one in our neighbour Syria. Therefore, they also need to be addressed within the framework of terror.

4.3.3. Other concerns

In this section, there were three codes like (1) encounterment with evil people, (2) inability to protect children and (3) inability to provide children. Moreover, the belief that today being a mother is harder than the previous was another supplementary code. Related to the code of mistrust mentioned in the above section, half of the mothers (10 participants) were also concerned about their ***children's encounterment with evil people*** as they fear from evil people like kidnappers, drug-dealers, child-abusers might encounter their children, as most of them claimed child abuse and rape is not only a danger towards the female children as they say:

> May Allah protect us, everything might happen, we do not live in secure times. Everything might happen. May Allah protect us, it can be the rape incident, in fact they do not differentiate between a girl or boy now. It can be being kidnapped, now, people started to look at their next door neighbours with suspicion. Unfortunately, we became a society, a country like that.
>
> (Allah korusun herşey olabilir, güvenli bir zamanda yaşamıyoruz, herşey gelebilir başlarına, Allah korusun tecavüz olayı olabilir ki şu an kızı-erkeği yok bu işlerin. Kaçırılma olayı olabilir, ondan sonra artık insan kapı komşusuna bile şüphe ile bakar oldu. Yani öyle bir toplum olduk, öyle bir ülke haline geldik, maalesef.) KUBRA
>
> Now you are more concerned, whether there would be a suicide bomb coming to the school, would someone approach to my child or not, you have these fears, they happen and continue still, you do not know what will happen to you, where, you always think of it.
>
> (Şu an daha tedirginsin, okula canlı bomba mı gelir, çocuğuma birisi yaklaşır mı yaklaşmaz mı onların korkusu vardı, onlar oluyordu ki o hala de devam ediyor, şu an başına nerede ne gelecek belli değil hep onu düşünüyorsun.) NİMET

Drug abuse and drug dealers was another concern of the mothers in terms of encounterment to the evil people and they even try to communicate with their teenager children especially openly:

> I never thought of an education in Kızılay for my child, neither as school or course, I am not open up to that a little bit. Kızılay, even before these events was a scary setting for me, because Kızılay is very crowded, there are many various people, it may sound a little paranoid but even before these attacks I used to warn my child to be careful, towards people be careful, because they

> are not that good now, I do not want to make my child paranoid but it is as if my duty is to warn him.
>
> (Ben zaten çocuğum için hiçbir zaman Kızılay'da eğitim felan düşünmüyorum. Dershane ya da okul gibi, biraz sıcak bakamıyorum. Kızılay, bu olaylar olmasa bile bana ürkütücü gelmiştir Kızılay çünkü çok kalabalık, çok çeşitli insan var, bu olaylar olmasa bile biraz paranoyakça ama ben her sabah çocuğuma derim ki, dikkatli ol, insanlara karşı dikkatli ol, çünkü insanlar artık o kadar da iyi değil, çocuğu da paranoyak yapmak istemiyorum ama o benim görevimmiş gibi uyarmak.) MELİKE.

Moreover, one participant EMINE draw a clear link between drug dealing and the terror as she believes the groups selling the drugs are doing so in order to have illegal money to feed the terrorist organizations.

> We see what a bad friend might cost, they drop out of the school, from the ones not having the peace at home, they may lean towards things like smoking or drugs, I fear that and in fact terror is everywhere. For instance, they explode the bombs everywhere, but besides, these harmful habits like drugs etc are also stemming from those kinds of stuff. Because the ones who sell them are all terrorists.
>
> (Bir kötü arkadaşı nelere mal olabiliyor görebiliyoruz yani, işte okulundan oluyor, evde huzuru olmayanların, sigaraydı, uyuşturucuydu böyle şeylere yönelenler var, bunlardan korkuyorum, ve açıkçası terör heryerde. Mesela kalabalık yerde patlatıyorlar felan ama bu uyuşturucu gibi kötü alışkanlıklar bunlar da genelde öyle şeylerden kaynaklanıyor. Çünkü öyle şeyler satanlar da hep terör örgütü, o şekilde.) EMINE

Inability to protect children in the sense of protecting their both physical and psychological well-being of the child and ***Inability to provide children*** in the sense that not being able to give them food and money, especially if they die or their circumstances became worse were the last codes in this category. Both codes were mentioned by 11 mothers, 52.4%:

> My daughter and her father never see each other, the father is detached, it was maybe not even three times that they had seen each other, thus my concern is not to cross to the other side early, at least she grows up at least be able to stand on her own feet. Thus, if I can retire, at least a retirement salary would be transferred to her from me, it is all the future we can give her, but if she studies, she rescues her own life but I do not know what the future would bring.
>
> (Benim kızım ve babası hiç görüşmüyor, babası ilgisiz, belki 3 kez görüşmemişlerdir, o yüzden kaygım erken gitmeyelim öbüt traraa en azından ayaklarının üzerinde duracak kadar olsun. İşte emeklilik olursa, belki bir

emeklilik maaşı kalır, bizim verebileceğimiz geleceği o, ama eğer okutsa hayatını kurtarır ama gelecek ne getirir bilemiyorum.) NİMET

When you become a parent, you feel more pain than from the pain you think your mother and father would feel, because you also think what will happen to my child, a bigger concern. For instance, one of my friends had told her husband after these bomb explosion concerns, had said "If something happens to me give my child to my mother and father, do not grow him up with the step-mother". Being a parent is very hard, it is a concern every moment.

(Kendi anne baba olduğunda çok daha büyük bir acı hissediyorsun, kendi anne babanın acı çekeceğini düşünmekten daha büyük bir acı çünkü çocuğuma ne olacak diye daha büyük bir kaygı. Mesela arkadaşlarımdan biri bu bomba kaygılarından sonra bana birşey olursa çocuğumu anneme babama ver, üvey anne ile yetiştirme demiş. Anne baba olmak daha zor işte. Her an kaygı.) CEREN

I think of my child most, and I fear their being under somebody else's responsibility, because their father cannot take care of them as I do, the dad is already a diabetes patient, has wounds and injects insulin to himself, thus he cannot even take care of himself that he can be able to think of the children.

(Ben en çok çocuklarımı düşünürüm, çocuklarımın başkasının eline kalmasından çok korkarım, baba benim baktığım kadar bakamaz, benim düşündüğüm kadar yapamaz, baba zaten şeker hastası, yaralar çıkıyor, insülün vuruyor o kendini beceremez ki çocukları düşünsün.) NUR

Another comparison is in between old times and nowadays in which some mothers argue the nature of their concerns had changed and while it was rather based on providing them now they also have concerns about protecting them:

I mean, being a parent became difficult here. Before, it was not like that, of course I had some concerns but those were rather about their education etc as I said before, but now, I fear if something happens to me, what will happen to my child? Same stuff happens to everyone. We may be in a bad condition too. If those do not end earlier or later, and even worse of those happen, now we are all in danger. Now we have more concerns.

(Yani burada ebeveyn olmak daha zorlaştı. Eskiden bu kadar değildi, hani eskiden de bir takım endişelerim vardı ama o zamanki endişelerim daha çok dediğim gibi çocuklarımın eğitimi felan ne olur gibiydi, ama şu an bana birşey olursa çocuğuma ne olur diye. Herkese aynı şey oluyor. Biz de kötü duruma düşebiliriz, bu olaylar er geç bitmezse daha beterleri olursa, şu an hepimiz tehlikedeyiz. Şu an endişelerimiz daha fazla.) SILA

> Now you need to think about more stuff, and need to get worried about more things, as a mom and dad, would I be able to respond to her all of the physical and emotional needs, all the ones that are material and non-material, would I be able to protect her, or if there would be anyone approaching her in evil intentions, will I be able to rescue her? You need to cope with a lot of concerns, and I think it is even harder.
>
> (şimdi çok daha fazla şeyi düşünmek, çok daha fazla şeyden kaygılanmak zorundasınız, bir anne olarak ve baba olarak onun hem fiziksel hem de duygusal maddi manevi bütün ihtiyaçlarını karşılayabilecek miyim, onu koruyabilecek miyim, ona da böyle kötü yanaşan birileri olursa ben onu kurtarabilecek miyim diye pek çok endişe ile başa çıkmak zorunda kalıyorsunuz, bence çok daha zor.) AHU

As a summary, it is found that the mothers were stressed out by their threat perception, they had terror related, future related and general concerns about their family and children. Terror's impact on their children's physical and psychological well-being, losing their loved ones like partners or dying themselves and abandoning their children were the most prominent terror related concerns. However, concerns about not being able to protect and provide children and their encounterment with evil people were related to daily lives, as well as their mistrust to the people around. Surprisingly, even though mothers were feeling mistrust, they complained about it and claimed it created a stress-inducing environment for them and a problematic future for their children. Therefore, they also had future related concerns as the mistrust might increase, uncertainty might turn to something bad, and their children's and country's future might be bad either.

4.4. Coping

In this present section Mother's coping with terror and terror-related stress is presented under two categories as (1) Problem Focused Coping and (2) Emotion Focused Coping. The problem focused coping is grouped as "Protecting Children" both physically and psychologically; and "Empowering the Children" both by "encouraging open communication" and "helping them to solve their own problems." Emotion Focused Coping is composed of six categories as (1) Acceptance: Que Sera Sera & normalising, (2) Distraction & Thought stopping, (3) Spirituality, (4) Social support: family, friends and professionals, (5) Reframing & Blaming and lastly (6) Hope & Resilience. As it can be seen problem focused coping is rather related to their children, thinking about the

circumstances that they may solve; but while they try to deal with their own terror stress they rather use emotion focused coping:

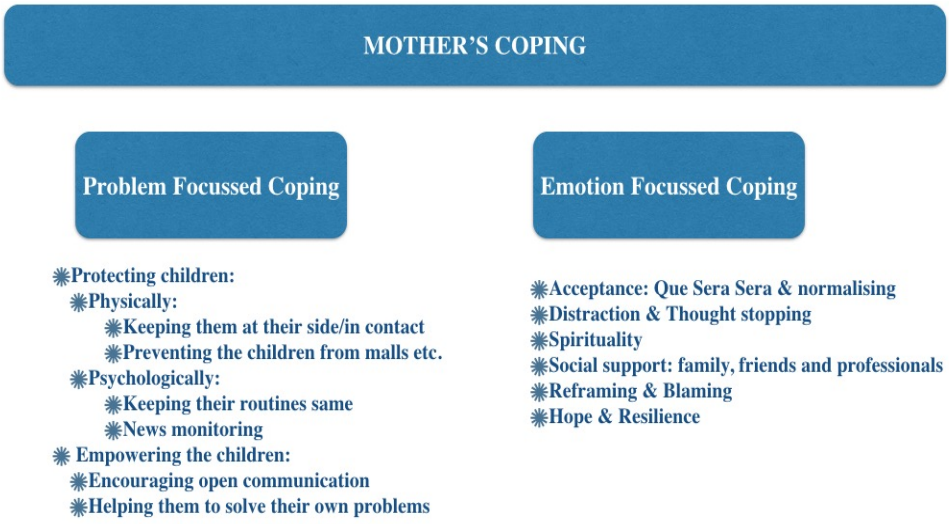


Figure 6: Mother's Coping

This section is important as mothers try to solve these problems mainly by themselves by research, consulting and discussing**:**

> I read, I try to solve the problem by myself in any way. If I have people around me, that I trust, who can help me on that issue, I consult them first…. But I usually read and search internet for that and read.
>
> (Okurum, bu problemi kendim bir şekilde çözmeye çalışırım. Çevremde güvendiğim insanlar varsa bana bu konuda yardımcı olabilecek, önce onlara danışırım. … Ama genellikle okurum, internetten araştırırım, okurum.) AHU

4.4.1. Problem Focussed Coping

As it can be seen related to children, mothers mainly referred to their problem focused coping as the measures for protecting or empowering them. In other words, they try to solve the terror stress by problem focused coping, especially when they think about children.

Code 1: Protecting Children: Within this code group, in terms of physical protection, ***preventing children from the malls or crowded places*** code is found in the interviews

of more than 80% of the mothers (17 participants), mothers having children from all ages:

> We already experience it every weekend, for instance we try not to go the shopping malls… Of course, for the children mainly, because if there were not the children, we do not think about them much. When they are not with us, we go…. As I said, we do not go to crowded places, city center with the kids. We even try not to pass from there, not even staying there. To the places around Kızılay.
>
> (O zaten biz bunu her haftasonu yaşıyoruz, mesela AVM'lere gitmemeye çalışıyoruz.…Tabii ki daha çok çocuklar için, çünkü çocuklar olmasaydı bizler o kadar düşünmüyoruz. Onlar yanımızda olmadığında gidiyoruz da.……İşte dediğim gibi çok kalabalık yerlere gitmiyoruz, şehrin merkezine zaten hiç gitmiyoruz çocuklarla. Yani böyle oradan geçmemeye bile çalışıyoruz, orada kalmayı bırak, oradan geçmeyi bile çok istemiyoruz. Kızılay tarafına pek o taraflara.) GULIN
>
> I warn my daughter most, especially they go to Kızılay sometimes, I say be careful, do not go the malls, do not go to crowded places, and mainly because they do those most in the crowded places as they try to hurt as much people as they can. The more crowded it is, the bigger the risk is. At least, I tell those to my child, but I do not know whether it would happen or not, but we pray for that not to happen…
>
> (Ben kızıma en çok işte kızılaya felan gidiyorlar bazen, aman kızım dikkat edin, AVM'lere girmeyin çok kalabalık ortamlarda bulunmayın en çok da en fazla nerede yapıyorlar bunu, kalabalıklarda, çünkü daha çok kişinin canını yakmaya çalışıyorlar. Ne kadar kalabalıksa o kadar tehlike de daha fazla. En azından ben bunları ona söylüyorum tabii olur ya da olmaz bilemem ama olmasın diye dua ediyoruz…) EMINE

It also seems to cause an emotional distress over mothers. As it was presented in the following quotation, even though mothers try hard to find ways to deduce their stress by taking some measures, it does not seem like a very feasible goal due to the unpredictable nature of the events:

> It is not easy, of course, living without endangering your or your child's life in this situation. But at least we try to be as careful as we can, we try to protect ourselves by being away from the crowded places, not to be close to the city center, being away from it. I mean, when I think, besides physically being far from the crowded places, what can I do to as a measure to take, I don't know that I can do anything else, because only I can take such a measure, to be away from the risky circumstances.

(Kolay değil tabii ki, kendini ve çocuğunu bir şekilde yaşamsal durumdan, tehdit altına düşürmeden yaşayabilmek kolay değil bu ortamda. Yine de elimizden geldiği kadar dikkat etmeye çalışıyoruz, kalabalık ortamlardan uzak duracak şekilde, çok fazla şehir içine gitmeyecek şekilde, uzak duracak şekilde, kendimizi korumaya çalışıyoruz. Yani fiziksel olarak kalabalık bir yerde bulunmamak dışında bir önlem alamıyorum yani ne yapabilirim onun dışında diye düşündüğümde de pek sanmıyorum başka birşey yapabileceğimi, ancak bu şekilde bir önlem alabiliyorum, riskli ortamlardan uzak duracak şekilde bir tavır dışında başka bir önlem alamıyoruz) ZEYNEP

Continued with the difficulty in taking measures, some participants claim they are ***trying to keep children at her side or constantly in contact,*** mentioned by 12 participants:

I mean, I cannot take any measure in fact. I just put my child to a nearby school.

(Ya işte, önlem alamıyorum ya aslında. Kızımı yakın bir okula götürdüm.) JULİDE

I feel like I restrict the freedoms of my older son especially… I mean because of that fear and worry that something might happen to my child, I interfere in something he does. Even though he is 12-13, believe me, I do not even let him go out. That's not a right thing, but, a few days ago, he took the permission, said "mom, please my friends came"I gave him half an hour permission, then when half an hour had passes I started to panic out, went outside of the building and said "Why did not you keep your promise" he said "mom, I did not check the time, I was playing with my friends, I could not realize how the time passed."I know I have mistake in that, the child needs to have trust in himself, to do somethings, but I have these worries.

(Özellikle büyük oğlumun bazı konularda özgürlüğünü kısıtlıyorum gibime geliyor. … Yani çocuğumun başına birşey gelecek korkusu ve endişesi yüzünden, bazı şeyleri yapmasına müdahale ediyorum, 12-13 yaşında olmasına rağmen inanın sokağa çıkmasına bile izin vermiyorum. Bu da doğru birşey değil kendi adıma ama, mesela geçenlerde izin aldı, ya anne ne olur arkadaşlarım geldi dedi yarım saat izin verdim, yarım saati geçti ben panikledim, binanın önüne çıktım dedim oğlum niye sözünü tutmadın, yerine getirmedin, o da şöyle dedi, anne ben saate bakmadım, arkadaşlarımla oynuyordum vaktin nasıl geçtiğini anlamadım, bunda ben çok hatalıyım bunu biliyorum, çocuğun da kendine güvenmesi lazım, bazı şeyleri yapması lazım ama bu endişelerim var.) KUBRA

Monitoring the children from cell phones etc is another new strategy that the mothers had. Especially with adolescents and working mothers, this seems to be a very practical

one. However, as the anxiety and mistrust increases, some even multiply their measures as both calling the child from the cell phone and the land phone, due to security risk perception:

> I get sad, I always get sad, I always think of her while she is at home. I call her both from land line even though there is the cell phone, I try to chase her but there is not a way of dealing with these ideas, you are always uncomfortable, a little bit aggressive, they are innocent but you start to importunate them but I cannot help.
>
> (Üzülüyorum, sürekli üzülüyorum hep kafam evde kalıyor. İşte ev telefonundan da arıyorum her ne kadar cep telefonu olsa da takip etmeye çalışıyorum ama tabii bu düşüncelerle başetmenin bir yolu yok, sürekli huzursuzsun, biraz agresif oluyorsun, onların suçu yok ama çocukları da sıkboğaz etmiş oluyoruz ama bu da insanın elinde olan birşey değil…) EMINE
>
> I wish I had stayed home and monitor my kids more, especially my younger daughter, we bought her cell phone this year to have the connection and I call her both from land line and from the cell phone, because I worry whether my child was outside, because of these security reasons.
>
> (Evde durup çocuklarımı daha çok gözetmeyi isterdim, küçük kız, bu son bir senede aldık telefonu daha çok bağlantıyı kuralım diye bir evden bir cepten arıyordum çünkü güvenlik açısından dışarıda mı çocuğum diye endişeleniyordum.) NUR

As the mother's concern was not only the physical security of the children, but also the psychological security of them. For the psychological protection, mothers also claimed it had affected their social life much, as they present how they try to ***keep up with their routines*** despite taking some measures:

> But as I said before, if we would go to a concert for an entertainment, we chose the ones that are far from the city. But in fact, we used to go to those different stages of Kızılay. We used to go to the concerts there, a lot. Now we still go to the concerts but we chose the ones that are far way. Generally, it is more sterile.
>
> (Ama dediğim gibi mesela zevk için konsere gideceksek, daha şehre uzak senfonileri tercih ediyoruz. Halbuki eskiden biz Kızılaydaki o farklı farklı sahnelere çok giderdik. Oralardaki konserlere çok giderdik. Şimdi hala konserlere gidiyoruz ama daha merkeze uzak yerlerdekini tercih ediyoruz. Genel olarak daha steril oluyor.) JANSET
>
> Every weekend, since she was at school through the weekdays, I used to take her out, absolutely, I don't know to wander around the shopping malls, to go to a cafe to drink tea with me, she used to love those. But in these times, I

> reduced it, at first, we did not go out at all, then it turned to something like once a month, now we go since there is nothing but…
>
> (her haftasonu, haftaiçi okulda olduğu için ben onu dışarıya çıkartıyordum mutlaka ve ne bileyim alışveriş merkezlerinde dolaşmayı, bir kafede oturup benimle çay içmeyi çok severdi. Bu dönemlerde bunu azalttım, ilk zamanlarda hiç çıkmadık, sonradan da işte ayda bir kere felan, şu an ortalık sessiz sedasız, birşey yok gibi diye çıkıyoruz ama işte.) SAIME

Also, the mothers tried not to change their children's routines as a measure they take to protect their children, thus 13 mothers (61.9%) argued they tried to continue the routines of their children as much as possible, even though they had taken some measures:

> I think there is not much of those routine changes that afffect them, I mean it may even had affected them positively, since their parents don't go out much. I work at the weekends, since her dad is also very busy now, it is not a matter, and now she went to the summer house with the grandparents. Her all going out is the park, and now it was winter but when the summer comes we would take her to the children's gardens.
>
> (Ya galiba onları etkileyen yoktur, hatta çok olumlu bile etkilenmiş olabilirler, anne-baba çok gezmediği için. Zaten ben genelde haftasonları da çalışıyorum, babasının da bu aralar yoğunluğu olduğu için çok şey değil, bir de mesela bu aralar anneanne-dede ile yazlığa gitti. Onun gezmesi zaten park hani, yani şimdi kış ama yaz gelince oyun parklarına götürüyoruz onu.) JULIDE

While they try not to change their children's routines, mothers also try to cope with the adversaries by other measures like social support they have to protect/monitor the children or the spiritual comforting:

> She has to go to school, but since she is in a sports team, having friends and teachers around, being under the monitoring of the trainer teacher, as he chases all of the children without making them realize, not one by one, but he keeps an eye on them. Thus, I am more comfortable but anyway if she does not come home or be late for home, I get worried. But I know, even if I cannot pursue her, her teachers would.
>
> (Mecburen okula gidecek, gitmek zorunda. Ama kızımın sporcu olması, takım olmaları, arkadaşlarıyla gitmesi, hocalarının yardımcı olması, antrenör hocanın gözetimi altında olması, bütün çocukları takip ediyor farkettirmeden, birebir değil ama göz kulak oluyorlar. O konuda biraz daha rahatım ama yine de eve gelmezse, gecikirse o zaman daha endişeleniyorum. O zaman biliyorum ki ben takip edemesem de öğretmenleri takip ediyor.) EMINE

> We do not have anything to protect her, we continue our lives, but what do we do, for instance I check her waiting for the school bus going for school, until she enters into that, without even twinkling my eyes, since anything might happen.
>
> (Korumak için birşey yaptığımız yok, öyle hayatımıza devam ediyoruz, ne yapıyoruz, mesela okula giderken bile servise servisçi alana kadar hiç gözümü kırpmadan bakıyorum ne olur ne olmaz diye.) RUVEYDA

Time was another dimension of that keeping the routines, as some mothers claimed they turned back to the routine as time healed or at least desensitised them:

> After some time, the desensibilization starts, I guess, a habit becomes a routine. You have some obligations in life, like going to work, how long would you stay at home, you need to go to work, willingly or unwillingly, and continue to the routine of your life and as time passes it calms down.
>
> (Bir süre sonra duyarsızlaşma başlıyor bence, bir alışkanlık bir anda rutine biniyor bazı şeyler. Hayatın bazı zorunlukları var işe gitmek zorundasınız ne zamana kadar evde oturacaksınız, işte işe gidip ister istemez hayatın rutinin devam etmek zorunda kalıyorsunuz zamanla da bu durum yatışıyor…) SARA
>
> We left it for time, did not do something special. How can I explain? My daughter has to continue her school and she continued going I need to have my routine shooping, I continued. I continued to be updated with the news. We turned back to our routines and as time passed, it passed. But nevertheless, I tried to respond to my needs around here, I tried to be far from there as much as possible.
>
> (Zamanın akışına bıraktık biz, özel birşey yapmadık ki. Nasıl açıklayayım. Kızım okuluna devam etmek zorunda okula gidip geldi. Ben yine alışverişimi yapmaya devam ettim. Güncel olayları takip etmeye devam ettim. Rutinlere döndük, bir süre sonra geçti o da. Ama genelde ihtiyaçlarımı bulunduğum çevrede halletmeye çalıştım, mümkün mertebe uzak kalmaya çalıştım.) SAIME

For some mothers, on the other hand, they did not have the routines that needed to be re-evaluated by some measures:

> No, my son does not go to the shopping malls etc, thus his dad did not have any necessity to warn him, and since he did not recieve any restrictions, none of his routines changed, because there were not something like that in his previous routines.

(Yok oğlum zaten Kızılay'a AVM'lere felan gitmiyordu o yüzden baba da pek söyleme ihtiyacı hissetmedi, ama yani ona yasak gelmediği için rutinleri değişmedi, çünkü önceki rutininde de yoktu böyle birşey.) HAYRİYE

No because generally, I may say my son was too young when these events had started, he did not even have a routine like that, thus he was not affected.

(Yok çünkü genel olarak zaten biz yani oğlum çok küçüktü diyebilirim bu olaylar başladığını çok böyle bir rutini yoktu, o açıdan çok etkilenmedi.) GULIN

Another code for psychological protection of mothers was ***protecting children from possibly traumatic news*** especially in terms of monitoring and reframing due to hesitation to tell the truth to the children both mentioned by 8 participants. Protecting children from the news or TV-monitoring seems to be a strategy especially for the mothers having younger children:

I do not think that he had seen any news, even if he did I did not figure it out, but we tried not to show him much, these news etc, but sometimes if he sees or hears things like the soldiers died and so, we explained it as there may be wars, and they may fight in wars.

(Herhangi bir haberi de zannetmiyorum ben anlamadım gördüyse de ama yani ona çok fazla göstermemeye çalıştık o haberleri vs ama o da bazen asker felan öldü şeyini görüp duyarsa işte savaş olabiliyor, çatışılabiliyor gibi açıklamalar yaptık.) DENİZ

We do not want her to know about those, and also as I said beofre, we do not let her watch TV much. I mean, also, she is too young to understand those, thus, I am a little bit more comfortable in fact.

(Onun bu konuları çok fazla bilmesini istemiyoruz. Zaten normalde de dediğim gibi televizyonu çok fazla izlettirmiyorduk. Yani, bir de zaten küçük kızım bu konuları idrak edebilmek için o konuda da biraz rahatım aslında.) PELIN

I turn on the TV generally in the places that the kids are not there and try to be updated from internet or something. When the kids are around, we watch cartoons or TV-series, but in fact there are not much of the TV-series, we just watch cartoons.

(Genelde çocukların olmadığı yerlerde televizyonu açıp, ya da internetten haberleri takip etmeyi tercih ediyorum. Genelde çocuklar olduğu zaman çizgi film ya da dizi, ki gerçi şimdi diziler de kalmadı, sadece izlediğimiz çizgi filmler.) VAHIDE

Code 2: Empowering the children: Another problem solving coping mechanism code group is empowering the children, like ***encourage open communication with their children****; as 9* participants claimed they tried to give their children the opportunities to share whatever they experience with them:

> Our policy at home is to tell everything openly in a language she can understand, thus when there is a question for such, I would like to talk in a way that they can understand, but I did not come across to them much until now. I do not remember any questions towards the measures we took… Anyway, I mean talking these issues can be relaxing, and can help the individual to face with themselves, thus I try to share with them, I try to be open, I want to develop a relationship like that, now they are too young but, what I try to do is to share with them and make them feel that they are not alone.

> (Bizim evdeki politikamız her şeyi evde dosdoğru neyse onun anlayacağı bir dille anlatmaya çalışmak, o yüzden bu doğrultuda bir soru sorulursa, konuşmak isterim onların anlayabileceği şekilde açıkça anlatmaya çalışırım ama bu konuda çok fazla sorunla da karşılaşmadım şimdiye kadar. Hani bu önlemlere yönelik de çok fazla soru hatırlamıyorum… Yani bu konuları konuşmak onlar için de rahatlatıcı oluyor, ve insanın kendisiyle yüzleşmesine de neden olduğunu bildiğim için ben onlarala paylaşmaya çalışırım, açık olmaya çalışırım, onlarla böyle bir ilişki geliştirmek istiyorum gerçi daha çok küçükler tabii de, ama yapmaya çalıştığım paylaşmak ve yalnız olmadıklarını onlara hissettirmek.) AHU

> I always tell her that, I raised her up like that. I want her to speak out her voice. I do not want her to hide from anyone. With us, I want her to talk everything openly, for instance if something bad happens at school, I say her always, if you talk to us openly, we may try to find a solution together and I will not be upset much, but if you hide it from me or your dad, then I will be really upset.

> (Sunu söylüyorum ona ki her zaman da onu öyle yetiştirdim. Sesini çıkartmasını istiyorum. Kimseden gizlememesini istiyorum. Bizimle açık açık herşeyi konuşmasını istiyorum, mesela okulda kötü birşey olsa bile şey diye söylüyorum sürekli, açık açık söylersen ve birlikte bir çözüm bulabilirsek o kadar üzülmem ama benden saklarsan, babadan saklarsan o zaman çok üzülmüş olurum.) JANSET

Even though the previous codes emerged from mothers almost from all age groups, generally the empowerment group ("understanding and communication" and "helping children to solve their problems") is mentioned mainly by mothers having children older than 6 years of age. This might make sense as in order to get engaged in a communication over an issue; or trusting child's ability to solve it might require some cognitive abilities:

> It is as such; I prefer to talk first, I tell her about the situation, what it is, what it is not, I ask her the reasons. Then I tell her what it supposed to be. Sometimes she accepts. But sometimes when we start talking since she does not like being criticized much, she startes crying generally. Later when I say I am not angry with her, only we talk, and she needs to be calm, only then, we turn to a normal chat.
>
> (Şöyle önce konuşmayı tercih ediyorum, ona bu durumu anlatıyorum, nedir, ne değildir, ona nedenlerini soruyorum. Daha sonrasında da olması gerekeni söylüyorum bazen kabul ediyor. Ama bazen biz konuşmaya başladığımızda eleştiriyi çok sevmediği için o anlamda genelde ağlamaya başlıyor, daha sonrasında hani ona kızmayacağımı, sadece konuştuğumuzu, sakin olması gerektiğini söylediğimde ancak rutin bir konuşmaya dönebiliyoruz.) SARA

As can be seen above, sometimes the mothers might need to calm the child and prepare for a discussion before trying to solve the problem with them. Sometimes, this "calming" sessions might be in the form of trying to help them to see the issues from another perspective:

> For instance, when she had a problem with her teacher, for instance when she said my teacher told so and so to the other students, or she thinks of the other children more, when she has such a concern, I say "My dear, your teacher must have known something".
>
> (Mesele öğretmeniyle bir sorun olduğunda, mesela büyük öğretmenim diğer öğrencilere şöyle böyle dediği zaman, o diğerlerini daha çok düşünüyor, öyle bir kaygıya düştüğü zaman, şey yapıyorum mesela öğretmenin mutlaka bildiği birşey vardır kuzum.) RUVEYDA

Helping them to solve their own problems, discussing with the child is another pattern especially the mothers with teenager children try to employ if they can:

> I try to motivate her to solve the problem on her own first, to let her deal with it, at the point she cannot succeed, I interfere without letting her know. For instance, if she has a problem with a friend, I talk to the mother of the child and say "you talk to your daughter so that they can talk and get on well" NIMET
>
> (Genelde ilk onun problemi olursa kendisinin çözmesine yönlendiriyorum, kendi halletsin diye, başaramadığı noktada ben çaktırmadan devreye giriyorum. Örneğin bir arkadaşıyla problemi olursa cocuğun annesi ile konuşuyorum sen de kızınla konuş ki konuşup anlaşsınlar diye.) NIMET

Lastly, five mothers claimed that they discuss about what measures to take with their partners and children:

> For instance, the talk we make with my partner is not emotional but we see it more objective and I get calm after the talks we have. It is the same with my mother and brother. Instead of being afraid, we talk about taking measures, instead of being sorry, we try o analyze the event as what happened, how it happened, will it happen later or not, what should we fear from, what are the expert-opinions about it?
>
> (Mesela eşimle yaptığımız konuşma duygusal değil de biraz daha olaya nesnel şeyler üzerinden yaklaşmaya çalışmak, ama bu benim içimi rahatlatıyor, eşimle yaptığımız konuşmalarda. Annem ve kardeşimle de aynı şey söz konusu. İşte korkmak değil de önlem almak, üzülmek değil de olayı analiz etmeye çalışmak gibi, ne oldu, nasıl oldu, bir daha olur mu olmaz mı? Nelerden korkmak lazım, uzmanların görüşleri neler bu konuda?) AHU

As it can be observed, the mothers were trying to employ some problem focused coping. However, even doing it, their emotional distress seemed to be high and they also employed some emotion focused coping which would be presented in the following subsection.

4.4.2. Emotion Focused Coping

In this section six codes (1) Acceptance, (2) Distraction and thought stopping, (3) Spirituality, (4) Social support, (5) Reframing and Blaming and (6) Hope and resilience are given under emotion focused coping category. It is important, especially since mother try to calm themselves like 10 participants (47.6%) claim that they try to calm themselves:

> Have you taken any professional help? No, we tried to cope with by ourselves, thinking about our children, we tried to get over these fears.
>
> (Hayır kendimiz başetmeye, çocuklarımızı düşünerek o korkuları yenmeye çalıştık.) VAHIDE
>
> Since my anxieties are not like the ones before, I try to get over it myself, by thinking about the fashion, trips to abroad etc, to create excuses, to think about other stuff in my mind.
>
> (Bir de kaygılarım da ilk zamanki gibi olmadığı için de kendi kendime yok moda, yok yurt dışı gezisi gibi şeyler düşünüp bahane üretiyorum, zihnimi başka şeylerle meşgul etmeye çalışıyorum.) JULIDE

Code 1: Acceptance: This last subsection was about the coping strategies that the mothers had in these hard times. The most frequently cited (12 participants, 57.1%) them of all is the code about acceptance of they cannot change what would happen coded under the name "***Acceptance: Que Sera Sera***":

In fact, I did not take any measures. I mean, mostly I tried to calm myself. You do not have anything to do I mean. Since I have seen there is nothing I can do, it became like accepting it I guess, something like "you will live and see"

(Aslında hiçbir önlem almadım. Yani şöyle, genelde kendi kendimi sakinleştirmeye çalıştım. Yapacak da birşey yok yani. Yapacak birşey olmadığını gördüğüm için kabullenme gibi birşey herhalde yani artık yaşayacaksın ve göreceksin meselesi gibi oldu.) AYSE

Obviously, there are worries but you cannot live with them. You cannot live such. If something will happen, it can happen everywhere, everyway, you do not have to be in the East for that, it happens also here, also in Istanbul, or even if you are in France if it would find you, it does.

(Endişeler mutlaka oluyor da çok da endişe ile de yaşayamayız ki. Öyle yaşanmaz ki. Eğer olacaksa birşey her yerde her şekilde olabilir, ille doğuda olmaya gerek yok. Burada da oluyor, İstanbul'da da olsanız, Fransada da olsanız buluyor bulacaksa.) MELIKE

I always believe this a little bit, I guess, I say, ok, maybe there are the explosions etc but in fact no matter what happens if our time has ended in that explosion, then, we would also be gone, which means we have more bread to eat, more days to live.

(Hep şuna inanıyorum biraz da belki ben, diyorum ki ya tamam patlamalar felan oluyor ama sonuçta yani ne olursa olsun, eğer o patlamada bizim de vademiz gelmiş olsaydı, o zaman biz de giderdik, demek ki daha yiyecek ekmeğimiz varmış, yaşayacak günümüz varmış.) EMİNE

The most frequently cited coping-related code is **"*Continuing life, getting accustomed to it*"** as eight mothers mentioned it:

Apart from that, everybody continues their own lives. I mean, I cannot shape my life according to those, no longer, I mean, of course we take the subway, of course we go to the malls. But at least, we are not living in the east, but anyway, now there is terror also in Istanbul. We cannot do something for that, of course.

(Onun dışında herkes kendi hayatına devam ediyor. Yani, hayatımı bunlara göre çok şekilllendiremiyorum artık yani tabii ki metrolara biniyoruz, tabii ki avmlere gidiyoruz. Ama nedir, doğuda yaşamıyoruz ama nedir, İstanbulda da terör var artık. Buna da birşey yapamıyoruz tabii ki.) DENIZ

Unfortunately, I say I got used to the terror events in the east, they do not come as different to me, it is like an ordinary event, unfortunately.

(Doğudaki terör olaylarına artık alıştığımı söylüyorum üzülerek, bana değişik gibi gelmiyor, sanki sıradan bir olay gibi geliyor malesef.) SAIME

Code 2: Distraction & Thought Stopping: Avoiding disturbing ideas, especially when they catch themselves (9 participants, 42.9%) was a code including the one of distraction but had more than that:

What gives you the strength to cope with those concerns?
I am avoiding I guess. I prefer to escape from those, I guess.

(Kaygılarınla başa çıkmada sana güç veren?
Ya ben genelde kaçıyorum herhalde bu şeyden. Kaçma yolunu tercih ediyorum galiba.) AHU

Did you think it might happen to someone you love? Did not, because I do not want it to come. If it comes I feel bad. (the alert to stop the recording).

(Sevdiğiniz birinin siz başınıza gelebileceği? Gelmedi, getirmek istemiyorum zaten. çünkü getirince kötü oluyorum. (durdurma uyarısı)) RUVEYDA

The other most frequently used one is ***"Distraction"*** as it was coded in the interviews of 6 mothers. This was mainly trying to avoid the thoughts by taking her own attention to unimportant/routine things eg. knitting, reading, entertainment:

What do you do when those come to your mind?
Aww, I became short of breath, I say what would I do, how would I do? Then, directly, I start to think something else. Listen to a music, or read a book, or other stuff, like playing games, doing something else, I try to calm myself and my child. Because of that, I do not watch the news for instance.

(Ayyy, nefesim daralıyor böyle, ne yaparım, nasıl ederim? Ondan sonra, direk başka şey düşünmeye başlıyorum. Bir müzik dinlemeye çalışıyorum, ya da bir kitap okumaya, ya da başka birşeyler, işte oyun oynayalım, birşey yapalım felan deyip, kendimi ve onu sakinleştirmeye çalışıyorum. O yüzden ben de haber seyretmiyorum mesela.) PELIN

Thought stopping is of the issue is another pattern in which the mothers try to solve the problems themselves in a more direct and short-cut way as possible.

I try to solve it, but if I do not, I forget it. I quit, I do not work much to solve it.

(Çözmeye çalışırım, ama çözemezsem unuturum. Bırakırım yani, çözmek için çok uğraşmam.) PELIN

I try not to be obsessed of it. Besides, I may talk whatever problem I have. I try to solve them in a short-cut, in fact whatever they are, by myself.

(Yani çok fazla kafama takmamaya çalışıyorum. Yani onun haricinde konuşabiliyorum, sıkıntım neyse. Yani kısa yoldan çözmeye çalışıyorum aslında neyse problemleri tek başıma.) DENIZ

What do you do when those come to your mind?
I say, "No way, it would not happen, may Allah protect us" and try to get rid of those ideas. I try to think other things. I try to do something to help me to be distracted, like a handicraft, or opening the TV.

(Yok canım olur mu öyle şey, Allah korusun diyip düşüncelerimi dağıtmaya çalışıyorum. Başka şeyler düşünmeye çalışıyorum. O anda kafamı dağıtacak şeyler yapıyorum, ya bir el işi alıyorum, ya bir televizyon açıyorum.) SAIME

Code 3: Spirituality: The second most frequently cited one is ***Coping with spirituality*** as praying, thinking in spiritual terms and belief in destiny, as 38.1%, eight participants claimed it:

While the coup happened, we felt these shakings of the windows due to the noise of the flying jets, bombs, even though we were far away. We said, "who knows how much the ones close had been affected?", that night I read Salah; I read Fetih, I prayed.

(Darbe, olunca biz uzakta oturmamıza rağmen titremeler oldu uçakların sesinden camlar sallandı bombaların sesinden biz yakındakiler nasıl etkilendi kim bilir dedi, o gece fetihi okudum namaz kıldım dua ettim.) NUR

I mean, I am someone who believes in destiny, I believe everything is Allah's will, thus everything happens as Allah says, thus, no matter how concerned I become, nothing would happen except from his will. Thus, I try to calm myself saying it is the destiny.

(Yani şöyle söyleyeyim ben kadere kazaya inanan bir insanım, herşeyin takdir-i ilahi olduğunu, yani Allah ne derse zaten o şekilde ilerleyeceğini, ben ne kadar endişelenirsem endişeleneyim, yani onun dediğinden başka birşey olmayacağını düşünüyorum. Yani, kader diye kendimi sakinleştirmeye çalışıyorum….) SILA

We were not afraid, why we were not afraid, because does terror shoot us, kill us? No terror does not, Azrail does. My dad used to say when I asked, "What is death?" around the age 4-5, it is a door underlying your graves, not perishing bodies. You enter to another place, and the one taking your life is Allah, not terror and you need to do whatever you may to enter from that door with the good deads, you would fight for your causes, whatever it is. Since my parents raised me up as such, I did not fear, to be honest… Death is always there, dead is a right, it is normal. The time will end according to how much time Allah gave us, it will end that time no matter at home, in bed, it will end.

(Bir de korkmuyorduk, neden korkmuyoruz çünkü terör bizi vurur öldürür mü, terör öldürmez, Azrail öldürür. Babam derdi daha 4-5 yaşında ölüm nedir dendiğinde, mezarın altında çürüyen beden değil, bir kapıdır, başka bir yere geçiyorsun, senin canını alan Allah, terör değil ve o kapıdan iyi şeylerle geçmek için elinden geleni yapacaksın, bu hayatta davan neyse onun için mücadele edeceksin. Annem babam bizi o şekilde büyüttüğü için biz de çok kormadık açıkçası. … Ölüm hep var, ölüm hak. Normal. Allah ne zaman vermişse o zaman bitecek evde de olsan yatakta da olsan, bu bitecek.) KARDELEN

Belief in destiny, which was coded as spirituality also seems to be embedded into this code in some participant's interviews:

My child had a crazy death anxiety last year for a 8 month. She feared of me dying. She used to come to me at nights, crying, and say "mom, in my dream, you died again". "Mom, may I sleep with you" she used to say. Also my daughter and his father are not together, since I am her everything I am so important for her. When my daughter said so, I said, "My daughter everyone has a time in this life, that is determined by Allah, we cannot know who will live how much, maybe I will die in my 60s, maybe you will die now, may Allah protect us. We cannot know it, we need to live our lives good and provide support for each other but we cannot know the rest, Allah knows.

(Bir de çocuğum geçen sene bir 8 ay kadar deli bir ölüm korkusu yaşadı. Benim ölmemden çok korktu. Devamlı gece ağlayarak uyanır yanıma gelirdi, anne yine öldüğünü gördüm rüyamda diye. Anne seninle yatabilir miyim, öldüğünü gördüm derdi. Bir de kızım babasından ayrı onun herşeyi benim ya, o yüzden de ben onun için çok önemliyim. Kızım öyle diyince ben de dedim, kızım herkesin bir vadesi var bu hayatta Allah'ın biçtiği, kimin ne kadar yaşayacağını biz bilemeyiz, belki ben 60ımda ölücem, belki de sen şimdi öleceksin Allah korusun. Bunu biz bilemeyiz, biz hayatımızı iyi yaşamak, birbirimize destek olmak durumundayız ama gerisini bilemeyiz, Allah bilir.) NIMET

I mean we do not have much about the living style because may Allah not make it happen, what do you do, you protect your child from the explosions in Ankara, but when your child goes to Istanbul for holiday, then he becomes a victim there, I mean, you do not have a chance to protect. Moreover, I don't know it would happen at home, if he falls off from the chair and hits his head, if something would happen, may Allah protect us, you cannot prevent it, it is what is called destiny…. I mean you live in such a country, I do not have the chance to leave, I do not have chance to live here and go to another place. Thank God, we have the belief complete, it is the destiny, and you cannot escape from it, if my destiny is to live here, I cannot have anything to do, I cannot shape it, do I run this country? no, I do not have a magic stick in my hands also, I cannot do anything, since I cannot change it, like all other people we accept and sit, I mean. We do not have any chance, what would you do if

you do not like it, nothing. You accept and sit. Do you have anything to do? No.

(Yani yaşam tarzıyla ilgili çok birşey yok bir de Allah göstermesin ne yapıyorsunuz çocuğunuzu Ankara'daki saldırıdan kurtarıyorsunuz, sizin çocuğunuz tatil için gezmeye İstanbul'a gidiyor, oradaki saldırıda kurban gidiyor, yani bir koruma şansınız yok. Bir de ne bileyim evde sandalyeden düşer başını çarpar yine birşey olur olacaksa Allah korusun, yani bu kaderdir şeydir. önüne geçemezsin Allah korusun… Yani böyle bir ülkede yaşıyorsun, terketme şansım da yok, burayı bırakıp başka yere gidecek şansım yok. İnancımız tam çok şükür, yani kaderdir, kaderden de kaçamazsın, benim ülkemde kaderim buysa yaşarım, yapabileceğim birşey yok ki, şekillendirme de yapamam, yönetiyor muyum ülkeyi yönetmiyorum, elimde bir sihirli değnek de yok, birşey yapamam, bunu da değiştiremeyeceğim için bütün insanlar gibi kabullenip oturuyoruz yani. Başka şansımız yok, beğenmesen ne yapacaksın, hiçbir şey. Kabullenip oturuyoruz. Yapacak birşey var mı yok yani.) HAYRIYE

Spirituality, praying and belief in destiny (10 participants) are other codes emerged from the interviews, also embedded in some quotations coded under self-calming:

While the children were young, I used to say, what if if I die, how would they be, and I felt the sadness of it for some time, but than a voice within me got angry with me and told me Why did Allah send you these children? As entrusts, the owner is himself. Who is the one that takes care of something most, the entrusted or the owner himself? … I had serious illnesses, and I figured out that the situation was that based on my anxieties.

(Çocuklar küçükken ben şey derdim, acaba ben ölürsem benden sonra bu çocuklar nasıl olur, bir dönem bunun üzüntüsünü yaşadım, ondan sonra dedim ki, içimdeki ses sinirlendi öfkelendi dedi ki Allah sana bu çocukları ne diye gönderdi? Emanet, kendisi ne, hak sahibi. En iyi bakan emanetçi midir hak sahibi midir? … Ciddi hastalıklar da geçirdim, oradaki kaygılarımda hep durumun bu olduğunu anladım.) KARDELEN

Code 4: Social support: The second most frequently mentioned code was ***social support*** as around 50% of the mothers (11 participants) claimed that they try to cope with those situations with the social support they receive from friends and family:

Being a family, being with the people I love. I took my strenght from my family and friends, I had seen them getting calmer, that's it.

(Aile olmak, sevdiğim insanlarla birarada olmak. Ailemden, arkadaşlarımdan güç aldım, onların rahatladığını gördüm, o kadar.) JULIDE

> I mean by talking to people, especially by talking to my partner, my friends, my family, at least sharing our problems, feeling sad sometimes. We cannot really cope with it, but what should we do, we say "that's the life" and continue like that.
>
> (Yani birileriyle konuşarak, eşimle arkadaşlarım ailemle konuşarak en azından dertlerşetek, üzülerek bazen de. Çok başa çıkamıyoruz, ama ne yapalım, hayat diyerek o şekilde devam ediyoruz. En çok da eşim güç verdi.) DENIZ
>
> We all thought everything would be better of course. As they say to see the positive sides, it is like that, we are together, we are a family, we are all alive. Moreover, there are some measures taken in the country, there are those suggestions I tell myself.
>
> (Her şeyin güzel olacağını düşünüyorduk tabii ki. Ondan sonra olumlu yönleri görün deniyor ya, öyle hep birlikteyiz, aile ile birlikteyiz, hepimiz sağlamız. Ondan sonra ülkede bazı tedbirler alınıyor, önlemler alınıyor, bunların telkinleri gibi kendime telkin yaptığım şeyler var.) PELIN

On the societal level, another code that can be considered as a social support is ***Idea that you are not alone*** mentioned by six mothers; as they had the idea that other people are also going through the same stuff:

> You try not to think of it, most of the time, and knowing there are other people in these worlds and you are not alone comforts someone. You are not alone, there are other people around, and they can be in that situation. Thinking you are not alone helps, but thinking you are alone is so bad.
>
> (E, düşünmemeye çalışıyorsun çoğu zaman, başka insanların da olduğunu bu dünyada yalnız olmadığını düşünmek insanı rahatlatıyor. Tek başına değilsin, başkaları da var bu durumda başkaları da olabilir. Tek başına olmadığını düşünmek bu durumda rahatlatıyor. (anlaşılmıyor) Ama yalnız olduğunu düşünmek çok kötü) AHU

But this was perceived as a negative thing for some mothers:

> I mean we do not have anyone from our families here. All the other people living here are already like me, I think, some more some less but they are all affected. … I mean, I do not think that sharing problems might be helpful, because I say it always, there is this uncertainilty, and since there is it, you share your problems but it is not certain that what it is.
>
> (Yani şöyle zaten aileden kimsemiz yok bizim burada. Burada yaşayan insanların zaten hepsi benim gibi diye düşünüyorum kimi daha az kimi daha çok ama herkes etkilendi… Yani, dertleri paylaşmanın da yardımcı olduğunu zannetmiyorum çünkü devamlı onu söylüyorum ya belirsizlik var, belirsizlik olduğu için dertleşiyoruz ama ne olduğu belli değil.) GULIN

> I did not receive [any social support] because I thought everyone is like us, thus I prayed, I believed in destiny, also my anxieties are reduced gradually, as the bomb explosions are reduced.
>
> (Almadım. Çünkü herkesin bizim gibi olduğunu düşündüm dua ettim. Kadere inandım ve bombaların patlaması azaldıkça kaygılarım giderek azaldı.) CEREN

Talking is another related coping strategy that six of the mothers mentioned:

> It is, my partner's support… My partner, always gave me a therapy like a psychologist. Told me these can be got over, the most important one is our children's health, if we work together there is nothing we cannot get over…
>
> (Şöyle, eşimin desteği…Eşim, gerçekten bir psikolog gibi bana devamlı terapi verdi yani. İşte bunları atlatabileceğimizi, önemli olanın çocuklarımızın sağlığı olduğunu biz ele ele verdiğimizde üstesinden gelemeyeceğimiz hiçbir şeyin olmadığını…) KUBRA

Another important pattern was the statement that being strong for the children, as 9 participants claimed they took their strength for coping from their children and they need to be strong for their children, in order to provide and protect them:

> Children, compulsorily the children. If you are devastated before your children they understand it immediately. They ask "Mom, what's the problem? Why do you cry? What happened?" Thus, you need to behave as if there is nothing before them, I do not watch anything to restrain myself, I block myself, I mean you need to behave as there is nothing…
>
> (Çocuklar, mecburen çocuklar. Çocukların karşısında yıkık durursan, bitik durursan, çocuklar zaten hemen anlıyor. Anne neyin var, ya da neden ağlıyorsun? Ne oldu anne, diyorlar. Onların karşısında hep birşey yokmuş gibi davranmak zorundasın, oysa öyle kendimi dizginlemek için izlemiyorum ya da işte ket vuruyorum, birşey yokmuş gibi davranmak zorundasın yani…) AYSE
>
> Eventually, you have a life that continues and a child, you need to be strong willingly or not, because you cannot project these concerns to her.
>
> (Bir de sonuçta yaşamınız devam ediyor ve bir çocuğunuz var, ister istemez daha güçlü olmak zorundasınız, bu kaygıyı ona yansıtamazsınız.) SARA
>
> It must be the motherhood instincts, we will be strong and on our feet for our children. We will think strong.
>
> (Annelik içgüdüsü herhalde, çocuğumuz için ayakta olacağız, sağlam olacağız. Sağlam düşüneceğiz.) MELIKE

Moreover, some mothers take attention to the reciprocal nature of that:

> It is my child who gives me the strength, I am on my feet for her. I think for my child, it is me, she says so, she says "you are the best mother in this life" all the time.
>
> (Bana güç veren şey çocuğum zaten, gerçekten güç veriyor, onun için ayakta durmak zorundayı Çocuğuma da güç veren ben varım galiba, öyle diyor kendisi. Her zaman sen dünyanın en iyi annesisin diyoruz.) NIMET
>
> My children, in fact there is nothing else for me. In fact, in this life for me the most important of all is my children, I do everything for them. They are the ones that keep me on my feet, I do stand up to everything for them, I try to be strong… But I think, for them, knowing I am on their back gives them the strength. Both my son and daughter says, "if you are with us, it is ok" since they know I am always backing them up, I feel happy when I hear it.
>
> (Çocuklarım, başka birşey yok benim için. Çünkü hayatta açıkçası benim için en önemlisi çocuklarım, herşeyi onlar için yapıyorum. Beni en çok hayatta ayakta tutan çocuklarım, onlar için herşeye göğüs geriyorum, ayakta kalmaya çalışıyorum… Ama bence benim onların arkalarında olduğumu bilmeleri onlara güç veriyor. Oğlum da kızım da herşeyden önce benim arkalarında olduğumu bildikleri için, sen varsan tamam diyorlar, bunu duyuyorum mutlu oluyorum.) EMINE

Code 5: Reframing & Blaming: The attempt of reframing seems to be ok with the younger children, and especially if it was reframed consciously:

> We had gone out with my son, he asked some questions like "Mom why there are the police around? Mom, why there are many policemen?" even though he was not anxious. I do not make many explanations in order to prevent him from being anxious like saying thing such as the bomb may explode, that might happen, this might happen etc, but rather say things like "sometimes, somewhere the police need to protect people more" giving more closed explanations. I said, sometimes they need to protect people more. Not saying something might happen, but rather like this place is very crowded and the police need to protect here, because it was a crowded place.
>
> (Oğlumla beraber dışarı çıkmıştık, "Anne neden polisler var? Anne neden polisler çok?" gibi endişelenmese de bu tarz soruları çok sormuştu. Ben çok fazla da açıklama yapmıyordum sadece endişelenmesini engellemek adına işte bomba patlayabilir, şu olabilir, bu olabilir gibisinden değil ama bazen biryerlerde insanları korumak için daha fazla polis olabilir gibi daha kapalı açıklama yaptım. Bazen işte insanları daha sık korumaları gerekebiliyor dedim. Hani birşeyler olabilir gibisinden değil ama burası çok kalabalık ve çok polislerin koruması gerekiyor burayı şeklinde bir açıklama yaptım çünkü kalabalık bir yerdi orası da.) DENIZ

> There was not a big explanation, but I said rather it was something on TV, it was not something that could affect us, and when she though it was on TV, she did not feel more worry.
>
> (Öyle çok bir açıklama olmadı ama bunun televizyondaki birşey olduğunu, bunun şu anda bizi etkileyen bir durum olmadığından bahsettik, o anda televizyonda olduğunu düşününce daha fazla kaygı yaşamadı.) SARA

Especially by the older children, mother's lies are more easily detected, as the previous quotations of the mothers like KUBRA telling the jets flying in the coup attempt was the rehearsal; SAIME telling the sounds of the bombs were the fireworks, and EMINE saying everything was normal, were all attempts of reframing/lies which were caught by their teenage children. Thus, another participant makes that point saying it was a mistake that she does:

> I used to take my daughter to theatre, or to the cinema but now I cannot, especially the places that these bomb explosions happen are the crowded places where there are youths, like the one night club in Istanbul, thus people started to fear. They ask questions, they talk your head off, why don't we go, why don't we participate? I say, because we cannot, we cannot trust it, what if something happens? She asks what would happen, you say what if there happens a theft, or what if you became ill, and there is not any excuse left, since we kept telling those. This is very wrong, what we did, it is an error, we restrict the children, but what we say and what we do are different, they always hear lies from us, and after a certain age, they realize that it was a lie, that's a different issue.
>
> (Eskiden bir tiyatroya sinemaya götürürdüm kızımı şimdi götüremiyorum bir de genelde bu patlamalar kalabalığın yoğun olduğu yerlerde genç kısımların olduğu yerlerde olduğu için mesela istanbuldaki bar taraması, o yüzden korkmaya başladı insanlar. Tabii onlar da soru soruyor, senin canını yiyor, işte niye gitmiyoruz, niye katılmıyoruz diyor. İşte diyorum gidemeyiz, güvenemeyiz, birşey olursa. Ne olursa diyor, işte ya hırsızlık olursa gibi ya da yorulursun hasta olursun gibi farklı şeylerle farklı bahaneler üretip söylemekten artık bahane kalmadı. Bu yaptığımız da çok yanlış, hata, çocukları kısıtlıyoruz, yaptığımızla söylediğimiz tutmuyor, devamlı bizden yalan duyuyor, belirli bir yaştan sonra yalan olduğunu da anlıyor, bu da ayrı bir konu.) VAHIDE

Some rather-negative patterns are about blaming the child or blaming herself is also mentioned through the interviews and was coded under *"**Blaming the child/getting angry" and "Self blaming**"*:

> First, I would have a shock, especially when there is a big mistake, if she errs, for instance if she gets 60-70 points over an exam that we had expected 100; I feel the shock, then I start getting angry, why did you do that, you did that, why did you have this despite studying, I have something like that, I do not accept the error.
>
> (Önce bir şoka girerim, özellikle büyük bir hata varsa, bir yanlış yapsa, 100 beklediğim sınavdan 60-70 getirirse felan, bir şok geçiririm, sonra başlarım kızmaya, sen niye böyle yaptın, şöyle yaptın, çalıştığın halde niye böyle getirdin bu notu öyle bir şeyim var, herhangi bir hatayı kabullenmiyorum.) VAHIDE
>
> Like all of my things, I question myself first. For instance, did I do something wrong, is there anything I can fix, in me, to make it better or to fix the situation.
>
> (Her işte yaptığım gibi genellikle kendimi sorgularım. Mesela benim yanlış yaptığım birşey var mı, ya da benim düzeltebileceğim birşey var mı kendimde, bunu daha iyi yapabilmek için, bu durumu iyileştirmek için.) GULIN

Code 6: Hope and Reslience: Besides those, some mothers claimed they cope with hope, thinking everything will be fine in the near future. While ZEYNEP justified it as saying she believes in the good in human nature, JULIDE argued it was just a coping trick she had but she does not believe in it, but just want to hope. Normalizing was another strategy that some mothers used, as they thought these events and deaths are a part of world and they are normal, like KARDELEN who had combined it with spirituality. But it also seems like turning to routines, or feeling one has to turn back to the routines is also related to perceiving they are the "norm"al pains of the life. Coping incapability is another code as some participants responded to the coping questions claiming they are not able to cope, they are not strong, or they doubt that they can cope. Some of the mothers had a profession of helping others in terms of their psychological well-being and for instance ZEYNEP argued it was also a way of coping for her as she says, "since you are the counsellor to help them, you became stronger". KARDELEN, on the other hand, attributed her resilience to tough working conditions she had, claiming she had seen many faces of the terror and being raised with that truth, made her stronger.

"Hope that things would be better" and "Thinking at least they could survive "in such an environment were other frequently mentioned (eight participants and six participants respectively) codes:

> I dream beautifully and tell her to make them strong, I say when you grow up things would be such and such, you will have friends, you will go to the cinema, I will take you to the theatres when the referendum is over. My son says, "let's go to see the horses", when he says so, these events seems like over but you know they say like "the calm before the storm", I am still anxious, more anxious.
>
> (Çocukları güçlendirmek için de ben onlara güzel güzel hayal kurup anlatıyorum siz büyüdüğünüzde böyle olacak, arkadaşlarınız olacak, böyle sinemaya gidersiniz, işte bu seçim olayları bitsin mesela sizi sinemaya, tiyatroya götüreyim. Oğlum diyor atlara gidelim, o öyle dediği zaman işte olaylar bitmiş gibi görünüyor ama işte fırtına öncesi sessizlik derler ya, hala tedirginim, daha çok tedirginim.) VAHIDE

Last, some mothers claimed they need to seek/consider psychological help for children/themselves, some saying it helped them a lot, but some other claimed they did not take because they were not knowledgeable enough to figure out where to go, or they thought it was expensive, not necessary at that moment, or since their children did not want.

Briefly, in terms of mothers' coping, it was found that problem focused coping was mainly referred in relation to their children, as mothers tried to protect and empower their children. While they were trying to deal with stress, mainly emotion-focused coping was mentioned.

Overall, in this present chapter the results from 21 interviews were presented in terms of mothers' terror responses, perception of their children's responses, concerns and coping. The results were mainly parallel to the literature, indicating also mothers in Turkey has a high terror-threat perception and security/terror-related stress. As mentioned in the literature, such stress would not only affect their psychological and physical help, but might affect their assistance to the children to cope with such situations. Therefore, in the following chapter, the main findings will be discussed with the implications proposed to the Turkish practitioners, policy makers and scholars.

CHAPTER 5

DISCUSSION

In this present thesis mothers'experiences of terror incidents, their perceptions of and responses to their children's experiences, mothers' concerns and how they cope with these stress and concerns were elaborated. A total of 21 mothers, who had at least one child between ages 3-15 were interviewed and the data was analyzed in a qualitative data analysis software. None of the participants had direct exposure to the attacks, as being there at that exact moment or being injured, however almost all of them claimed some kind of proximity to the place. This was either physical proximity as being able to hear or see some clues of the events, such as hearing the explosion, gunshot or jets motor sounds; seeing the smokes or jets flying; or an emotional proximity as being quite familiar with the place.

The responses reported by the participants in terms of their own and their children's responses varies as cognitive, physical, and emotional responses. All the reports responses quite consistent with much of the literature presented in the Chapter 2. Threat perception was high in mothers, as the familiarity of the attacks' places created a sense of proximity. Therefore, responses being alive by chance and thinking "it could have been me" was also common. Mother's were not only concerned about their own well-being as they were concerned about their children's physical and psychological well-being and what would happen to them if they die. Therefore, they had employed both problem focused and emotional focused coping, the first one related to their concerns about children, and the second one in order to relived the emotional distress this constant threat perception and risk creates.

5.1. Discussion of the Main Findings

The findings of the study suggest that most mothers were stressed out by these traumatic events, and had been exposed to terror either through hearing or seeing the attacks or

the news-images of these attacks. In an earlier study on post 9/11 trauma with the Americans only observing the media images, Wayment (2004) had found similar results. Even though it was an ***indirect exposure***, the university students in her sample had been affected from the event, thinking it could have been them. Similarly, a recent article from the Israeli context with university students had also indicated post-attack trauma after indirect exposure, only due to media (Ben-Zur, Gil and Shamshins, 2012). This present study's findings are in line with these previous findings, as even some of the mothers had only experienced the event through media, they responded in a way similar to mothers who had heard or seen the event more closely. For instance, MELİKE had mentioned about the images of Güvenpark explosion, not fading in her memories; while AHU and CEREN had mentioned crying while they had seen the videos of explosions and people's death even though these mothers were physically safe and secure. Similar to Wayment's results, also in this study mothers though as "it could have been me". This result means that mothers do not feel safe and secure for the future as well. Because of ongoing terror attacks, they and their loved ones are in danger. Such anxiety evidently restricts their life styles as most mother testified that they avoid crowded places such as shopping malls and public transportations such as metro. They also closely monitor their children due to safety concerns. One related risk factor was the mother's claiming ***proximity to the place***, which triggered some of the thought responses mentioned above, like thinking it could have been them, or they are secure by chance. The reactions of the ones having physical proximity is more predictable, as proximity is one of the risk factors mentioned in the literature (Gelkopf, Berger, Bleich & Cohen-Silver, 2012). For instance, during the coup attempt, some mothers had indicated they had heard and seen a jets flying over the apartments and felt the quake of it, which was understandable for their traumatic reactions.

However, in this present study, there was also a perceived proximity to the place, as mothers claimed they had known the area well, had been visiting it or had been there at that day. Such, "psychological" proximity, also seems to create a sense of insecurity and terror stress, which was similar to the Israeli cases. For instance, after sequential attacks in early 2000s, a nationwide survey by Klar, Zakay and Sharvit (2002) had revealed the Israeli's had severe realism and high-risk perception and they had named the article over a bus drivers' phone call as "If I do not get blown up, I will meet you in

about forty-five minutes". The reason might be the unpredictable nature of these incidents as it can happen anywhere and anytime. For instance, one of the most frequently cited statement of mothers was "if it will happen, it will happen; I cannot do anything, terror is in everywhere now." However, this unpredictability is embedded in the definition of terror itself and it is what it turns to terrorism to a 'psychological warfare' by creating the sense of uncontrollability (Ben-David and Cohen-Louck, 2010).

Together with indirect exposures and hearing and seeing, these attacks seem to affect the collective memories of the mothers, leading to a ***collective trauma***, in addition to their individual traumas. This was similar to Baelo-Allué's (2012) argument that 9/11 had both personal/psychic and collective/cultural trauma dimensions. Such traumas were also found to affect the sense of security (Baelo-Allué, 2012; Janoff-Bulman & Sheikh, 2006) which might explain the frequent mentions of feeling insecurity, threat perception and mistrust responses of mothers in this present study. According to the literature, increased national sentiments were also found in collective traumas (Volkan, 1975). This was also observed with the participants in this study, in their statements like, "how could this be done to *our* soldiers, *our* soldiers die every day, *our* country and nation" as well as anti-Syrian sentiments might be clues of this. Moreover, such collective traumas affect a community's sense of identity, (Baelo-Allué, 2012; Janoff-Bulman & Sheikh, 2006) and might lead the individuals to scapegoat some subcultures like the 9/11 had affected the muslim americans negatively (Abu-Ras & Abu-Bader, 2008). One participant had mentioned the prejudice towards her due to her being of Kurdish origin, people's judging her to be a PKK member. This was also in line with the 'fear of fears' mentioned by Aly and Balnaves, as Australian muslims' fear of being feared as identified as terrorists.

This ***mistrust*** and prejudice was also a stress factor for the mothers. The mothers had mentioned that they were so much alert for any terror threat as they kept monitoring strangers, become suspected of them as they might be terrorists or other types of evil people. This was also consistent with the terror-risk perception and terror-stress literature as Grewal's (2006) security mom Michelle Malkin after 9/11; Borell's (2008) Beirutis during 2005 attacks, Klar, Zakay and Sharvit's (2002) post-intifada Israelis had

all reacted in a similar way. The unpredictability of these incidents leaded people to be more alert to increase their survival capacities. However, some mothers in this study had proposed "as if I could do something to them", "what if I figure out they were terrorists", which can be interpreted as mothers' perceiving themselves as incapable of doing something to prevent such incidents, even if they were quite alert. This might also add to the constant stress they feel, and a reason why they tend to have more emotion-focused coping that would be discussed later. Another stress factor was their complaints about the mistrust spreading over society. Even though the mothers themselves indicated that they do not trust people around them, and get suspected from strangers they complain about it too. Their complains base on two dimensions (1) they complain that the general climate of Turkey is like that; i.e. you cannot trust anyone, people are untrustworthy and this is bad, (2) they complain that they became paranoid-like individuals and overprotective mothers, i.e. could not help the needy because they fear of one's turning back to a suicide bomber or restricting children much. Even though a previous study highlighting this dilemma was not observed, there is no doubt that it is against the social nature of humans. In other words, unlike their ancestors, modern day humans take car accidents and explosions as true alarms for fight-flight-freeze responses as Zayfert and Backer (2007) proposed. However, perceiving other human beings as true alarms for threat might affect both individual and societal well-being of the humans, as they were rather social animals and need to count on each other.

Mothers also fear about this general climate of insecurity and mistrust as it may have prolonged to their children's adulthood and affect their psychological well-being. This can be interpreted as mothers not only are concerned about their children's present but also about future and they appreciate their own stress thinking how hard living under terror-threat is. ***Terror-stress*** is a form of constant stress in such political climates and it might cause various psychological and physical health problems (Zakowski, Hall & Baum, 1992; Baker & Kevorklan, 1995; Bleich, Gelkopt, Malemed & Solomon, 2006). Moreover, in one study of Israeli society, it was found that continued attacks and security problems were of a more-important problem than economic problems, which creates high levels of distress (Bleich, Gelkopt, Malemed & Solomon, 2006). Moreover, previous literature suggests females are more prone to security issues and threats than males (Bleich, Gelkopf, & Solomon, 2003; Bleich, Gelkopf, Melamed, & Solomon,

2006) and mothers have more health responses to terror (Baker & Kevorklan, 1995). Since the focus of this present study is mothers, terror stress presented in their interviews might be affecting their overall health.

Terror stress is also related to ***threat perception***, as most mothers in this study had perceived terror as a threat to their lives. Referring back to true alarms in fight-flight-freeze response mentioned by Zayfert and Backer (2007) or earlier issue on alertness for threats, people are also stressed when they cannot do anything related to their perceived threat. The unpredictable nature of terror events, created a risk perception in the mind of people living in terror inflicted societies (Grewal, 2006; Borrel, 2008; Klar, Zakay & Sharvit, 2002). Thinking one's being safe by chance, or risk of injury adds up to the possibility of traumatization (McFarlene, 2011). Thus, all other responses mentioned as insecurity, mistrust, trying to take measures might be related to this threat perception which was mentioned frequently both as an early and delayed response. Another link can also be drawn from threat perception to risk factor of proximity, and besides its unpredictability, terrorist attacks had happened in the places mothers perceived some kind of proximity, increasing their threat perception.

In terms of emotional responses, another prominent one was ***shock and confusion*** mentioned by many mothers. As Freedman (1983) claims confusion due to the sense of uncanny is one of the aims of terrorism. Moreover, shock and confusion is one of the early traumatic reactions traditionally mentioned by the literature (Mathewson, 2004). Moreover, this confusion, leaded people to seek information from the resources they may get. This behavioral response was parallel to what many studies on media-trauma link had found (Jain, 2010; Holman, Garfin & Cohen-Silver, 2014; Pfefferbaum et al, 2015). However, the need for correct, age-relevant, monitored information and images are what the people needed to fight back the chaos and the rumors (Mathewson, 2004; Kirshenhaum, 2006). Nevertheless, as it was presented in the data, most mothers had checked the media or social media which was ineffective in providing relevant information. Moreover, it had even played a role in the traumatization of both mothers and children, as it was in the literature.

Losing hope and thinking ***future might be bad***, was another common response also found in the literature. For instance, as mentioned before, Klar, Zakay and Sharvit

(2002) had found in the post-intifada period the Israelis had experienced a severe realism, where the optimistic biases like nothing would happen to them or things would be better in the future had all faded. In parallel, most mothers had reported that they had thought "what if the future becames worse", "what if these incidents became more salient," "what would I do if there would be war", "things would only be worse" and so on. Even though some mothers in this present study like JULIDE argued she tries to use hope as a coping mechanism, most of them are rather concerned than being optimistic.

Additionally, in terms of mother's responses, most mothers claimed they felt **sorrow, worry and terror** at the course of the events. The link between incidents and their social, political and cultural context had been argued as an important component (MacFarkane, 1995; Afuape, 2011). Moreover, Afuape (2011) claims what is traumatic in one culture may not be in others. However, since most mothers interviewed in this thesis reported the traditional responses of trauma like sorrow, worry and terror, it can be interpreted as the event was perceived as traumatic by almost all of the mothers and had affected them despite not having direct exposure.

As it was presented in the results, especially younger children ***mimic their parents' anxiety***. Most participants who experienced their children's emotional responses like crying and trembling revealed that the child's response was initiated by the mothers' anxiety. The mothers claimed in sentences like "since my child had realized I was panicked". Since emotional regulation of children is based on mothers (Frankel et al, 2012), this response was predictable. Moreover, it was in line with the previous research finding a link between mothers' and children's reactions and traumas (Loor, Wolmer & Cohen, 2001; Feldman & Vengrober, 2011). It may also be interpreted as such: Children would also need to read their environmental cues for a threat but their cognitive capacities might not enable them to perceive a threat as efficiently as the adults as proposed by Stamm and colleagues (2004). Therefore, their adults nearby, such as their parents, caregivers, teachers and mothers would be the main source of information in such cases. Therefore, younger children might sense the anxiety whereas the older ones might have more resources, like asking questions and searching from other resources like media.

In terms of age-based differences, the adolescents and preschoolars differed much in terms of their reactions to fulfil the need to learn what is happening. While both groups of children had asked questions, older children also used the media like adults, especially when they figured out the reality they observe and the explanation provided by the mother is not consistent. However, in terms of mothers' concerns age or sex of the child does not seem to be an indicator of higher or lower threat perception: Mothers indicate they are concerned about their children's physical and psychological well-being and the future, whether the child was younger or older. Even though the mothers of the young children argued the child might not be affected psychologically from the issues as they cannot understand the issues completely, they expressed concerns as they thought, may be the child is affected but cannot express it, or the child will eventually grow and understand it, as they cannot keep them isolated for long. Thus, it seems to be related to the mothers' pessimism that such events might continue in the future and might happen in any place, so that even though they monitor their younger child, they are concerned. It is especially evident with the unwillingness to send the male child to the military service, claiming if they would be given the opportunity, they would be going to have paid military service. With the older children, who are more autonomous, mothers are also concerned as even though they think the adolescents can understand the threat more, they might have fall victim of such incidents. In terms of gender, especially with the general concern of encounterment with evil people, some mothers claimed they are not safe as they have male child, because male children might also get kidnapped or raped.

As proposed, similar to their mothers, children also had another risk factor like hearing and seeing the event. In such situations, most children regardless of age engage in information seeking behavior, and if they are able to they ***ask questions to their parents***. Therefore, how one answers children's questions is important. Since older children and adolescents might understand something bad is happening, and younger children might feel the anxiety of their parents, answering their questions in great care is an important issue. For instance, Warria (2016) had revealed that the successful assistance of Kenyan mothers to their children for coping with terror-events included physical contact and answering the child's questions to create a sense of security. Even though the mothers in this present study, tried to ***comfort their children*** by saying they are safe and secure

and by providing physical contact; those might not be as effective as answering children's questions in a thoughtful way. Because, from the mothers' responses to their children's responses category, it was revealed that while answering to these questions some mothers lie or hesitate from providing any explanation to the child. Especially for the older children, this strategy might not work as the answers provided by the mother is not appropriate with the situation that the child is experiencing. For instance, in KÜBRA's case, saying the jets were doing a rehearsal show was rejected by adolescent child. The child had argued it was the Russian jets and mother was trying to protect them from feeling fear. In SAIME's case, presentation of bombings as fireworks did not provide the information that the adolescent child needed, leading the child to seek information from TV. Therefore, reframing the truth with lies like it was in the film "La vita e Bella" might have an innocent rationale to protect children, but might be ineffective especially with older children and adolescents for two reasons: (1) they may notice the inconsistency between mother's answers and her feelings/the situation itself and it may shake their trust to the parent. (2) They may understand that the lying aims to protect them but conclude the situation is so bad that the mother needed to lie. However, while providing the answers one needs to not to transmit his or her own anxieties and fears to the children. For instance, Cohen and Eid (2007) found that parent's sharing feelings with children added the distress levels of the adolescents.

Changing or keeping routines was another problem for the mothers: A majority of mothers realized the problem with changing the routines, even though they needed to take measures that could affect their social-life routines. Thus, they tried to keep the general scheme as same. It was in line with the literature, claiming children regardless of age are affected from the routine changes (Cohen & Eid, 2007; Herenczyk, Schiff & Doppelt, 2006; Warria, 2006; Erden & Gürdil, 2009). For instance restricting adolescents' daily routines like going out adds to their terror-distress (Cohen & Eid, 2007), keeping the routines or turning back if were changed for some time helps children to cope with this stress (Herenczyk, Schiff & Doppelt, 2006; Warria, 2006) However, most of the time, terror stress of parents' lead them to take measures, which might affect their and their families' daily lives as it was presented by the literature (Klar, Zakay & Sharvit, 2002; Borell, 2008). In that case, if a routine is changed due to a measure taken by parents and were not explained to the child, children might also feel anxious and

need to learn why the change had happened. In such situations, lying again might affect the trust between the parties, as mentioned above.

Last response of mothers' responses to children's responses was ***monitoring both the news and parent's own behaviors***. Some parents have always been skeptical to the news and had the notion of keeping some subjects out of child's presence, while others had experienced a situation in which they observed the child was affected from the news content. The latter reason for news monitoring, i.e. monitoring since the mothers had experienced the negative effects of news, is in line with what Philips, Prince & Schielbelhut (2004) had suggested. In their post-9/11 study, they had suggested that parent's monitoring of the TV news might be a reactionary decision of the parents observing the negative affects on their children. However, as it was also asked the mothers in this thesis, there were also the other group, who had always monitored the news and TV watching. In fact, most of these were the mothers of higher education, and who claimed they do not prefer to watch TV themselves either, except from the documentaries. About the news effect on children, there was another strategy proposed to mothers: discussing the news with their children to prevent them from what Comer calls second hand terrorism (Comer, 2004). Nevertheless, none had mentioned such an attempt in this present study. That might be related to the idea and concern of "talking makes problems even bigger". For instance, SILA had argued they had not talked to their children for that reason, and JANSET had questioned whether she should have discussed these with her child or not.

Mothers concerns were another important part of our discussion, as it was suggested by the literature terrorist attacks and terror stress lead people to have increased concerns about their children (Klar, Zakay & Sharvit, 2002). In this present thesis, it was found that most mothers were concerned about their ***children's psychological and physical well-being.*** This was parallel to the findings from previous studies presented in the literature. For instance, in the context of Beslan attacks in Russia it was found that primary caregivers were increasingly concerned about children's psychological and physical well-being (Moscardino et al, 2006). Dekel, in a recent study of the Israeli context, in her focus group of 11 mothers having children between ages 0-12 years, found that mothers were especially concerned about children's physical and emotional

protection (2014). This seems to be related to mothers' terror-risk and high threat perception. Other concerns about security was also observed in this present study and were coded as concern about losing a loved one and concern about ***dying and abandoning their children***. These concerns were given with statements like "What would happen to my child if I die…" was also presented in other studies of the literature: For instance, Dekel (2014) had also mentioned mothers had feared of what would happen to their children if they die. Since, two general concerns of mothers are ***inability to provide and protect children***, dying is an important stressor increasing its intensity. Moreover, such stress is so unbearable that some researchers found that mothers who were concerned about their children's well security were likely to use maladaptive coping systems like loosening control, such as overeating or smoking (Cwikel, Segal-Engelchin &Mendlinger, 2010). However, this was not the case in this present study, which might be related to different histories and contexts of urban terrorism in those countries: Israel had faced with urban terrorism and civil war since the start of Israeli-Arab conflict in 1920s, whereas for Turkish case, in Ankara and Istanbul, it only became salient in the last two decades. In other words, similar maladaptive coping strategies might be found in the south-eastern regions of Turkey, since terror history is longer due to the ethnic conflict and separatist terrorist groups like PKK.

On the other hand, mother's ***future related concerns*** seem to be related to the uncertainty and mistrust, while some mothers feared the possibility of a civil war, like the Syrian case. Even though proximity was an indicator for the behavioral responses, the idea that terror could be everywhere was a factor affecting all mothers. Thus, even those having children living outside the city center in a very isolated environment fear that it may happen to their children in the future as you may not know what would happen when.

The last prominent concern was also related to this mistrust as mothers feared from ***encounterment with evil people*** such as kidnappers, rapists, drug dealers and so forth. Even though it was not directly related to terror trauma for a majority of mothers, EMINE had drawn a line between terror and security issues, as claiming the drug-dealers are generally the terrorist groups. Moreover, the statement of "we keep hearing about such stuff" and referring to the TV or newspaper news can be interpreted as the

media-effect, and the saliency of such traumatic events. Since the political and social environment surrounding these people were of mistrust, fear and alertness; such news might have added to their threat perceptions.

Finally, ***mothers' coping*** is an important part of this research as it would help the mental health professionals to understand such terror-related trauma and stress better. This is especially important in the caregiving context. For instance, literature suggests children's and adolescents' stress is affected by their mothers coping (Agaibi & Wilson, 2005). Laor and colleagues (2001) argue mothers' poor coping skills may predict high traumatization in children. Cohen (2009) argues changing coping abilities are related to changing support to children, as parent's coping affect the support they provide to their children. Using the same mentality Comer et al (2008) had suggested mothers to increase their own coping skills with traumatic news, so that they protect their children from its adverse effects. The findings of this thesis were also parallel to the literature as the mothers who claimed to be calmer, and who were better in coping with the terror-threat indicated their children were less traumatized by the events in the following days, even if they were also distressed. This finding is also in line with the Bleich and colleagues (2003) argument that habituation and coping might prevent individuals from developing PTSD, even though they may still have distress and a loss in the sense of safety. Nevertheless, better coping skills are still important, as coping styles might affect the transition of trauma to disorder (McFarlene, 2011) and healing is related to better coping skills and support (Helbert, 2007).

In the literature, there are a number of different coping strategies mentioned, with regard to terrorist attacks. Most basic differentiation is done between problem-focused vs emotion focused coping strategies, which was also used in this study. For the problem focused coping styles, active coping, planning, seeking instrumental support, and for the emotional coping seeking emotional support, acceptance, denial, turning to religion, and maladaptive coping strategies like disengagement is mentioned (Carver et al, 1989). There are some studies mentioning a kind of gender differences for coping strategies, such as Vingerthoes and Van Heck (1990) had suggested males were more problem focused whereas women used more emotion focused strategies like self-blame, expression of emotions, emotional social support and wishful thinking. Similarly,

Blalock & Joiner (2000) had found increased avoidance coping in females with high adverse life events. However, contrasting results were found by Ben-Zur and Zeidner (1996), as the Israeli women had used a variety of coping styles, whereas men used mainly emotional coping during Gulf crisis. Another study suggesting Israeli adults had used a variety and combination of coping was Cohen-Louck and Ben David's (2007) study with 400 Israeli adults. Moreover, it was also suggested as different coping strategies might work for different cases (Kandel & Merrick, 2007). This present thesis had also suggested that mothers used a variety of coping strategies falling into groups of emotion focused and problem focused coping. However, in addition to the literature, as an answer to the direct question of how do you cope with these events, their answers differed when they answered it for their own stress-relief and for their concerns about children. Mainly, mothers re-mentioned about their measures taken as a coping mechanism regarding their children, such as protecting them physically and emotionally and empowering them. This might be interpreted as problem focused coping, and the reason might be mothers at least perceive such measures as all they can do, and work on those. However, when they were mentioning about their own stress either due to terror-risk, or when they make the point that measures might not be enough, they turned back to emotional coping, such as acceptance, distraction, spirituality, reframing, blaming, and hope (in the sense of wishful thinking). This finding is important as some mothers still can be considered as in risk group due to their maladaptive coping styles like avoidance, distraction, blaming and so forth. For instance, in the literature, coping by means of avoidance, denial, disengagement is a risk factor for PTSD (Gelkopf, 2011). Therefore, even if they try to engage in more active coping for their children, their own psychological well-being might be under danger. Moreover, as Cwikel and colleagues (2010) suggest mothers learn those coping skills from their own female caregivers, and especially mothers; it may create a vicious circle of learnt maladaptive copings for next generations, unless addressed carefully.

The last related concept should be ***post-traumatic growth and resilience***. In our interviews, only KARDELEN depicted a strong image of a resilient mother. However, this might be related to KARDELEN's own story. As mentioned in the interview, she was born and raised in the Eastern Anatolia, as Turkish patriot of a Kurdish origin and from an early age, she had dealt with terror, turned to spirituality, experienced childhood

terror-traumas like losing some relatives to terror and learnt problem focused coping from her parents. Therefore, her case might be what Bitton and Laufer (2017) suggested as traumatized mothers with increased problem focused coping might have higher post-traumatic growth. Additionally, her spirituality helped her to have a more positive view of death, thinking it was just crossing to another world to become even closer to Allah, which seems to have increased her resilience. Moreover, her being a divorced mother might have affected her as she had better mobilized social support system. She had mentioned having many friends and family members in Ankara, but only asking help from them if it was really necessary, which might be a good example of organizing the social resources. This was also parallel to what Kushnir (1994) had argued, as divorced mothers might be better off due to their ability to get better social support, due to previous difficulties they lived. Additionally, the other divorced mother NİMET had also organized her own social network of her mother and sister living with her and her reactions were not much different from other mothers.

Despite all the parallel findings in the literature, there are some new findings expressed through this thesis. First of all, the proximity of place was not presented in the traditional form of physical proximity, but having the sense of familiarity, and the increased possibility of visiting there from time to time also had created a somehow psychological proximity, that was not addressed much in the literature before. Similar to the previous study by Baker (2002), but contradicting the western literature, the survivor's guilt was interpreted only from one of the participants' statements, which can be related to cultural dimension of reactions to traumatic events. Thinking migration was a new one, that can be speculated to be related to the cultural brain drain concept since 2000s, as the political and economic climate is perceived to be worsening, the well-educated youth thinks about migration as a part of modern Turkish culture. Lastly, this study had contributed to the debate between emotion focussed vs problem focussed coping, claiming both are used by the mothers, in different circumstances, as they feel that they are able to take some measures, especially in relation to their children and protection of them they tend to use the problem focussed, whereas the emotion focussed is mainly used for relieving the psychological distressed, especially if they feel incapable.

Overall, this present thesis indicates that mothers have terror-threat perception and stress, which might turn to chronic stress affecting their physical and psychological well-being. These constant stress and anxiety responses need to be addressed by mental health professionals as they might transit from trauma to disorder in the future adversaries. Unfortunately, even though it was argued that the political stability is ensured by the government after the coup attempt in 2016; various news articles initiated rumours since September 2016 spread about another such disaster. Even though there had not been an urban terror attack for the last few months in Ankara and Istanbul, other cities especially the ones in Eastern and Southern Anatolia regions still have such news. Mothers while they were interviewed had still the tension that a new terrorist attack might happen in the city, since the memories of the tragedies since 2015 had not faded in their memories yet. Moreover, even though the mothers try to protect their children, they may engage in rather problematic behaviors like restricting and changing their routines, telling lies, presenting their anxieties to the children, which might affect the psychological well-being, coping and resilience of the children. Additionally, even though they have problem-focused coping for their children, they use emotional and sometimes maladaptive coping strategies. Therefore, both mothers' and children's psychology and physiology might be affected negatively, if they were not educated for more effective responses and coping skills. The following section would suggest a number of implications for these problems.

5.2. Implications

In terms of findings, what was presented so far aims to help mental health professionals, and counsellors to see what are the main issues related to the mothers living in a terror inflicted society. These problems, responses, concerns and copings might all come as different parts of presented problem for a psychological counsellor. Therefore, learning about those would help the psychological counsellors to understand better the mothers in the Turkish context and respond them better. Moreover, such problems might attract school psychologists' or counsellors' attention through their students or parents of their students. Besides individual cases, they might need to address the problem in terms of intervention and prevention, thus the following few implications would be suggested for the *guidance and psychological counsellor professionals*:

- As it was presented in this present thesis, Turkish mothers, and even the mothers in cities like Ankara and Istanbul which used to be considered as safe and big harbors, had experienced the traumatic incidents of urban terrorism. Therefore, in Turkey, the mental health professionals, including the counsellors do not have the luxury to ignore this fact. For that reason, there may be terror-stress workshops and educational programs for mental health workers, prepared by professionals and scholars and sponsored or organized by universities, ministries or professional associations. Therefore, each mental health professional and counsellor, including the ones who had graduated without proper education on the terror-stress and trauma areas should be educated, since they can come across to such cases.

- Vicarious traumatization is another concept that was not in the scope of this present thesis, however, since the mental health workers themselves might have terror stress and trauma; peer and professional supervision might be provided in specific periods, to increase the professionals own coping skills.

- Since the mental health professionals are not monitored by an official authority like a professional chamber; there might be various people speaking on mental health in the TVs and social media, without any knowledge on the field. Therefore, the professional associations of mental health professionals might work together to be the advocates for such cases and take actions to prevent such cases before they became widespread, informing the policy makers about the vulnerability of the subject.

- Mental health professionals might be organized for such crisis situations, in each cities and work for prevention programs and train the newcomers for interventions. Their prevention and intervention programs might use the findings from the field, including this present study.

- *For the universities*, curriculums of mental health departments should be revised in a way to include the terror-stress, trauma and coping literature. Since most of the time, graduates of four years programs without any special training on these issues might start working as psychologists, psychological

counsellors, school counsellors in various cities of Turkey; both in public and private sector; the curriculum issue is especially important. Because the younger professionals who have the expert power of a mental health professional might be visited by mothers or the children for educational and professional support.

- Schools might have prevention and intervention programs created by the professionals and scholars and presented to students, teachers and the families by the school psychologists and counsellors.

- Parents might be educated in terms of engaging in open communications with their children instead of using lies that could insult the children's intelligence and shake their trusts to the parents. However, since emotional regulation of children (especially the younger ones') might be affected from their mothers, mothers should be trained about engaging in open communication without conveying their own fears, concerns and anxieties to the children.

In addition to that, *policy makers are* important people in this case, that should share the burden in such incidents:

- Since it was presented mothers' sense of security is shaken by these events. Thus, the research and policy-making departments in various public institutions like Ministry of Interior, Ministry of Health, Ministry of Family and Social Policies and Undersecretariat of Public Order and Security should take measures for the psychological health part of these incidents. It is especially important for two reasons (1) Terror is a psychological warfare for political aims and it would be an effective one if it starts to damage the society (2) Public sector might be more effective than private sector for re-assuring the sense of security by using their legitimate power of monitoring many other sectors like news broadcasts, social networks, educational curriculums, public places and so on.

- These public institutions might fund or conduct research in this area; take role or initiate the preparation of prevention programmes.

- These institutions might take the psychological dimension of terror into their programs to take measures against it.
- The press releases of political authorities should have written in a way to provide correct and clear information immediately, be consistent with each other, re-create the sense of security by assuring the public for the measures taken. Besides its political nature, all parties should have the same "how the society should behave" part consistent with the literature, "focussing on the natural responses and effective coping strategies".
- These authorities might monitor the TV news for traumatic images, however, monitoring social networks are not that quite possible. Most of the time the measure taken is restricting entrance to social networks. However, as it was presented in this present study, information seeking is a common and understandable human response and most of the time it is the traditional or the social media. Therefore, instead of restricting resources of information; immediate, monitored, well-thought, age-relevant information and news; accompanied by how to diminish the incidents' affects especially for risk-groups should be presented as an alternative. For instance, a warning of "this content might not be appropriate for children" warning might help the mothers who were in shock from keeping their children with them.
- These authorities should educate their officers such as teachers, health professionals, security forces, media people and alike for problem focused coping styles, traumas, previous traumas, where they may reach out for professional help, how to deal with their stress and so forth.

Last implications are addressed to other researchers as there are some limitations of this present study:

- This present study had focused on mothers for their traditional role as the caregivers in Turkish society and prominence in the literature. However, there are other groups that affecting children like fathers, extended family members, babysitters, other caregivers and teachers that might be important

for a child in terms of transmitting the trauma. Therefore, in the future studies they might be addressed.

- As mentioned before, this study was about the mothers' perceptions, and did not focus much on sex or age based differences of the children, as well as other dimensions of mother-child relations such as attachment-style differences. However, in the future directions, a new focus on mother-child interaction, and child-related variables can be added to the research to gain a better understanding of what affects mothers' perceptions in relation to the characteristics of their children.

- Since some countries have contributed to the literature more, cross-cultural studies in collaboration to those universities might be done in Turkish universities. Therefore, how different cases were addressed in different settings might help the scholars to expend their knowledge on the subject.

- This study and many others from the international literature face the problem of a rather homogenous group in terms of educational level; since they cannot also reach to low education profile women. In this present study, as it was explained in the methodology section, many attempts to reach the low education, uneducated women profile were rejected. The main explanation provided by the women were their mistrust and fear, presented as a general fear from social research, or other evil people that might misuse the research. Such perception might be related to unfamiliarity with the nature and ethics of social research; or it might be a sign of more stress and mistrust, as the women even fear from sharing their thoughts, feelings and experiences. There might be a relation with their educational profile, making them a more risk prone group, but is not addressed scientifically since they were not reached out.

- Lastly, this study was conducted with mothers living in urban Ankara and Istanbul, however a research on how spread or intense terror-threat is in other regions and cities might be another important future direction, that can be used in the prevention plans. As it was presented in the case of

KARDELEN, the people who had previous experience with terror or with different versions of terror incidents might have different resilience levels, concerns and copings. Since the threat of the terrorist groups might also change from region to region, concerns and responses might be different. Therefore, other versions should address these differences.

All in all, this present thesis aimed to understand the responses, concerns and coping of mothers in relation to terrorist attacks in Turkey. It is hoped that the findings and the implications might help the professionals, scholars and the policy-makers to assist mothers to cope with the psychological warfare of the terror, cope with the constant stress that might be affecting their health and assist them in protecting and empowering their children, which they already try to do.

REFERENCES

Abel, R. M., & Friedman, H. A. (2009). Israeli school and community response to war trauma: A review of selected literature. *School Psychology International, 30*(3), 265-281. doi:10.1177/01430343091064 93

Abo, A., & Zalsman, G. (2003). Terrorism and the adolescent: A review. *International Journal of Adolescent Medicine and Health, 15*(3), 201-206. doi:10.1515/ijamh.2003.15.3.201

Abu-Ras, W., & Abu-Bader, S. H. (2008). The impact of the September 11, 2001, attacks on the well-being of Arab Americans in New York City. *Journal of Muslim Mental Health, 3*(2), 217-239. doi:10.1080/15564900802487634

Agaibi, C. E., & Wilson, J. P. (2005). Trauma, PTSD, and resilience a review of the literature. Trauma, Violence, & Abuse, 6(3), 195-216. doi:10.1177/1524838005277438

Ahern, J., Galea, S., Resnick, H., & Vlahov, D. (2005). Television watching and mental health in the general population of New York City after September 11. Journal of Aggression, Maltreatment & Trauma, 9(1-2), 109-124. doi:10.1300/j146v09n01_14

Ai, A. L., Cascio, T., Santangelo, L. K., & Evans-Campbell, T. (2005). Hope, meaning, and growth following the September 11, 2001, terrorist attacks. Journal of Interpersonal Violence, 20(5), 523-548. doi:10.1177/0886260504272896

Al-Krenawi, A., Graham, J. R., & Sehwail, M. A. (2004). Mental health and violence/trauma in Palestine: Implications for helping professional practice. Journal of Comparative Family Studies, 35(2), 185-209. Retrieved from http://www.jstor.org/stable/41603932

Alexander, J. C., & Dromi, S. (2011). Trauma construction and moral restriction: The ambiguity of the holocaust for Israel. In R. Eyerman, J.C. Alexander, & E. Butler-Breese (Eds.), Narrating Trauma: On the Impact of Collective Suffering, (pp.107-132.) New York, NY: Routledge.

Alisic, E., Boeije, H. R., Jongmans, M. J., & Kleber, R. J. (2012). Supporting children after single-incident trauma parents' views. Clinical Pediatrics, 51(3), 274-282. doi:10.1177/0009922811423309

Almqvist, K., & Broberg, A. G. (2003). Young children traumatized by organized violence together with their mothers–The critical effects of damaged internal representations. Attachment & Human Development, 5(4), 367-380. doi:10.1080/14616730310001633447

Alpert, J. L., & Smith, H. D. (2003). The consultant's corner: Terrorism, terrorism threat, and the school consultant. Journal of Educational and Psychological Consultation, 14(3), 369-385.doi:10.1207/s1532768xjepc143&4_9

Aly, A. (2010). A Study of Audience Responses to the Media Discourse about the 'Other': The Fear of Terrorism between Australian Muslims and the Broader Community. London: Edwin Mellen Press.

Aly, A., & Green, L. (2010). Fear, anxiety and the state of terror. Studies in Conflict & Terrorism, 33(3), 268-281. doi:10.1080/10576100903555796

Aly, A., & Balnaves, M. (2005). The atmosfear of terror: Affective modulation and the war on terror. M/C Journal, 8(6). Retrieved from http://journal.media-culture.org.au/0512/04-alybalnaves.php

Arikan, G. (2007). Prevalence of traumatic events and determinants of posttraumatic growth in university students. (Unpublished master's thesis), Middle East Technical University, Ankara, Turkey.

Awan, M. S. (2010). Global terror and the rise of xenophobia/Islamophobia: An analysis of American cultural production since September 11. Islamic Studies, 521-537.Retrieved from http://www.jstor.org/stable/41581122

Baca, E., Baca-Garcia, E., Perez-Rodriguez, M. M., & Cabanas, M. L. (2005). Short and long-term effects of terrorist attacks in Spain. Journal of Aggression, Maltreatment & Trauma, 9(1-2), 157-170. doi:10.1300/j146v09n01_18

Baelo-Allué, S. (2012). 9/11 and the psychic trauma novel: Don DeLillo's "Falling Man". Journal of the Spanish Association of Anglo-American Studies, 34(2102), 63-79. Retrieved from http://www.jstor.org/stable/43486021

Baker, A. M., & Kevorkian, N. S. (1995). Differential effects of trauma on spouses of traumatized households. Journal of Traumatic Stress, 8(1), 61-74. doi:10.1007/bf02105407

Bar-Tal, D., & Jacobson, D. (1998). A psychological perspective on security. Applied Psychology, 47(1), 59-71. doi:10.1111/j.1464-0597.1998.tb00013.x

Barber, B. K., & Thomas, D. L. (1986). Dimensions of fathers' and mothers' supportive behavior: The case for physical affection. Journal of Marriage and the Family, 48(4), 783-794.

Barber, B. K. (1996). Parental psychological control: Revisiting a neglected construct. Child Development, 67(6), 3296-3319.

Barber, B. K. (1999). Political violence, family relations, and Palestinian youth functioning. Journal of Adolescent Research, 14(2), 206-230.

Barber, B. K. (2001). Political violence, social integration, and youth functioning: Palestinian youth from the Intifada. Journal of Community Psychology, 29(3), 259-280. doi: 10.1002/jcop.1017

Barber, B. K., Maughan, S. L., & Olsen, J. A. (2005). Patterns of parenting across adolescence. New directions for child and adolescent development, 2005(108), 5-16.

Barber, B. K. (2008). Contrasting portraits of war: Youths' varied experiences with political violence in Bosnia and Palestine. International Journal of Behavioral Development, 32(4), 298-309. doi: 10.1177/0165025408090972

Bassuk, E. L., Konnath, K., & Volk, K. T. (2006). Understanding Traumatic Stress in Children. National Center on Family Homelessness (NJ1). Retrieved from https://eric.ed.gov/?id=ED535527

Bates, J. E., & Bayles, K. (1984). Objective and subjective components in mothers' perceptions of their children from age 6 months to 3 years. Merrill-Palmer Quarterly 30 (2), 111-130. Retrieved from http://www.jstor.org/stable/23086228

Becker-Blease, K. A., Finkelhor, D., & Turner, H. (2008). Media exposure predicts children's reactions to crime and terrorism. Journal of Trauma & Dissociation, 9(2), 225-248. doi:10.1080/15299730802048652

Ben-David, S., & Cohen-Louck, K. (2010). Fear of terrorism: Coping paradox and gender. In W. Benedek, C. Daase, V. Dimitrijevic & P. van Duyne (Eds.), Transnational Terrorism, Organized Crime and Peace-Building (pp.66-80). UK: Palgrave Macmillan

Ben-Zur, H., & Zeidner, M. (1996). Gender differences in coping reactions under community crisis and daily routine conditions. Personality and Individual Differences, 20(3), 331-340. doi:10.1016/0191-8869(95)00173-5

Ben–Zur, H., Gil, S., & Shamshins, Y. (2012). The relationship between exposure to terror through the media, coping strategies and resources, and distress and secondary traumatization. International Journal of Stress Management, 19(2), 132-150. doi:10.1037/a0027864

Berk, J. H. (1998). Trauma and resilience during war: A look at the children and humanitarian aid workers of Bosnia. Psychoanalytic Review, 85(4), 640-658

Billings, A. G., & Moos, R. H. (1981). The role of coping responses and social resources in attenuating the stress of life events. Journal of Behavioral Medicine, 4(2), 139-157. doi:10.1007/bf00844267

Bitton, M., & Laufer, A. (2017). PTSD and PTG among Israeli mothers: Opposite facets of exposure to terrorism. Stress and Health. doi:10.1002/smi.2754

Blalock, J. A., & Joiner, T. E. (2000). Interaction of cognitive avoidance coping and stress in predicting depression/anxiety. Cognitive Therapy and Research, 24(1), 47-65. doi:10.1023/A:1005450908245

Bleich, A., Gelkopf, M., & Solomon, Z. (2003). Exposure to terrorism, stress-related mental health symptoms, and coping behaviors among a nationally representative sample in Israel. Jama, 290(5), 612-620. doi:10.1001/jama.290.5.612

Bleich, A., Gelkopf, M., Melamed, Y., & Solomon, Z. (2006). Mental health and resiliency following 44 months of terrorism: A survey of an Israeli national representative sample. BMC Medicine, 4(1), 21. doi:10.1186/1741-7015-4-21

Bonanno, G. A., Galea, S., Bucciarelli, A., & Vlahov, D. (2006). Psychological resilience after disaster: New York city in the aftermath of the September 11th Terrorist Attack. Psychological Science, 17(3), 181-186. doi:10.1111/j.1467-9280.2006.01682.x

Borell, K. (2008). Terrorism and everyday life in Beirut 2005 mental eeconstructions, precautions and normalization. Acta Sociologica, 51(1), 55-70. doi:10.1177/0001699307086818

Braun-Lewensohn, O., Sagy, S., & Roth, G. (2011). Coping strategies among adolescents: Israeli Jews and Arabs facing missile attacks. Anxiety, Stress & Coping, 23(1), 35-51. doi:10.1080/10615800802647601

Brody, D., & Baum, N. L. (2007). Israeli kindergarten teachers cope with terror and war: Two implicit models of resilience. Curriculum Inquiry, 37(1), 9-31. doi:10.1111/j.1467-873x.2007.00379.x

Brookmeyer, K. A., Henrich, C. C., Cohen, G., & Shahar, G. (2011). Israeli adolescents exposed to community and terror violence: The protective role of social support. The Journal of Early Adolescence, 31(4), 577-603. doi:10.1177/0272431610366247

Brow, M., & Silver, R. C. (2009). Coping with a collective trauma: Psychological reactions to 9/11 across the United States. In M. J. Morgan (Ed.) The Impact of 9/11 on Psychology and Education. (pp. 37-47). New York: Palgrave Macmillan US.

Butler, L. D., Blasey, C. M., Garlan, R. W., McCaslin, S. E., Azarow, J., Chen, X. H., Desjardins, J.C., DiMiceli, S., Seagraves, D. A., Hastings, T. A., Kraemer, H. C., & Spiegel, D. (2005). Posttraumatic growth following the terrorist attacks of September 11, 2001: Cognitive, coping, and trauma symptom predictors in an internet convenience sample. Traumatology, 11(4), 247-267. doi:10.1528/trau.2005.11.4.247

Butler, L. D., Koopman, C., Azarow, J., Blasey, C. M., Magdalene, J. C., DiMiceli, S., ... & Kraemer, H. C. (2009). Psychosocial predictors of resilience after the September 11, 2001 terrorist attacks. The Journal of Nervous and Mental Disease, 197(4), 266-273. doi:10.1097/nmd.0b013e31819d9334

Cantor, C. (2005). Evolution and posttraumatic stress: disorders of vigilance and defence. London: Routledge

.

Carver, C. S., Scheier, M. F., & Weintraub, J. K. (1989). Assessing coping strategies: A theoretically based approach. Journal of Personality and Social Psychology, 56(2), 267-283. doi:10.1037//0022-3514.56.2.267

Chaaya, M. M., Bogner, H. R., Gallo, J. J., & Leaf, P. J. (2003). The association of gynecological symptoms with psychological distress in women of reproductive age: A survey from gynecology clinics in Beirut, Lebanon. Journal of Psychosomatic Obstetrics & Gynecology, 24(3), 175-184. doi:10.3109/01674820309039671

Chrisman, A. K., & Dougherty, J. G. (2014). Mass trauma: Disasters, terrorism, and war. Child and Adolescent Psychiatric Clinics of North America, 23(2), 257-279. doi:10.1016/j.chc.2013.12.004

Clements, P. T. (2001). Terrorism in America: How do we tell the children?. Journal of Psychosocial Nursing and Mental Health Services, 39(11), 8-9. doi:10.3928/0279-3695-20011101-03

Coates, S., & Schechter, D. (2004). Preschoolers' traumatic stress post-9/11: relational and developmental perspectives. Psychiatric Clinics of North America, 27(3), 473-489. doi:10.1016/j.psc.2004.03.006

Cohen, E. (2009). Playing with fire. In R. Pat-Horenczyk, D. Brom & J. M. Vogel (Eds.) Helping Children Cope with Trauma: Individual, Family and Community Perspectives,(pp. 101-116). London: Routledge

Cohen, M., & Eid, J. (2007). The effect of constant threat of terror on Israeli Jewish and Arab adolescents. Anxiety, Stress, and Coping, 20(1), 47-60. doi:10.1080/10615800601167546

Cohen-Louck, K., & Ben-David, S. (2017). Coping with terrorism: Coping types and effectiveness. International Journal of Stress Management, 24(1), 1-17. doi:10.1037/str0000016

Cohen-Louck, K. (2016). Perception of the threat of terrorism. Journal of Interpersonal Violence. doi:10.1177/0886260516646091

Cohen-Silver, R., Holman, E. A., Andersen, J. P., Poulin, M., McIntosh, D. N., & Gil-Rivas, V. (2013). Mental-and physical-health effects of acute exposure to media images of the September 11, 2001, attacks and the Iraq war. Psychological Science, 24(9), 1623-1634. doi:10.1177/0956797612460406

Comer, J. S., Furr, J. M., Beidas, R. S., Weiner, C. L., & Kendall, P. C. (2008). Children and terrorism-related news: Training parents in coping and media literacy. Journal of Consulting and Clinical Psychology, 76(4), 568-578. doi:10.1037/0022-006x.76.4.568

Cwikel, J., & Segal-Engelchin, D. (2005). Implications of ethnic group origin for Israeli women's mental health. Journal of Immigrant Health, 7(3), 133-143. doi:10.1007/s10903-005-3670-0

Cwikel, J. G., Havenaar, J. M., & Bromet, E. J. (2002). Understanding the psychological and societal response of individuals, groups, authorities, and media to toxic hazards. In J. M. Havenaar, J. G. Cwikel, & E. J. Bromet (Eds.), Toxic turmoil: Psychological and societal consequences of ecological disasters (pp. 39–65). New York: Kluwer Academic/Plenum Press.

Cwikel, J., Segal-Engelchin, D., & Mendlinger, S. (2010). Mothers' coping styles during times of chronic security stress: Effect on health status. Health Care for Women International, 31(2), 131-152. doi:10.1080/07399330903141245

Danieli, Y., Brom, D., & Sills, J. (2005). The trauma of terrorism: Sharing knowledge and shared care, an international handbook. New York, NY: Routledge.

Dass-Brailsford, P. (2008). After the storm: Recognition, recovery, and reconstruction. Professional Psychology: Research and Practice, 39(1), 24-30. doi:10.1037/0735-7028.39.1.24

Dekel, R. (2004). Motherhood in a time of terror: Subjective experiences and responses of Israeli mothers. Affilia, 19(1), 24-38. doi:10.1177/0886109903260798

Dekel, R. (2010). Mental health practitioners' experiences during the shared trauma of the forced relocation from Gush Katif. Clinical Social Work Journal, 38(4), 388-396. doi:10.1007/s10615-009-0258-5

Dekel, R. (2017). My personal and professional trauma resilience truisms. Traumatology, 23(1), 10-17. doi:10.1037/trm0000106

DeVoe, E. R., Klein, T. P., Bannon Jr, W., & Miranda-Julian, C. (2011). Young children in the aftermath of the World Trade Center attacks. Psychological Trauma: Theory, Research, Practice, and Policy, 3(1), 1-7. doi:10.1037/a0020567

DiGrande, L., Perrin, M. A., Thorpe, L. E., Thalji, L., Murphy, J., Wu, D., ... & Brackbill, R. M. (2008). Posttraumatic stress symptoms, PTSD, and risk factors among lower Manhattan residents 2–3 years after the September 11, 2001 terrorist attacks. Journal of Traumatic Stress, 21(3), 264-273. doi:10.1002/jts.20345

Disasters. (2017). Retrieved from http://www.apa.org/topics/disasters/

Doka, K. J. (2003). What makes a tragedy Public?. In M. Lattanzi-Licht & K. J. Doka (Eds.), Living with grief: Coping with public tragedy, (pp.1-53), Washington, DC: Hospice Foundation of America.

Dynes, R. R. (2003). Finding order in disorder: Continuities in the 9/11 response. International Journal of Mass Emergencies and Disasters, 21(3), 9-23.

Elbert, T., Schauer, M., Schauer, E., Huschka, B., Hirth, M., & Neuner, F. (2009). Trauma-related impairment in children—A survey in Sri Lankan provinces affected by armed conflict. Child Abuse & Neglect, 33(4), 238-246. doi:10.1016/j.chiabu.2008.02.008

Erden, G., & Gürdil, G. (2009). Savaş yaşantılarının ardından çocuk ve ergenlerde gözlenen travma tepkileri ve psiko-sosyal yardım önerileri. Türk Psikoloji Yazıları, 12(24), 1-13.

Erdur, O. (2002). Psychological reactions of Turkish earthquake survivors (Doctoral dissertation).The University of Texas at Austin, Texas, USA. Retrieved from https://repositories.lib.utexas.edu/bitstream/handle/2152/562/erduro026.pdf%3Bjsessionid%3D045DDF15CDC59BCC5C8C920BB9616268?sequence%3D2

Erdur-Baker, Ö. (2007). Psikolojik danışma ve kültürel faktörler. Türk Psikolojik Danışma ve Rehberlik Dergisi, 3(27), 109-122.

Eriksson, M. (2016). Managing collective trauma on social media: the role of Twitter after the 2011 Norway attacks. Media, Culture & Society, 38(3), 365-380. doi:10.1177/0163443715608259

Eşsizoğlu, A., Yaşan, A., Bülbül, İ., Önal, S., Yıldırım, E. A., & Aker, T. (2009). Bir terörist saldırı sonrasında travma sonrası stres bozukluğu gelişimini etkileyen risk faktörleri. Turk Psikiyatri Dergisi, 20(2), 118-126.

Even-Chen, M. S., & Itzhaky, H. (2006). Exposure to terrorism and violent behavior among adolescents in Israel. Journal of Community Psychology, 35(1), 43-55. doi:10.1002/jcop.20133

Fairbank, J. A., Friedman, M. J., de Jong, J., Green, B. L., & Solomon, S. D. (2004). Intervention options for societies, communities, families, and individuals. In B.L. Green, M.J. Friedman, J.T.V.M. de Jong, S.D. Solomon, T. M. Keane, J.A. Fairbank, B. Donelan & E.Frey-Wouters (Eds.). Trauma Interventions in War and Peace: Prevention, Practice and Policy (pp. 57-72). New York: Kluwer Academic Publishers

Fairbrother, G., Stuber, J., Galea, S., Fleischman, A. R., & Pfefferbaum, B. (2003). Posttraumatic stress reactions in New York City children after the September 11, 2001, terrorist attacks. Ambulatory Pediatrics, 3(6), 304-311. doi:10.1367/1539-4409(2003)003<0304:psriny>2.0.co;2

Feigenson, N., Bailis, D., & Klein, W. (2004). Perceptions of terrorism and disease risks: A cross-national comparison. Mo. L. Rev., 69, 991-1012.

Feldman, R., & Vengrober, A. (2011). Posttraumatic stress disorder in infants and young children exposed to war-related trauma. Journal of the American Academy of Child & Adolescent Psychiatry, 50(7), 645-658. doi:10.1016/j.jaac.2011.03.001

Ferrara, P., Corsello, G., Ianniello, F., Sbordone, A., Ehrich, J., & Pettoello-Mantovani, M. (2016). Impact of distressing media imagery on children. The Journal of Pediatrics, 174, 285-286. doi:10.1016/j.jpeds.2016.03.075

Foa, E. B., Cahill, S. P., Boscarino, J. A., Hobfoll, S. E., Lahad, M., McNally, R. J., & Solomon, Z. (2005). Social, psychological, and psychiatric interventions following terrorist attacks: Recommendations for practice and research. Neuropsychopharmacology, 30(10), 1806-1817. doi:10.1038/sj.npp.1300815

Ford, J. D., & Courtois, C. A. (2013). Treating complex traumatic stress disorders in children and adolescents: Scientific foundations and therapeutic models. New Yokr, NY: Guilford Press.

Frankel, L. A., Hughes, S. O., O'Connor, T. M., Power, T. G., Fisher, J. O., & Hazen, N. L. (2012). Parental influences on children's self-regulation of energy intake: Insights from developmental literature on emotion regulation. Journal of Obesity, 2012, 1-12. doi:10.1155/2012/327259

Fredrickson, B. L., Tugade, M. M., Waugh, C. E., & Larkin, G. R. (2003). What good are positive emotions in crisis? A prospective study of resilience and emotions following the terrorist attacks on the United States on September 11th, 2001. Journal of Personality and Social Psychology, 84(2), 365-376. doi:10.1037//0022-3514.84.2.365

Freedman, L. Z. (1983). Why does terrorism terrorize?. Studies in Conflict & Terrorism, 6(3), 389-401. doi:10.1080/10576108308435539

Fremont, W. P., Pataki, C., & Beresin, E. V. (2005). The impact of terrorism on children and adolescents: terror in the skies, terror on television. Child and Adolescent Psychiatric Clinics of North America, 14(3), 429-451. doi:10.1016/j.chc.2005.02.001

Galea, S., Resnick, H., Ahern, M. J., Gold, J., Bucuvalas, M., Kilpatrick, D., ... & Vlahov, D. (2002). Posttraumatic stress disorder in Manhattan, New York City, after the September 11th terrorist attacks. Journal of Urban Health, 79(3), 340-353. doi:10.1093/jurban/79.3.340

Gelkopf, M., Berger, R., Bleich, A., & Silver, R. C. (2012). Protective factors and predictors of vulnerability to chronic stress: A comparative study of 4 communities after 7 years of continuous rocket fire. Social Science & Medicine, 74(5), 757-766. doi:10.1016/j.socscimed.2011.10.022

Gelkopf, M. Solomon, Z & Bleich, A. (2013). A longitudinal study of changes in psychological responses to continuous terrorism. The Israel Journal of Psychiatry and Related Sciences, 50(2), 100-109.

Giacaman, R., Shannon, H. S., Saab, H., Arya, N., & Boyce, W. (2007). Individual and collective exposure to political violence: Palestinian adolescents coping with conflict. The European Journal of Public Health, 17(4), 361-368. doi:10.1093/eurpub/ckl260

Gil-Rivas, V., & Kilmer, R. P. (2013). Children's adjustment following Hurricane Katrina: the role of primary caregivers. American Journal of Orthopsychiatry, 83(23), 413-421. doi:10.1111/ajop.12016

Glover, L., Novakovic, A., & Hunter, M. S. (2002). An exploration of the nature and causes of distress in women attending gynecology outpatient clinics. Journal of Psychosomatic Obstetrics and Gynaecology, 23(4), 237–248. doi:10.3109/01674820209074678

Goodman, R. D. (2013). The transgenerational trauma and resilience genogram. Counselling Psychology Quarterly, 26(3-4), 386-405. doi:10.1080/09515070.2013.820172

Gortner, E. M., & Pennebaker, J. W. (2003). The archival anatomy of a disaster: Media coverage and community-wide health effects of the Texas A&M bonfire tragedy. Journal of Social and Clinical Psychology, 22(5), 580-603. doi:10.1521/jscp.22.5.580.22923

Grewal, I. (2006). " Security Moms" in the early twentieth-century United States: The gender of security in neoliberalism. Women's Studies Quarterly, 34(1/2), 25-39. Retrieved from http://www.jstor.org/stable/40004729

Hafstad, G. S., Haavind, H., & Jensen, T. K. (2012). Parenting after a natural disaster: a qualitative study of Norwegian families surviving the 2004 Tsunami in Southeast Asia. Journal of Child and Family Studies, 21(2), 293-302. doi:10.1007/s10826-011-9474-z

Hamblen, J. (2002). Terrorist attacks and children. National Center for Posttraumatic Stress Disorder. Retrieved from http://209-197-41-56.unassigned.ntelos.net/images/stories/library/Stennett_Psychology_Articles/Terrorist%20Attacks%20%20Children.pdf

Henry, D. B., Tolan, P. H., & Gorman-Smith, D. (2004). Have there been lasting effects associated with the September 11, 2001, terrorist attacks among inner-city parents and children?. Professional Psychology: Research and Practice, 35(5), 542-547. doi:10.1037/0735-7028.35.5.542

Herbert, C. (2002). Understanding Your Reactions to Trauma: A Guide for Survivors of Trauma and Their Families. Oxon: Blue Stallion Publications.

Hobfoll, S. E., Watson, P., Bell, C. C., Bryant, R. A., Brymer, M. J., Friedman, M. J., ... & Maguen, S. (2007). Five essential elements of immediate and mid–term mass trauma intervention: empirical evidence. Psychiatry, 70(4), 283-315. doi:10.1521/psyc.2007.70.4.283

Hobfoll, S. E., Tracy, M., & Galea, S. (2006). The impact of resource loss and traumatic growth on probable PTSD and depression following terrorist attacks. Journal of Traumatic Stress, 19(6), 867-878. doi:10.1002/jts.20166

Holman, E. A., Garfin, D. R., & Silver, R. C. (2014). Media's role in broadcasting acute stress following the Boston Marathon bombings. Proceedings of the National Academy of Sciences, 111(1), 93-98. doi:10.1073/pnas.1316265110

Horenczyk, R., Schiff, M., & Doppelt, O. (2006). Maintaining routine despite ongoing exposure to terrorism: A healthy strategy for adolescents?. Journal of Adolescent Health, 39(2), 199-205. doi:10.1016/j.jadohealth.2005.11.021

Itzhaky, H., & Dekel, R. (2006). Community intervention with Jewish Israeli mothers in times of terror. British Journal of Social Work, 38(3), 462-475. doi:10.1093/bjsw/bcl368

Jain, D. (2010). Listening to Voices on Terror: Some Learnings from the Virtual World. Violence and Conflict Resolution: Contemporary Perspectives, 187-200.

Janoff-Bulman, R., & Sheikh, S. (2006). From national trauma to moralizing nation. Basic and Applied Social Psychology, 28(4), 325-332. doi:10.1207/s15324834basp2804_5

Jehel, L., & Brunet, A. (2004). The long-term effects of terrorism in France. Journal of Aggression, Maltreatment & Trauma, 9(1-2), 193-200. doi:10.1300/j146v09n01_23

Jensen, P. S., & Shaw, J. (1993). Children as victims of war: current knowledge and future research needs. Journal of the American Academy of Child & Adolescent Psychiatry, 32(4), 697-708. doi:10.1097/00004583-199307000-00001

Jordan, K. (2003). A trauma and recovery model for victims and their families after a catastrophic school shooting: Focusing on behavioral, cognitive, and psychological effects and needs. Brief Treatment and Crisis Intervention, 3(4), 397-411. doi:10.1093/brief-treatment/mhg031

Kaitz, M., Levy, M., Ebstein, R., Faraone, S. V., & Mankuta, D. (2009). The intergenerational effects of trauma from terror: A real possibility. Infant Mental Health Journal, 30(2), 158-179. doi:10.1002/imhj.20209

Kaitz, M. (2011). The strength of relationships in the face of trauma from terror. Journal of Infant, Child, and Adolescent Psychotherapy, 10(2-3), 379-386. doi:10.1080/15289168.2011.600216

Kandel, I., & Merrick, J. (2007). The child with a disability: parental acceptance, management and coping. The Scientific World Journal, 7, 1799-1809. doi:10.1100/tsw.2007.265

Kandemir, N. (2011). Tv news induced fears of children based on the reports of children and their mothers. (Unpublished master's thesis). Middle East Technical University. Ankara, Turkey.

Katz, J. E., & Rice, R. E. (2002). The telephone as a medium of faith, hope, terror, and redemption: America, September 11. Prometheus, 20(3), 247-253. doi:10.1080/08109020210144882

Kerns, C. E., Elkins, R. M., Carpenter, A. L., Chou, T., Green, J. G., & Comer, J. S. (2014). Caregiver distress, shared traumatic exposure, and child adjustment among area youth following the 2013 Boston Marathon bombing. Journal of Affective Disorders, 167, 50-55. doi:10.1016/j.jad.2014.05.040

Khaled, N. (2004). Psychological effects of terrorist attacks in Algeria. Journal of Aggression, Maltreatment & Trauma, 9(1-2), 201-212. doi:10.1300/j146v09n01_24

Kılıç, C., Kılıç, E. Z., & Aydın, I. O. (2011). Effect of relocation and parental psychopathology on earthquake survivor-children's mental health. The Journal of Nervous and Mental Disease, 199(5), 335-341. doi:10.1097/nmd.0b013e3182174ffa

Kimhi, S., & Shamai, M. (2006). Are women at higher risk than men? Gender differences among teenagers and adults in their response to threat of war and terror. Women & Health, 43(3), 1-19. doi:10.1300/j013v43n03_01

Kinsel, J. D., & Thomasgard, M. (2008). In their own words: The 9/11 disaster child care providers. Families, Systems, & Health, 26(1), 44-57. doi:10.1037/1091-7527.26.1.44

Kirschenbaum, A. (2006). Terror, adaptation and preparedness: a trilogy for survival. Journal of Homeland Security and Emergency Management, 3(1), 1-33. doi:10.2202/1547-7355.1178

Klar, Y., Zakay, D., & Sharvit, K. (2002). 'If I don't get blown up...': realism in face of terrorism in an Israeli nationwide sample. Risk, Decision and Policy, 7(02), 203-219. doi:10.1017/s1357530902000625

Kushnir, T. (1994). Emotional reactions and coping activities of divorced and married mothers in Israel during the Gulf War. Journal of Divorce & Remarriage, 21(1-2), 1-20. doi:10.1300/j087v21n01_01

Laor, N., Wolmer, L., & Cohen, D. J. (2001). Mothers' functioning and children's symptoms 5 years after a SCUD missile attack. American Journal of Psychiatry, 158(7), 1020-1026. doi:10.1176/appi.ajp.158.7.1020

Laugharne, J., Janca, A., & Widiger, T. (2007). Posttraumatic stress disorder and terrorism: 5 years after 9/11. Current Opinion in Psychiatry, 20(1), 36-41. doi:10.1097/yco.0b013e328010dc2c

Lee, A., Isaac, M., & Janca, A. (2002). Post-traumatic stress disorder and terrorism. Current Opinion in Psychiatry, 15(6), 633-637. doi:10.1097/00001504-200211000-00013

Linley, P. A., Joseph, S., Cooper, R., Harris, S., & Meyer, C. (2003). Positive and negative changes following vicarious exposure to the September 11 terrorist attacks. Journal of Traumatic Stress, 16(5), 481-485. doi:10.1023/a:1025710528209

Lykes, M. B. (1994). Terror, silencing and children: International, multidisciplinary collaboration with Guatemalan Maya communities. Social Science & Medicine, 38(4), 543-552. doi:10.1016/0277-9536(94)90250-x

Lyons, W. (2002). Partnerships, information and public safety: Community policing in a time of terror. Policing: An International Journal of Police Strategies & Management, 25(3), 530-542. doi:10.1108/13639510210437023

Malekoff, A. (2008). Transforming trauma and empowering children and adolescents in the aftermath of disaster through group work. Social Work with Groups, 31(1), 29-52. doi:10.1300/j009v31n01_04

Masten, A. S., & Narayan, A. J. (2012). Child development in the context of disaster, war, and terrorism: Pathways of risk and resilience. Annual Review of Psychology, 63(1), 227-257. doi:10.1146/annurev-psych-120710-100356

Masten, A. S. (2015). Ordinary magic: Resilience in development. New York, NY: Guilford Publications.

Mathewson, J. J. (2004). The psychological impact of terrorist attacks: Lessons learned for future threats. The Homeland Security Papers: Stemming The Tide of Terror, 191-217.

McFarlane, A. C. (1995). The severity of the trauma. In R. J. Kleber, C. R. Figley & B. P. R. Gersons (Eds.) Beyond trauma (pp. 31-54). New York: Springer US

McIntosh, D. N., Poulin, M. J., Silver, R. C., & Holman, E. A. (2011). The distinct roles of spirituality and religiosity in physical and mental health after collective trauma: a national longitudinal study of responses to the 9/11 attacks. Journal of Behavioral Medicine, 34(6), 497-507. doi:10.1007/s10865-011-9331-y

Measham, T., & Rousseau, C. (2010). Family disclosure of war trauma to children. Traumatology, 16(4), 85-96. doi:10.1177/1534765610395664

Meisenhelder, J. B., & Cassem, E. H. (2009). Terrorism, posttraumatic stress, spiritual coping, and mental health. Journal of Spirituality in Mental Health, 11(3), 218-230. doi:10.1080/19349630903081275

Mian, A. I. (2016). 3.2 Terrorism in Pakistan and its impact on children's mental health. Journal of the American Academy of Child & Adolescent Psychiatry, 55(10). doi:10.1016/j.jaac.2016.07.450

Moscardino, U., Scrimin, S., Capello, F., & Altoè, G. (2011). Are Beslan's children learning to cope? A 3-year prospective study of youths exposed to terrorism. The Journal of Clinical Psychiatry, 72(9), 1277-1283. doi:10.4088/jcp.10m06300

Munson, C. E. (2002). Child and adolescent needs in a time of national disaster: Perspectives for mental health professionals and parents. Brief Treatment and Crisis Intervention, 2(2), 135-152. doi:10.1093/brief-treatment/2.2.135

Nader, K. (2001, December 12). Guilt following traumatic events. [Web log post]. Retrieved from http://www.giftfromwithin.org/html/Guilt-Following-Traumatic-Events.html

Nasie, M., & Bar-Tal, D. (2012). Sociopsychological infrastructure of an intractable conflict through the eyes of palestinian children and adolescents. Peace and Conflict: Journal of Peace Psychology, 18(1), 3-20. doi:10.1037/a0026861

Nicolas, G., Wheatley, A., & Guillaume, C. (2014). Does one trauma fit all? Exploring the relevance of PTSD across cultures. International Journal of Culture and Mental Health, 8(1), 34-45. doi:10.1080/17542863.2014.892519

Nomura, Y., & Chemtob, C. M. (2009). Effect of maternal psychopathology on behavioral problems in preschool children exposed to terrorism: use of generalized estimating equations to integrate multiple informant reports. Archives of Pediatrics & Adolescent Medicine, 163(6), 531-539. doi:10.1001/archpediatrics.2009.51

Nordanger, D. Ø., Breivik, K., Haugland, B. S., Lehmann, S., Mæhle, M., Braarud, H. C., & Hysing, M. (2014). Prior adversities predict posttraumatic stress reactions in adolescents following the Oslo Terror events 2011. European Journal of Psychotraumatology, 5(1), 23159. doi:10.3402/ejpt.v5.23159

Nurmi, J., Räsänen, P., & Oksanen, A. (2012). The norm of solidarity: Experiencing negative aspects of community life after a school shooting tragedy. Journal of Social Work, 12(3), 300-319. doi:10.1177/1468017310386426

Oghii, O (2015). Fears of Preschool and Primary School Children with regard to gender, age and cultural identity: Cross-cultural study (Unpublished master's thesis) Middle East Technical University, Ankara, Turkey.

Özdemir, Y., & Çok, F. (2011). Ergenlikte özerklik gelişimi. Türk Psikolojik Danışma ve Rehberlik Dergisi, 4(36), 152-162.

Pearlin, L. I., & Schooler, C. (1978). The structure of coping. Journal of Health and Social Behavior, 19(1), 2-21. doi:10.2307/2136319

!Unexpected End of Formula, C., & Seligman, M. E. (2003). Character strengths before and after September 11. Psychological Science, 14(4), 381-384. doi:10.1111/1467-9280.24482

Pfefferbaum, B., Nixon, S. J., Tucker, P. M., Tivis, R. D., Moore, V. L., Gurwitch, R. H., ... & Geis, H. K. (1999). Posttraumatic stress responses in bereaved children after the Oklahoma City bombing. Journal of the American Academy of Child & Adolescent Psychiatry, 38(11), 1372-1379. doi:10.1097/00004583-199911000-00011

Pfefferbaum, B. J., Devoe, E. R., Stuber, J., Schiff, M., Klein, T. P., & Fairbrother, G. (2005). Psychological impact of terrorism on children and families in the United States. Journal of Aggression, Maltreatment & Trauma, 9(3-4), 305-317. doi:10.1300/j146v09n03_01

Pfefferbaum, B., Jacobs, A. K., Houston, J. B., & Griffin, N. (2015). Children's disaster reactions: the influence of family and social factors. Current Psychiatry Reports, 17(7), 1-6. doi:10.1007/s11920-015-0597-6

Phillips, D., Prince, S., & Schiebelhut, L. (2004). Elementary school children's responses 3 months after the September 11 terrorist attacks: A study in Washington, DC. American Journal of Orthopsychiatry, 74(4), 509-528. doi:10.1037/0002-9432.74.4.509

Pine, D. S., & Cohen, J. A. (2002). Trauma in children and adolescents: Risk and treatment of psychiatric sequelae. Biological Psychiatry, 51(7), 519-531. doi:10.1016/s0006-3223(01)01352-x

Pine, D. S., Costello, J., & Masten, A. (2005). Trauma, proximity, and developmental psychopathology: the effects of war and terrorism on children. Neuropsychopharmacology, 30(10), 1781-1792.doi:10.1038/sj.npp.1300814

Pollard, J. (2011). Seen, seared and sealed: Trauma and the visual presentation of September 11. Health, Risk & Society, 13(1), 81-101. doi:10.1080/13698575.2010.540647

Procevska, O., Kaprāns, M., Uzule, L. (2011). Persistence and Transformation of Cultural Trauma: Commemoration of Soviet Deportations in the Media of Post-Soviet Latvia (1987-2010). In C. Barrette, B. Haylock, D. Mortimer

(Eds.) Trauma Imprints: Performance, Art, Literature and Theoretical Practice (pp. 245−252).. Oxford, UK: Inter-Disciplinary Press.

Raphael, B., Dunsmore, J., & Wooding, S. (2004). Terror and trauma in Bali: Australia's mental health disaster response. Journal of aggression, maltreatment & trauma, 9(1-2), 245-256. doi:10.1300/j146v09n01_30

Raveis, V. H., Pretter, S., & Carrero, M. (2010). "It should have been happening to me": The psychosocial issues older caregiving mothers experience. Journal of Family Social Work, 13(2), 131-148. doi:10.1080/10522150903503002

Roberts, J. T., & Em, M. (2003). Fear at work, fear at home: surveying the new geography of dread in America post 9/11. International Journal of Mass Emergencies and Disasters, 21(3), 41-55.

Saka, Y., & Cohen-Louck, K. (2014). From demonization to identification: How parents who lost children in terrorist attacks perceive the attacker. Journal of Loss and Trauma, 19(2), 137-154. doi:10.1080/15325024.2012.743323

Scheeringa, M. S., & Zeanah, C. H. (2001). A relational perspective on PTSD in early childhood. Journal of Traumatic Stress, 14(4), 799-815. doi:10.1023/a:1013002507972

Schlenger, W. E., Caddell, J. M., Ebert, L., Jordan, B. K., Rourke, K. M., Wilson, D., Thalj L., Dennis, M., Fairbank, J., & Kulka, R. A. (2002). Psychological reactions to terrorist attacks: findings from the national study of Americans' reactions to September 11. Jama, 288(5), 581-588. doi:10.1001/jama.288.5.581

Schonfeld, D. J. (2002). Supporting adolescents in times of national crisis: potential roles for adolescent health care providers. Journal of Adolescent Health, 30(5), 302-307. doi:10.1016/s1054-139x(02)00382-8

Schuster, M. A., Stein, B. D., Jaycox, L. H., Collins, R. L., Marshall, G. N., Elliott, M. N., Zhou, A. J., Kanouse, D. E., Morrison, J. L.& Berry, S. H. (2001). A national survey of stress reactions after the September 11, 2001, terrorist attacks. New England Journal of Medicine, 345(20), 1507-1512. doi:10.1056/nejm200111153452024

Scott, S. B., Poulin, M. J., & Silver, R. C. (2013). A lifespan perspective on terrorism: Age differences in trajectories of response to 9/11. Developmental Psychology, 49(5), 986-998. doi:10.1037/a0028916

Serim, B. (2010). Nature, severity and origins of fears among children and adolescents with respect to age, gender and socioeconomic status. (Unpublished master's thesis,) Middle East Technical University. Ankara, Turkey.

Shamai, M. (2001). Parents' perceptions of their children in a context of shared political uncertainty. Child & Family Social Work, 6(3), 249-260. doi:10.1046/j.1365-2206.2001.00202.x

Shipilova, A. (2014). From local to national experience: Has Hiroshima become a 'trauma for everybody'?. Japanese Studies, 34(2), 193-211. doi:10.1080/10371397.2014.933669

Smith, S. L., & Wilson, B. J. (2002). Children's comprehension of and fear reactions to television news. Media Psychology, 4(1), 1-26. doi:10.1207/s1532785xmep0401_01

Solomon, Z., Gelkopf, M., & Bleich, A. (2005). Is terror gender-blind? Gender differences in reaction to terror events. Social Psychiatry and Psychiatric Epidemiology, 40, 947–954. doi:10.1007/s00127-005-0973-3

Somer, E. (2008). Exposure to repeated acts of terrorism: perspectives from an attacked community. Klinische Sozialarbeit 4, 6-11.

Stamm, B. H., Tuma, F., Norris, F. H., Piland, N. F., Van Der Hart, O., Fairbank, J. A. Stamm, H. E., Higson-Smith, C., Barbanel, L., & Levant, R. F. (2004). The terror part of terrorism. IEEE Engineering in Medicine and Biology Magazine, 23(1), 149-161. doi:10.1109/memb.2004.1297187

Summerfield, D. (1995). Addressing human response to war and atrocity. In R. J. Kleber, C. R. Figley & B. P. R. Gersons (Eds.) Beyond trauma (pp. 17–29). New York: Springer US

Tatar, M., & Amram, S. (2008). Israeli adolescents' help-seeking behaviours in relation to terrorist attacks: the perceptions of students, school counsellors and teachers. British Journal of Guidance & Counselling, 36(1), 51-70. doi:10.1080/03069880701715648

Tatar, M., Amram, S., & Kelman, T. (2011). Help-seeking behaviours of adolescents in relation to terrorist attacks: the perceptions of Israeli parents. British Journal

of Guidance & Counselling, 39(2), 131-147. doi:10.1080/03069885.2010.547052

The road to resilience. (2010). Retrieved from http://www.apa.org/helpcenter/road-resilience.aspx

Thomson, M. E., Önkal, D., & Güvenç, G. (2003). A cognitive portrayal of risk perception in Turkey: some cross-national comparisons. Risk Management, 5(4), 25-35. doi:10.1057/palgrave.rm.8240162

Trauma. (2010). Retrieved from http://www.apa.org/topics/disasters/

Tummala-Narra, P. (2007). Conceptualizing trauma and resilience across diverse contexts: A multicultural perspective. Journal of Aggression, Maltreatment & Trauma, 14(1-2), 33-53. doi:10.1300/j146v14n01_03

Uhernik, J. A., & Husson, M. A. (2009). Psychological first aid: An evidence informed approach for acute disaster behavioral health response. Compelling Counseling Interventions: VISTAS, 2009, 271-280.

Verhoeven, L. H. (2012). Quality of father-child interaction in refugee and asylum seeker families: The relation among posttraumatic stress and parental caregiving. (Unpublished master's thesis), Utretch University, Netherlands.

Vingerhoets, A. J., & Van Heck, G. L. (1990). Gender, coping and psychosomatic symptoms. Psychological Medicine, 20(01), 125-135. doi:10.1017/s0033291700013301

Volkan, V. D. (2001). Transgenerational transmissions and chosen traumas: An aspect of large-group identity. Group Analysis, 34(1), 79-97. doi:10.1177/05333160122077730

Yıldırım, A. (1999). Nitel araştırma yöntemlerinin temel özellikleri ve eğitim araştırmalarındaki yeri ve önemi. Eğitim ve Bilim, 23(112), 7-17.

Warria, A. (2016). Mothers reflect on how they have assisted their children to cope with the terrorist attacks in Kenya. Children & Society, 30(5), 410-422. doi:10.1111/chso.12178

Wayment, H. A. (2004). It could have been me: Vicarious victims and disaster-focused distress. Personality and Social Psychology Bulletin, 30(4), 515-528. doi:10.1177/0146167203261892

Zayfert, C., & Becker, C. B. (2006). Cognitive-behavioral therapy for PTSD: A case formulation approach. New York, NY: Guilford Press.

Zakowski, S., Hall, M. H., & Baum, A. (1992). Stress, stress management, and the immune system. Applied and Preventive Psychology, 1(1), 1-13. doi:10.1016/s0962-1849(05)80130-1

APPENDICES

Appendix A: Original Interview Form- Turkish

Mülakat Protokolü (TÜRKÇE)

İzin kısmı-kayıt altında:

Öncelikle bu mülakat isteğimi kabul ettiğiniz için teşekkür ederim. Daha önce de bahsettiğim gibi, bu çalışma benim Prof. Dr. Özgür Erdur Baker yönetiminde hazırladığım ODTÜ Rehberlik ve Psikolojik Danışmanlık Bölümü tezim. Bunun için, ülkemizin şu an içinde bulunduğu zor zamanlarda ebeveyn (anne/baba) olmak konusunu araştırıyorum. Siz de anımsarsınız ki, geçtiğimiz iki yıl boyunca, Ankara, İstanbul ve daha başka şehirlerde terör saldırıları, bombalamalar ve tehditler oldu ve ne yazık ki olmaya da devam ediyor. Dolayısıyla bir ebeveyn olarak sizin deneyimlerinizi, düşüncelerinizi ve duygularınızı öğrenmek istiyorum. Sormayı planladığım açık uçlu bazı sorularım var, ama çoğunlukla sohbet havasında ilerleyeceğimizden istediğiniz kadar konuşabilirsiniz. Gördüğünüz üzere daha sonra bu konuşulanların dökümünü alabilmem adına ses kayıt cihazımı kullanmak istiyorum, böylece görüşmeye daha iyi odaklanabiliriz. Ama hem ses kayıtları hem de bunların dökümleri anonim olacak, sadece dökümlerden ilgili kısımlar isminizi ve kimliğinizi ele vermeyecek şekilde alıntılanacak. Ayrıca ne kayıtlarının ne de dökümlerinin dosyaları araştırma takımının dışındaki üçüncü şahıslarla paylaşılmayacak. Soruların hiçbiri esasen zararlı değil, uzman görüşüne sunuldular ve etik izinler alındı; ama yine de eğer rahatsızlık hissederseniz, herhangi bir sebepten dolayı ara vermek isterseniz; kaydı dondurup ara verebiliriz, o kısım için kaydı atlayıp off-record konuşabiliriz, o soruyu geçebilir ya da erteleyebiliriz; ya da gönüllü katılım esas olduğu için görüşmeyi sonlandırabiliriz. Görüşmenin sonunda, katılımınıza karşılık olarak isterseniz çocuğunuza gelişim testi yapmayı önerebilirim. Bu çalışma için elzem olmamasına rağmen çocuğu daha fazla tanımak adına bana da yardımcı olabilir, ayrıca size katılımınıza karşılık yeteneklerim dahilinde bir şey önermek isterim. O halde, başlamadan önce herhangi bir sorunuz var mı? (Yoksa), izniniz var ise, başlayabilir miyiz?

A: Biraz sizi tanıyarak başlamamız uygun mudur, az biraz sizi daha iyi tanımak için, örneğin yaşınız nedir?

* Bana (evli/birlikte yaşıyor/boşanmış) olduğunuzu söylediniz. Bu durum kaç yıldır devam ediyor?
* (Sayı) çocuğunuz olduğunu söylediniz. Yaşları ve cinsiyetleri nedir?
* Eğitim durumunuz nedir? En son hangi okula gittiniz? (ilkokul, ortaokul, lise, üniversite gibi?)
* Çalışıyor musunuz? Mesleğiniz nedir? İşiniz nasıldır?
* Eşiniz hakkında da konuşursak? Bana söyler misiniz, onun yaşı, eğitimi, mesleği nedir? (teker teker sor)
* Sizinle kimler yaşıyor? Size yakın kimler yaşıyor? Hane halkı olarak nitelendireceğiniz herhangi biri?
* Size çocuk bakımında yardım eden insanlar kimler? En yakın destekçiniz kimdir?

B: Bana biraz da çocuklarınızdan bahseder misiniz?

*(İsim) nasıl biri? Onu nasıl tanımlarsınız?

*Onlarla ilişkinizi nasıl tanımlarsınız? (kardeşler arasındaki ilişkiyi) (çocuklar ve babaları arasındaki ilişkiyi) (teker teker sor)

* Çocuklarınızın herhangi bir özel durumu (erken doğum, engellilik, sağlık sorunu, travmatik yaşantı) var mı?

C: Kendinizi nasıl bir ebeveyn olarak tanımlarsınız? (Kontrollü, hoş görülü, kaygılı, aşırı düşkün vb?)

* Biraz da eşinizden söz eder misiniz? Çocuklarla arası nasıl? Onlarla zaman geçirebiliyor mu? Çocuklar babalarından çekinir mi?

D: Çocuklarla ilgili bir problemle karşılaştığınızda genelde ne yaparsınız? (ailevi bir problemde?) (bir kayıp durumunda?) Nasıl baş edersiniz?

E: Herhangi bir terör saldırısına maruz kaldınız mı, ya da tanık oldunuz mu?

*Evetse, eğer sizin için bir sakıncası yoksa, bana biraz bahsedebilir misiniz? (Hayırsa, aynı soruları akıllarına gelen ve herhangi bir kaynaktan haberdar oldukları en sarsıcı terörist saldırı üzerinden soruyoruz). Kendinizi ne kadar rahat hissediyorsanız o kadar anlatın.

* Neredeydi?

* Ne zamandı?
* Ne oldu?
* Daha fazla bilgi sahibi olmayı denediniz mi? (Öyle ise hangi kaynaklara yöneldiniz?)
* O anda geleceğe yönelik herhangi bir düşünceniz oldu mu?
* Sonrasında nasıl hissettiniz?
* Bundan başka herhangi bir travmatik yaşantınız var mı? (deprem, şiddet, silahlı saldırı, kaza v.b.)
* Hayatınızda bu şekilde duygusal sarsıcılığı olan başka bir olay daha hatırlıyor musunuz?

(Not: Eğer bahsi geçen terör ile ilgili olay 2 yıldan daha önce gerçekleşmişse; eski/geçmiş deneyimleri kaçırmamak adına yine de cevapları alacak ama soruları daha sonra yeniden bu sefer son iki yıl içinde yaşanmış ya da duyulmuş daha yeni bir olay için yönelteceğim; böylece gerektiği durumda diğer katılımcılarla karşılaştırmaya daha müsait yeni bir hikâye olacak.)

F: Konuyla alakalı herhangi bir haber içeriğini hatırlıyor musunuz? Biraz bahseder misiniz?

* Okuduğunuz, izlediğiniz şeyin içeriği neydi?
* Sonrasında ne hissettiniz? Tepkileriniz nelerdi?
* Hayatınızda bu şekilde duygusal sarsıcılığı olan başka haber içerikleri hatırlıyor musunuz?

G: Bana (saldırının ismi) saldırısını yaşadığınızı (tanık olduğunuzu/izlediğinizi) ve (bahsedilen duygulara referans) duyguları yaşadığınızı söylediniz. Bunu biraz daha açabilir miyiz?

*Bu saldırıdan sonraki günler nasıldı?
*Düşüncelerinizde, duygularınızda, davranışlarınızda, bedeninizde önceki günlere göre bir değişim hatırlıyor musunuz?
*Bunlar ne kadar sürdü?
*Bu duygular, fikirler, düşünceler sizi meşgul ettiğinde ne yaptınız?
*Herhangi bir profesyonel destek aradınız/aldınız mı?
*Eşinizle ya da yakın çevrenizle genellikle bu konuları konuşur musunuz?

H: Bu terör saldırılarında (bazılarında) hayatlarını kaybedenler hakkındaki tepkilerinizi hatırlıyor musunuz? Kendinizi rahat hissettiğiniz kadarıyla anlatabilir misiniz?

* İlk öğrendiğinizde nasıl tepki verdiniz? Ne düşündünüz? Ne hissettiniz?
* Onların hayat hikayelerini dinlediniz/okudunuz mu? (Evetse, sizi neler etkiledi?)
* Aralarında tanıdığınız birileri var mıydı?
* Bunun sizin ya da tanıdığınız birinin başına gelebileceğini düşündünüz mü?
* (Özellikle, eğer bir genel tehdit algısından bahsedildiyse): Nasıl tepki veriyorsunuz?

I: Sizin saldırılarla ilgili deneyimlerinizi konuştuk, ama çocuklarınız hakkında henüz konuşmadık. Onlar bu saldırılardan herhangi birini deneyimledi ya da tanık oldular mı?

Eğer evetse; Nerede; ne zaman; ne oldu, ne yapıyorlardı? (Hayırsa; medyadaki haber fotoğrafları/görüntüleri/içeriklerine, özellikle görsel olanlara maruz kaldılar mı?)

Olay sırasında çocuğunuzun tepkilerinden bahsedebilir misiniz?

* İlk tepkileri neydi?
* Duyguları hakkında herhangi bir tahmininiz var mı? (Hiç bahsetti mi?)
* Soru sordu mu? Bir şey söyledi mi?
* Ne olduğunu nasıl öğrendi?
* Öğrendikten sonra ne yaptı?
* Onunla kimler vardı?
* Yanında olanların tepkileri ve açıklamaları nelerdi? O bunlara nasıl tepki verdi?
* Yeni insanlara/yabancılara nasıl tepki veriyor? (Bu hep böyle miydi?) (eğer değiştiyse, ne zaman?)
* Yüksek seslere ve ortamdaki ani değişikliklere nasıl tepki veriyor? (Bu hep böyle miydi?) (eğer değiştiyse, ne zaman?)
* Eğer size korkularını/kaygılarını bir şekilde ifade edebiliyorsa, bunlar neler?
* Onu rahatlatmak için ne yapıyorsunuz/yaptınız?
* Onunla ilgili herhangi bir korku ya da endişeniz var mı?

J: Sonraki günlerde çocuğunuz ilgili haberleri izledi mi? Biraz bahseder misiniz?

* Olay sonrasında onda herhangi bir davranışsal değişim gözlemlediniz mi? Nelerdi?
* Fizyolojik tepkiler?
* Bu konular hakkında başkaları ile konuştu mu? Kimlerle, ne konuştu?
* Onun hayatında buna benzer başka bir duygusal sarsıcılığı olan bir olay olduğunu düşünüyor musunuz? Nedir? Nasıl etkilemişti?
* Bu onun aile üyeleri ile ilişkisini etkiledi mi? Nasıl?

K: Konuştuğumuz üzere Türkiye pek çok toplumsal travmaya ve terör saldırısına hedef oluyor, böyle bir ortamda ebeveyn olmak hakkında ne düşünüyorsunuz?

*Bu düşünceleriniz daha önce olduğundan farklı mı?

*Çocuklarınız hakkındaki en temel endişeleriniz neler?

*Onları korumak için neler yapıyorsunuz?

L: Günlük/iş/ev rutinleriniz şimdilerde nasıl? (yeme, içme, alışveriş, dışarı çıkma, egzersiz, aile ile ilgili ziyaretler gibi rutinler).

* Bu rutinleriniz, saldırılardan önceki rutinlerinizden herhangi bir şekilde farklılaştı mı?
* Çocuklarınızı korumak adına aldığınız ve onların rutinlerini etkileyen önlemleriniz oldu mu? Evetse, neler?

M: Bana biraz gelecek hakkındaki beklentilerinizi anlatır mısınız?

* Geleceğin nasıl olacağını düşünüyorsunuz?
* Çocuklarınızın geleceğinin nasıl olacağını düşünüyorsunuz?
* Geleceğinizi düşündüğünüzde sizi endişelendiren şeyler var mı? (Bahsedilmezse sor:) güvenliğinizle (fiziksel ve duygusal) ilgili?
* Çocuklarınızın geleceğini düşündüğünüzde sizi endişelendiren şeyler var mı? (Bahsedilmezse sor:) güvenlikleriyle (fiziksel ve duygusal) ilgili?

(Not: Eğer özel bir korkudan bahsederlerse: neden ve nasılını sor)

* Gelecekten beklentileriniz neler?

N:Bu süreç boyunca, sizin için dayanılması en güç olan şeyler nelerdi?

***Bunlarla nasıl başa çıktınız?**

*Çocuklarınız için dayanılması en güç olan şeyler nelerdi?

*Çocuklarınıza bunlarla başa çıkmada nasıl yardım ettiniz?

*Bu süreçte sizi bunlarla başa çıkmada kimler destekledi?

O: Bu süreç boyunca size güç veren şeyler nelerdi?

Bunların her birinin size nasıl yardımcı olduğunu anlatabilir misiniz?

Bunları çocuklarınıza yardım etmede nasıl kullandığınızı anlatabilir misiniz?

Paylaşımlarınız için teşekkür ederim, sorularım bu kadardı. Sizin eklemek istediğiniz herhangi birşey var mı?

Brifing kısmı; çoğunlukla çıktı olarak verilip & okunacak.

Kısa bir bilgilendirme olarak; insanların dünyanın pek çok yerinde terör, savaş ya da başka travmalar sebebiyle böyle zor zamanlarla karşılaştığını söyleyebiliriz. Örneğin, Orta Doğu'da İsrail-Filistin sorunu; Amerika'da 11 Eylül saldırıları bu olayların insanların psikolojik sağlıkları üzerindeki etkileri konusunda literatürü zenginleştiren örnekler olarak sıralanabilir. Psikolojik dayanıklılık literatüründen de bildiğimiz kadarıyla insanların travmatik olaylara tepkileri farklı olabiliyor ve çoğu zaman iyileşmelerini etkileyen bu parçalar öğrenilebiliyor. Yine de ben psikolojik sağlık profesyonellerinin, insanlara tepeden inme yardım ve müdahale planları önermek yerine; önce insanların deneyimlerini öğrenmeleri gerektiğine inanıyorum. Dolayısıyla, Türkiye vakasını da anlamak için bu araştırmayı yaptık; çünkü benzer araştırmalar İsrail ve Kenya'da olsa da Türkiye'de bilgimiz dahilinde yok. Daha fazla bilgi almak ve sonra tezin bir kopyasını edinmek için bana (Meryem GÖKYAR), metu e-posta adresimden e211200@metu.edu.tr ulaşabilirsiniz.

Appendix B: English Translation

Interview Protocol (ENGLISH)

Concent part-recorded:

"First of all, thanks for accepting this interview request. As I mentioned, this is my graduate school thesis work in METU Guidance and Psychological Counselling Department, under supervision of Prof. Özgür Erdur Baker. For my thesis, I would like to conduct research on being a parent (mom/dad) through difficult times that our country is experiencing now. As you may recall, for the previous two years, there had been various terrorist attacks, bombing or treat in Ankara, Istanbul and other cities, also and unfortunately, they continue. So, I would like to learn about your experiences, thoughts and feelings as parents. I have some open-ended questions that I would like to pose but largely it would be like a chat in which you can talk as long as you want. As you can see, I would like to use the recorder to enable me to transcribe the interview later, so that we can focus on the interview better. But both recordings and transcriptions will be anonymous, only the parts from the transcriptions will be quoted without revealing your names or specific identifications. Moreover, neither recordings nor transcriptions files will be shared with third parties except from research team. None of the questions is harmful in their nature, they were conformed by the experts and the ethical permission is taken; but still if you feel any disturbance or for any reason if you want to take a break, we can pose the recorder and give a break, skip recording for that part and talk off-records, pass or postpone the question or terminate the interview, since it is a matter of voluntary participation. As a treat at the end of the interview I do offer a developmental test for the child if you will. Even if it is not crucial for this study, might help me to know more about the child, moreover, I would like to offer you something within my abilities, in return of your participation. Thus, before we begin do you have any questions? (If not) do you have consent, should we begin?

A: Is it ok that we start with knowing about you a little bit, something little to know you better; like what is your age?

* You had told me that you were (married/partners/divorced etc). It's for how many years now?
* You told me you have (number) many children. How old are they?
* Your educational status? What was the last school you attended? (like primary school, junior high, high school or collage?)
* Are you working?, What is your profession? What is your work like?
* As we also talk about your partner? Could you tell me about his/her age? education? profession? (ask one each at a time)
* Who are living with you? Close to you? Anyone you include as your household?
* Who are the people that help you with the caregiving? Your primary supporter in caregiving?

B: Could you tell me a little more about your children?

* What is (name) like? How do you define her/him?
* How do you define your relationship with them? relationship between siblings? relationship between children and the father? (ask one each at a time)
* Do your children have any special circumstances? (like premature birth, disability, medical issues, traumatic experiences)

C: How do you define yourself as a parent?

* Could you mention a little bit about your partner? How is his relationship with the children? Does he spend time with them?

D: Generally what do you do when you face with a problem about children? (about family?) (about a loss?) How do you cope with it?

E: Did you experience or witness any of terrorist attacks?

*If yes, could you please tell me more about it? (If no, the same questions were asked for the most striking terrorist event that recall from any source?)

*Where was it?

*When was it?

*What happened?

* Did you try to gain more information? (If so, from what sources?)

* Did you had any future-related thoughts in that moment?
* How did you feel afterwards?
* Do you have any other traumatic experience? (earthquake, violence, armed attacks, accidents etc.)
* Do you recall any other emotionally distressing event of your life?

(Note: If the mentioned terror-related event was more than two years old; I would still take the answers but this time ask the same questions for a more recent event that is experienced or heard in the last two years; in order not to miss a previous/old experience; but still have a recent story to compare with the rest of the participants if needed)

F: Do you recall any terror-related news content?

* What was the content like that you read/watched etc?
* How did you feel afterwards? What was your reactions?
* Do you recall any other emotionally distressing news coverages in your life?

G: You had told me that you experienced (witnessed/watched) the attack of (the name of the attack) and you felt (reference to the feelings mentioned).

* How were the days after this attack?
* Do you recall any difference in your thoughts/feelings/behaviours/physiology (than the previous days?)
* How long these lasted?
* What did/do you do when these feelings/ideas/thoughts etc. occur(red) to you?
* Did you need/seek any professional help?
* Do you generally talk to your partner or your close circle about those issues?

H: Do you recall what was your response about the ones who lost their lives during (some of) these attacks?

* What were your first reactions when you first learned about them? What did you think? What did you feel?
* Did you listen/read their stories? (If so, how did these affected you?)
* Where there anyone you know among them?

* Have you ever thought that it would have been you or someone you had known?
* (If (especially a general) threat perception is mentioned) How do you respond?

I: We talked about your experience of the attacks but haven't talked about your children yet. Did they experience or observe any of these attacks?

If yes; Where; when; what happened; what you were doing? (If no, witnessing any traumatic media news images/coverages; especially imagery?)

Could you please talk about your child's reactions during the events?

*What was his/her first reactions?

*Do you have any cue about his/her feelings? Did she ever mention?

*Did he/she ask any questions? Tell you something?

*How did s/he learn about what had happened?

*What did s/he do after learning it?

*Were there anyone with him/her?

*What was their reactions and explanations? How did s/he react to those?

*How does he/she respond to your absence? (was it always like that?) (if changed, when?)

* How does he/she respond to new people/strangers? (was it always like that?) (if changed, when?)

* How does he/she respond to loud noises or sudden changes in the environment? (was it always like that?) (if changed, when?)
* If s/he indicates the things s/he fears or worries, what are those?
* What do/did you do to comfort him/her?

*Do you have any specific fears or concerns regarding him/her?

J: Did your child watched the terror-related news that day or afterwards?

* What was his/her reactions to the news?
* Did you realize any behavioural change of him/her afterwards?
* Any somatic responses?
* Does she mention to those events and news?
* Do you think s/he had any other emotionally distressing event of his/her life, resembling this one maybe?

* Did it affect her relations with any of the family members?

K: You had defined being a parent in terms of (reference to section C) and as we had talked Turkey is subjected to many terrorist attacks, so what is it like to be a parent in such an environment?

* Is it any ways different from before?
* What are your thoughts about parenting?
* What are your primary concerns about your children?
* What do you do to protect them?

L: How are your daily/work/house routines now? (sleep, eating, shopping, going out, exercise, family related routines like visits)

* Are these any ways different from your routines before those attacks?
* Have you taken any measures to protect your children that affected their routines? If yes, like what?

M: Could you tell me more about your future related thoughts?

* How do you picture the future?
* How do you picture your children's future?
* Do you have any concerns regarding your future? (Ask if not mentioned): your security (both physical and emotional)?
* Do you have any concerns regarding your children's future? (Ask if not mentioned): your children's security? (both physical and emotional)?

(Note: If any specific fear is mentioned: ask their why and how)

* What are your future expectations?

N: Throughout these processes, what are the most unbearable things for you?

* How do you cope with these events?
* What were the most unbearable things for your children?
* How do you help your children to cope with these?
* Who supported you to cope with these?

O: Throughout this process what were the things that gave you strength?

* Could you tell me about how each of these helped you?

* Could you tell me about how you used those to help your children?

Thanks for sharing, these are all of the questions that I would ask now. Do you have anything else to add.

Debriefing part; mostly handed out & read.

For a quick debriefing, I might be saying that people all over the world face such difficult times due to terrorist attacks, wars or other traumas. For instance, Israel-Palestine issue in the Middle East; 9/11 from the USA can be cited as examples enriched the literature about those events' impacts on peoples' psychological well-being. As we know from the literature of resilience, people react differently to various traumatic events; and most of the time recovering from their affects have some pieces that can be learnt. However, I believe professionals of psychological well-being need to learn about the people's experiences and ways first; instead of coming with top-down intervention and help strategies. Thus, to understand the case in Turkey, we conducted this research, as even though there were similar studies in Israel and Kenya; there were not any to our knowledge in Turkey. For more information, and later to get a copy of the thesis, you may contact me (Meryem GOKYAR) from my metu e-mail address e211200@metu.edu.tr

Appendix C: The Codebook

This is the **original** codebook provided to the co-coder for coding. The names and places of some codes have been changed after the discussions of the team (researcher with co-coder or with the supervisor). The changed content had been presented in the thesis, frequency tables and the concept map, however the codebook was presented in this original form. The following list encompasses the codes emerged from the interviews through content analysis, and the codes in bold are the ones which were mentioned most frequently by the participants (by at least 80% of the participants). The light coloured codes are the ones that are cited least, less than 20% of the participants. The regular fonted ones are the codes mentioned in between. The italics in parentheses are the explanation.

CODES EMERGED FROM THE INTERVIEWS (124 codes)

- A_INTRODUCTION TO MOTHER CHILD RELATION: 19 codes

- Child-Mother Relations (CMR): 5 codes

  - **A_CMR_Love and harmony** *(When mother claims the nature of their relationship is based on love, such as "I love my child", "we love each other", "we miss each other", "our relationship is beautiful", " we like doing things together" and so forth.)*

  - **A_CMR_Supporting/Sharing with the child/children** *(Especially when the mother claims she and the child shares emotions and special moments together, they try to support their children's development like "we talk, we share our secrets", "I try to encourage him for …")*

  - A_CMR_Feeling sometimes incompetent or neglecting *(Neglecting the child due to work hours or thinking they are not good enough to care or support the child)*

  - A_CMR_Sometimes problems between mother and child *(Small problems like small fights or mother's complain about her child's not having good manners)*

  - A_CMR_Strong Attachment *(Situation as the child does not want to leave mom and sometimes gets anxious when he/she does)*

- Family-Children Relations (FCR): 4 codes
    - **A_FCR_Positive/healthy relations between father and children** *(Mother's perception of good father/child relations as they share moments, play, get on well with each other etc)*
    - A_FCR_Negative/unhealthy relations between father and children *(The opposite of the previous code; coded only if it is mentioned by the mother or directly observed in notes)*
    - A_FCR_Small familial problems: sibling issues or father-child problems *(Sometimes' father's being impatient, or some jealousy between children, mentioned)*
    - A_FCR_Strong attachment between siblings *(Overprotecting each other or the younger sibling, like extreme crying or fighting when the other one is in perceived danger; not letting anyone else to play/talk/form friendship with the sibling)*
- Problem Solving (PS): 10 codes
    - A_PS_General attitude in problem solving: Solving herself *(When the mother mentioned they try to solve the problem themselves)*
    - A_PS_General attitude in problem solving: Solving by discussing with the partner
    - A_PS_General attitude in problem solving: Consulting others (family, friends, professionals)
    - A_PS_General attitude in problem solving: Research
    - A_PS_General attitude in problem solving: Understanding & communication *(When the mother mentioned they try to understand the problem first and talk to the other party before solving a problem)*
    - A_PS_General attitude in problem solving: Helping children to solve their own problems *(If the mother claims she helps her child to solve the problem by herself, in order to teach her the abilities.)*

- A_PS_General attitude in problem solving: Calming the child *(If the mother tries/needs to calm down the child before attending to the problem itself)*
- A_PS_General attitude in problem solving: Blaming the child/getting angry *(If the mother thinks the problem is caused by the child and reacts negatively)*
- A_PS_General attitude in problem solving: Self-blaming *(If the mother thinks the problem is caused by herself, or occurred since she could not prevent it)*
- A_PS_General attitude in problem solving: Not thinking of it much *(Avoidance or ignorance of the problem, thinking it is unimportant or not wanting to deal with it)*

- B_MOTHERS' OWN EXPERIENCE (MOE) WITH TERROR: 44 codes
  - Events: 4 codes
    - B_MOE_15 Temmuz
    - B_MOE_Güvenpark patlaması
    - B_MOE_Merasim Sokak
    - B_MOE_Ulus gar patlama
  - Risk factors: 5 codes
    - B_MOE_Hearing/seeing *(Coded if it is seen or heard, like hearing the explosion, or seeing the jets flying)*
    - **B_MOE_Proximity to the place** *(Mother's claim that the place events happened are either physically close to them (work/house) or a place they frequently visit and know well)*
    - B_MOE_Proximity of a loved one *(Similar to the above code)*

- **B_MOE_PE_Threat perception *(When the mothers perceived the event as a threat to their lives or well-being at the moment)***
- **B_MOE_No direct experience** *(Not really being at the place events happened at the moment, like being injured or survived/escaped from the explosion or guns)*

- First Reactions :4 codes
  - B_MOE_Behavior: crying
  - B_MOE_Behavior: security check (family & friends) *(Calling out family members and friends)*
  - B_MOE_Behavior: shock
  - B_MOE_Behavior: urge to check the media *(Trying to open the TV, or check the internet and phone, in order to learn from the media)*

- Primary Feelings & Thoughts & Needs: 6 codes
  - **B_MOE_Feelings: Sorrow, worry, terror** *(Deep unhappiness, extreme fear, especially fear of death or losing a loved one; strong anxieties)*
  - B_MOE_Feeling of survival by chance *(When the mother claims they were at the place a few minutes/hours before, or the only reason they were not there at that precise moment is because of chance)*
  - B_MOE_Feeling incapable *(Similar to shock, but rather feeling they cannot do anything either to undo what had happened or to diminish the harm/take measure)*
  - B_MOE_Thoughts: Idea of loved ones being there *(When it was known that there is the probability that a loved one being there at that moment)*
  - B_MOE_Thoughts: Worry about the future of the children *(Worry about what would happen to the children in the near future, felt just after the event)*

- **B_MOE_Needs: Search of the meaning** *(Not understanding what had happened; need to figure out what was the event and its details)*

- News Affects: 5 codes
  - B_MOE_Traumatization by the news content *(When the content of the events are traumatizing, caused disturbance like being dead bodies, bloods etc; coded when the mother claims such)*
  - B_MOE_No content remembered *(Not remembering any news content related to the event)*
  - B_MOE_Being affected by young deaths *(Mainly mentioned while telling what disturbed them most in the news)*
  - B_MOE_Being affected by illness and death of children*(Mainly mentioned while telling what disturbed them most in the news)*
  - B_MOE_Being affected by Martyr news *(Mainly mentioned while telling what disturbed them most in the news)*
- Post Event (PE) Changes in Attitudes and Feelings: 12 codes
  - **B_MOE_PE_Change in Feelings: Not feeling secure** *(Not feeling secure even after the event; mentioned by the mother herself)*
  - **B_MOE_PE_Change in Feelings: Worry and anxiety** *(Feeling worry and anxiety even after the event; mentioned by the mother herself)*
  - B_MOE_PE_Change in Feelings: Empathy with the victims and their families *(Putting yourself into the shoes of the victims or their families in the following days)*
  - B_MOE_PE_Change in Feelings: Surviver's guilt *(Feeling surviver's guilt)*
  - B_MOE_PE_Change in Attitudes: Urge to find ways to protect themselves *(Trying to take measures to protect themselves in the following days; like avoiding risks)*

- B_MOE_PE_Change in Attitudes: Mistrust to others *(Feeling others might pose threat to their well-being, being suspicious of random people)*
- B_MOE_PE_Change in Attitudes: Interest in moving abroad *(Trying to change country permanently as a measure to take)*
- B_MOE_PE_Change in Attitudes: Trying to avoid details about the events *(Stopped or avoided to watch the news or learning/searching the events-related content)*
- B_MOE_PE_Change in Live Routines: Not going to malls or crowded places
- B_MOE_PE_Change in Live Routines: Protecting children *(Trying to take measures to protect their children from the perceived risks in the following days)*
- B_MOE_PE_Previous trauma effect continuing in daily life *(Continuing physical symptoms in the following days)*
- B_MOE_PE_Talking about the events with friends and family *(Talking about the events in the following days)*

- Post-Event: Coping: 8 codes
  - B_MOE_PE_Continuing life/getting accustomed to it
  - B_MOE_PE_Coping with spirituality *(praying, thinking in spiritual terms, destiny)*
  - B_MOE_PE_Coping by engaging with trivia*(Trying to avoid the thoughts by taking her own attention to unimportant/routine things eg. knitting, reading, entertainment)*
  - B_MOE_PE_Coping with hope *(Thinking everything will be fine in the near future)*
  - B_MOE_PE_Coping with normalizing *(Thinking these events and deaths are a part of world and they are normal)*

- B_MOE_PE_Coping incapability *(Not being able to cope, when expressed directly)*
- B_MOE_PE_Coping with helping others
- B_MOE_PE_Resilience due to previous terror-related experience

- C_CHILDREN'S OWN EXPERIENCE (COE) WITH TERROR: 24 codes
- Risk Factors: 3 codes
    - C_COE_being traumatized: hearing/seeing *(Like the code "hearing/seeing: Part B)*
    - C_COE_not being traumatized: not hearing/seeing/being asleep *(Opposite to the above code; both are when it is experienced by the child)*
    - C_COE_previous terror experience of the child *(When child has any previous experience; like hearing/seeing such events before the last two years)*
- First reactions: 11 codes
    - C_COE_terror, fear, worry responses of the child
    - C_COE_crying, trembling responses of the child
    - C_COE_mimicing parents' feelings/anxiety *(When mother claims the child behaved in a particular way when s/he learnt from her)*
    - C_COE_asking questions, understanding some issues *(about cognitive abilities/age-based development of the child)*
    - C_COE_learning from/with parents *(learning what had happened and related terms)*
    - C_COE_learning from friends *(learning what had happened and related terms)*
    - C_COE_not able to understand (esp. younger children) *(about cognitive abilities/age-based development of the child)*

- C_COE_being traumatized by news: terror events & martyr news
- C_COE_continuing physical & psychological symptoms of the child
- C_COE_concern about parent's death
- C_COE_feeling secure at home *(When the child's anxiety level is getting down)*

- Mother's Responses to the Child: 10 codes
  - C_COE_calming the child saying s/he is secure and these are normal
  - C_COE_calming the child by physical contact *(like hugging, kissing, holding hand, sleeping together…)*
  - C_COE_calming the child by attracting his/her attention to other stuff (like games etc)
  - C_COE_open communication with children *(Claim that preparing an environment for the child in which s/he can ask any question about those events; and parents would answer)*
  - C_COE_responses to child's questions: truthfully in a way that they could get
  - C_COE_no response to questions/no explanation/fake explanation *(like saying the jets are flying because of a demonstration they would have in the future etc)*
  - C_COE_setting rules for the changing routines *(not explaining the changing routines to the child, but rather setting rules like "we do not go there" etc…)*
  - C_COE_continuing routines *(not changing much of the previous routines)*
  - C_COE_parent's monitoring of the news watch *(by child & themselves)*
  - C_COE_parent's monitoring of their behaviours, discussions *(not discussing such issues in front of children; trying not to show their fears or anxieties)*
- D_MOTHER'S CONCERNS OVER TERRORIST ATTACKS: 37 codes
- General Beliefs: 3 codes

- D_MCOTA_GB_Mother is more important for a child *(than fathers and other family members/relatives)*
- D_MCOTA_GB_Country's future and children's future are inter-related
- D_MCOTA_GB_Life is important

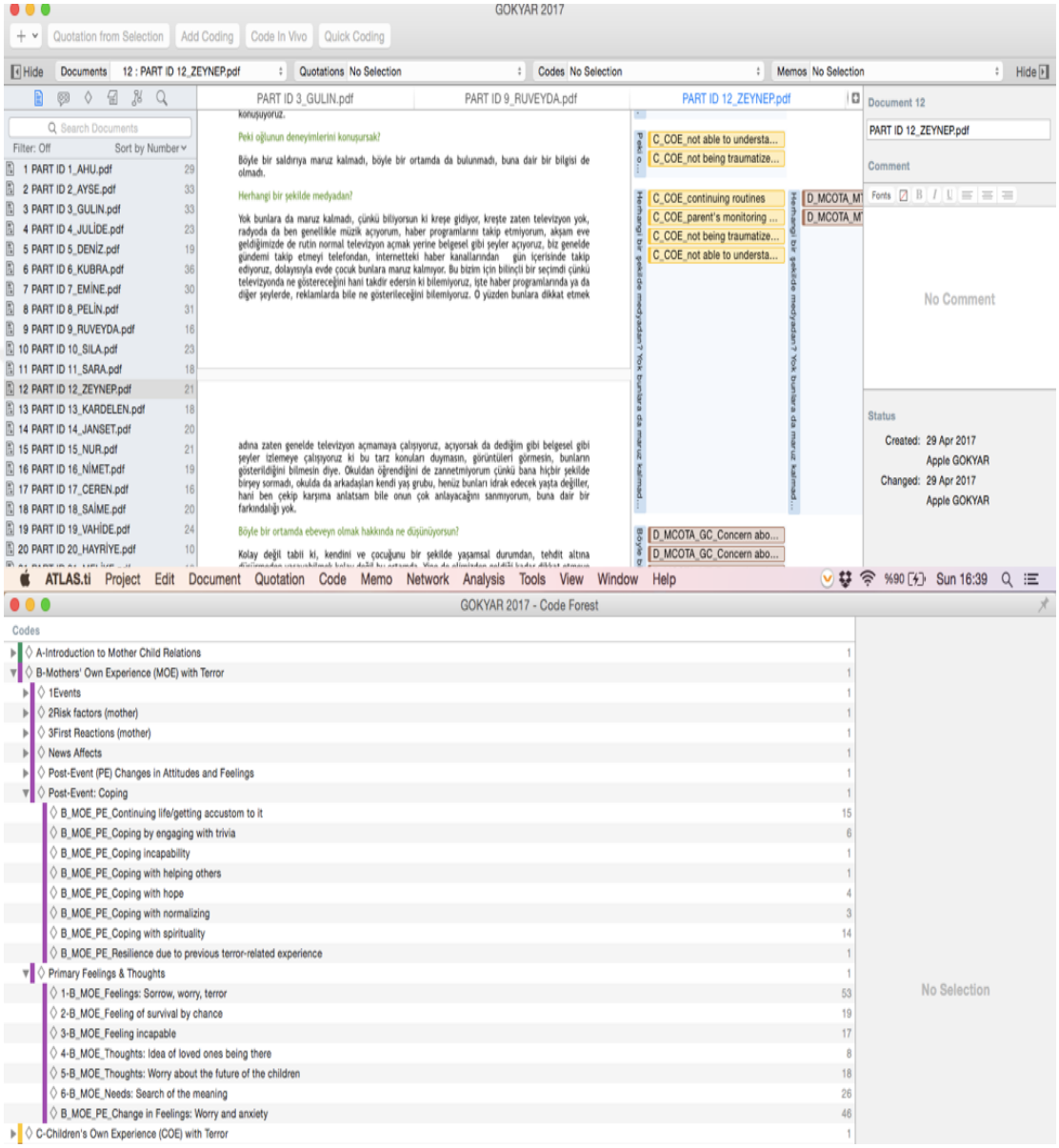
- General Concerns: 12 codes
  - D_MCOTA_Feeling: Inability to take measure/change anything
  - **D_MCOTA_GC_Concern about children's physical well being/lives**
  - D_MCOTA_GC_Concern about children's psychological well-being
  - D_MCOTA_GC_Concern about dying and abandoning the children
  - D_MCOTA_GC_Concern about country's future *(like the future might be worse)*
  - D_MCOTA_GC_Concern about children's future
  - D_MCOTA_GC_Concern about inability to protect children *(protection of the both physical and psychological well-being of the child)*
  - D_MCOTA_GC_Concern about inability to provide the children *(not being able to give them food and money, especially if they die or circumstances became worse)*
  - D_MCOTA_GC_Concern about losing a loved one *(parent, child, partner, sibling)*
  - D_MCOTA_GC_Concern about mistrust between peoples *(concern that not trusting each other would affect their children in the future; complaining about the mistrust)*
  - D_MCOTA_GC_Concern about the uncertainty would turn to something bad *(complaining about not being able to know what would happen in the future or how much things might get worse if they do)*

- D_MCOTA_GC_Encounterment of children with evil people *(concerns about the evil people like kidnappers, drug-dealers, child-abusers might encounter their children)*

- Measures taken: 7 codes
  - D_MCOTA_MT_Continuing routines *(Not changing much of their routines)*
  - D_MCOTA_MT_Discussion about what measures to take with partners/children
  - D_MCOTA_MT_Encouraging open communication
  - **D_MCOTA_MT_Preventing children from the malls or crowded places**
  - D_MCOTA_MT_Protecting children from possibly traumatic news *(monitoring)*
  - D_MCOTA_MT_Reframing due to hesitation to tell the truth to the children
  - D_MCOTA_MT_Trying to keep children at her side or constantly in contact
- Expectations :2 codes
  - D_MCOTA_Expectations_End of terror
  - D_MCOTA_Expectations_Happy life & country
- Coping: 13 codes
  - D_MCOTA_Coping: Acceptance: Que sera sera *(Whatever will be, will be)*
  - D_MCOTA_Coping: Avoiding disturbing ideas *(Esp. when they catch themselves)*
  - D_MCOTA_Coping: Being strong for the children *(Idea that they need to be strong for their children, in order to provide and protect them)*
  - D_MCOTA_Coping: Coping with spirituality: praying & belief in destiny
  - D_MCOTA_Coping: Hope that things would be better

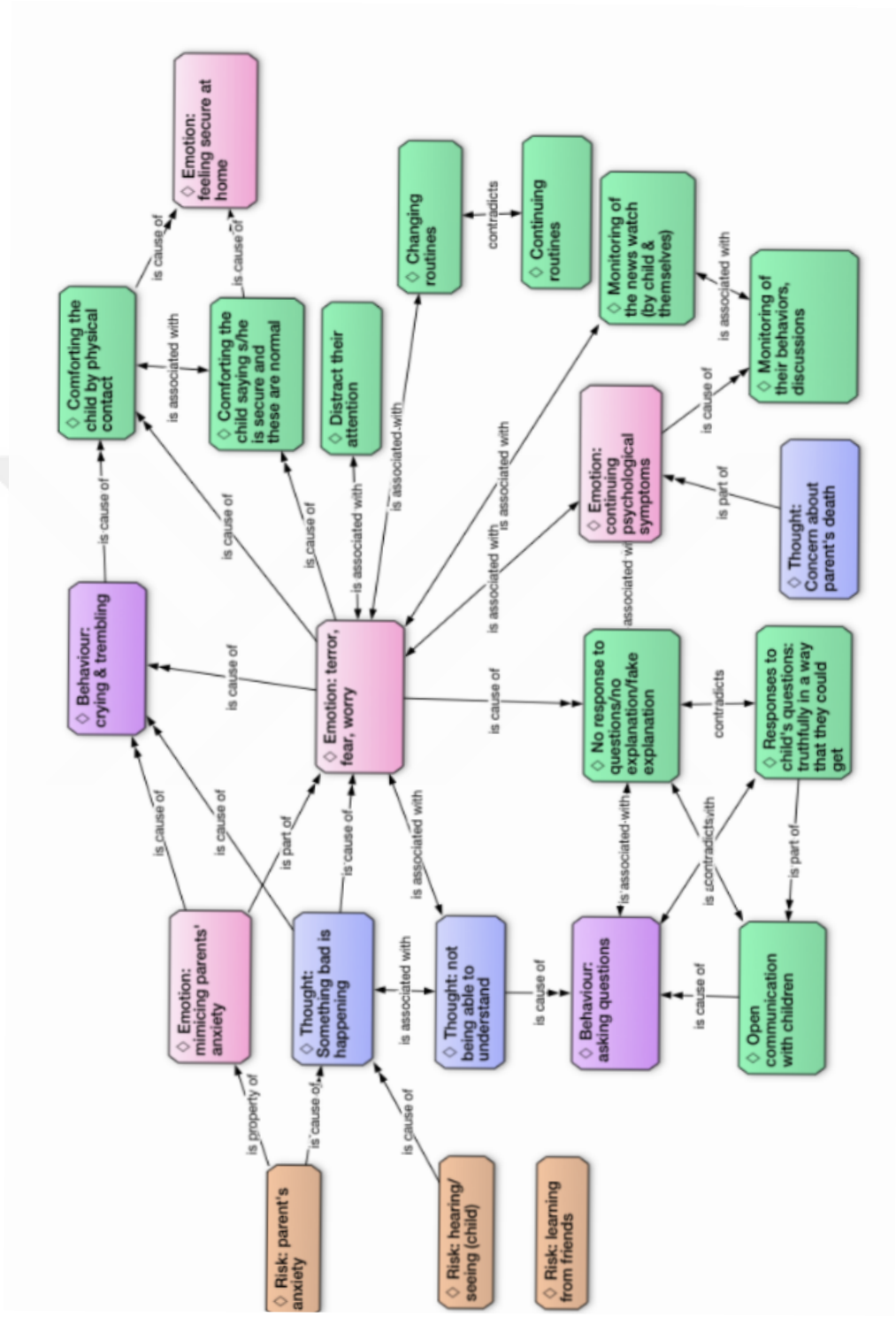
- D_MCOTA_Coping: Idea that you are not alone *(Idea that other people are also going through the same stuff)*
- D_MCOTA_Coping: Seeking/considering migration *(Like "Interest in moving abroad" in Part B)*
- D_MCOTA_Coping: Seeking/considering psychological help for children/themselves
- D_MCOTA_Coping: Self-calming *(Trying to calm herself)*
- D_MCOTA_Coping: Social support *(Getting social support from family/friends)*
- D_MCOTA_Coping: Talking *(Coping with the events talking to people)*
- D_MCOTA_Coping: Thinking about measures taken/or measures to take
- D_MCOTA_Coping: Thinking at least they could survive in such an environment

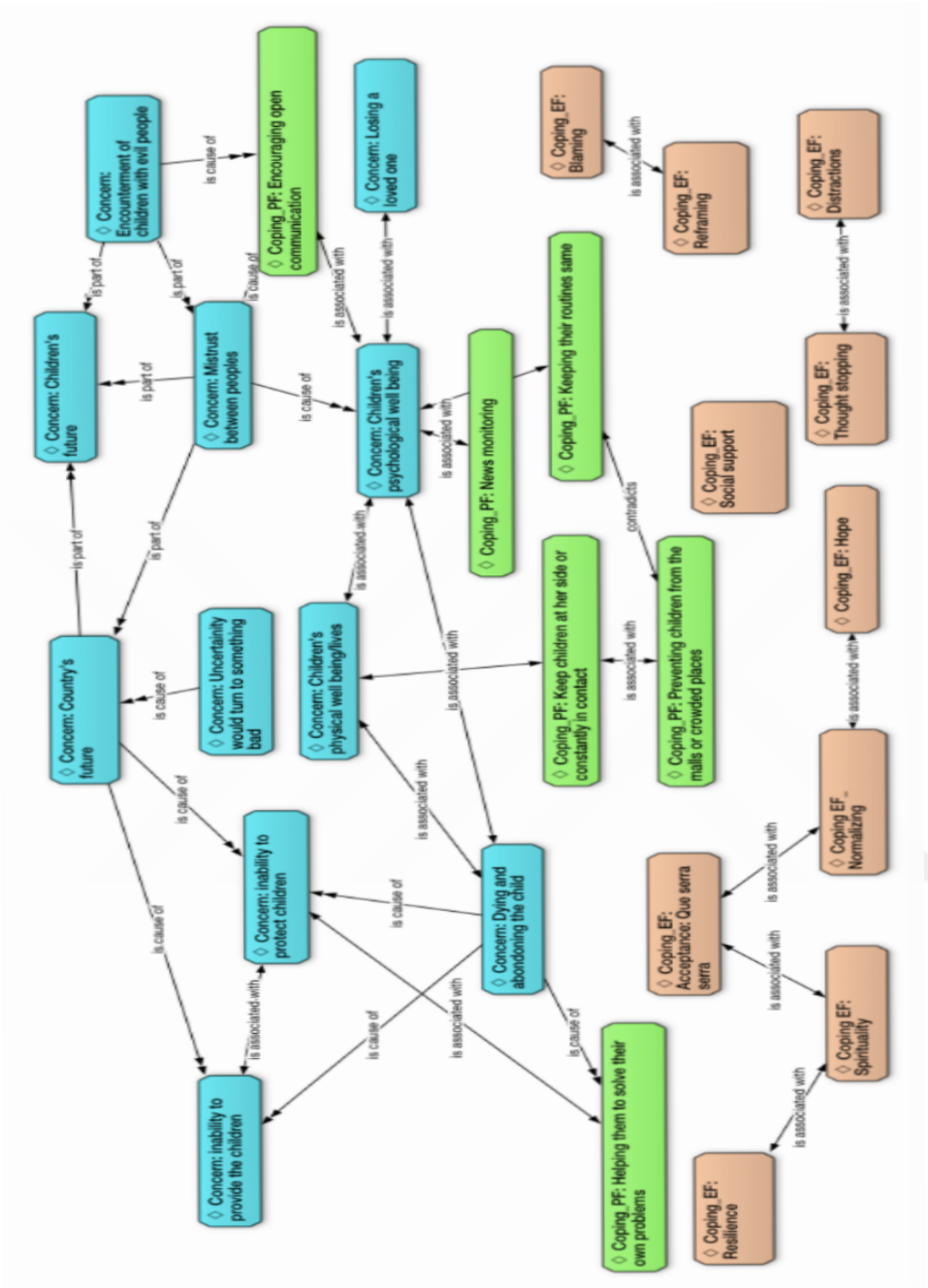
Appendix D: Atlas.ti Procedure Screen Shots



Appendix E: Concept Maps

◊ Behavior: Talking to friends
◊ Behavior: Trying to protect their children
◊ Behavior: finding ways to protect themselves
◊ Behavior: Not going to malls or crowded places
◊ News' affecting mothers
◊ Risk: Having children
◊ Thoughts: It could have been me
◊ Emotion: Feeling insecure
◊ Emotion: Worry and anxiety
◊ Thoughts: Mistrust to others
◊ Thoughts: Thinking migration
◊ Emotion: Survivor's guilt
◊ Thoughts: Continued Threat perception
◊ Trying to avoid details
◊ Risk: Hearing/ seeing
◊ Thoughts: Threat perception
◊ Emotion: Feeling incapable
◊ Behavior: Information seeking
◊ Risk: Proximity
◊ Risk: Proximity to the place: oneself
◊ Emotion: Shock & confusion
◊ Behavior: crying
◊ Thoughts: Thinking of survival by chance
◊ Risk: Proximity to the place: loved ones
◊ Emotion: Sorrow, worry, terror
◊ Thoughts: Thinking future might be worse
is part of
is associated with
is cause of
contradicts


◇ Emotion: feeling secure at home
◇ Comforting the child by physical contact
◇ Comforting the child saying s/he is secure and these are normal
◇ Distract their attention
◇ Changing routines
◇ Continuing routines
◇ Monitoring of the news watch (by child & themselves)
◇ Monitoring of their behaviors, discussions
◇ Behaviour: crying & trembling
◇ Emotion: terror, fear, worry
◇ Emotion: continuing psychological symptoms
◇ Thought: Concern about parent's death
◇ No response to questions/no explanation/fake explanation
◇ Responses to child's questions: truthfully in a way that they could get
◇ Emotion: mimicing parents' anxiety
◇ Thought: Something bad is happening
◇ Thought: not being able to understand
◇ Behaviour: asking questions
◇ Open communication with children
◇ Risk: parent's anxiety
◇ Risk: hearing/ seeing (child)
◇ Risk: learning from friends
is cause of
is associated with
contradicts
is part of
is property of


◊ Concern: Country's future
◊ Concern: Children's future
◊ Concern: Encountement of children with evil people
◊ Concern: Mistrust between peoples
◊ Concern: Uncertainity would turn to something bad
◊ Concern: inability to protect children
◊ Concern: inability to provide the children
◊ Concern: Children's psychological well being
◊ Concern: Losing a loved one
◊ Concern: Children's physical well being/lives
◊ Concern: Dying and abondoning the child
◊ Coping_PF: Encouraging open communication
◊ Coping_PF: News monitoring
◊ Coping_PF: Keeping their routines same
◊ Coping_PF: Keep children at her side or constantly in contact
◊ Coping_PF: Preventing children from the malls or crowded places
◊ Coping_PF: Helping them to solve their own problems
◊ Coping_EF: Blaming
◊ Coping_EF: Reframing
◊ Coping_EF: Social support
◊ Coping_EF: Distractions
◊ Coping_EF: Thought stopping
◊ Coping_EF: Hope
◊ Coping_EF: Normalizing
◊ Coping_EF: Acceptance: Que serra serra
◊ Coping_EF: Spirituality
◊ Coping_EF: Resilience
is part of
is cause of
is associated with
contradicts

Appendix F: Ethics Committee Permission

UYGULAMALI ETİK ARAŞTIRMA MERKEZİ
APPLIED ETHICS RESEARCH CENTER

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Sayı: 28620816/090

08 ŞUBAT 2017

Konu: Değerlendirme Sonucu

Gönderen: ODTÜ İnsan Araştırmaları Etik Kurulu (İAEK)

İlgi: İnsan Araştırmaları Etik Kurulu Başvurusu

Sayın Prof. Dr. Özgür ERDUR BAKER;

Danışmanlığını yaptığınız yüksek lisans öğrencisi Meryem GÖKYAR' ın ***"Zor Zamanlarda Annelik: Toplumsal Travmalar Karşısında Annelerin Çocuklarıyla ilgili Endişeleri ve Başa Çıkma Deneyimleri"*** başlıklı araştırması İnsan Araştırmaları Etik Kurulu tarafından uygun görülerek gerekli onay **2017-EGT-013** protokol numarası ile **07.02.2017 – 30.10.2017** tarihleri arasında geçerli olmak üzere verilmiştir.

Bilgilerinize saygılarımla sunarım.

Prof. Dr. Canan SÜMER
İnsan Araştırmaları Etik Kurulu Başkanı

Prof. Dr. Mehmet UTKU
İAEK Üyesi

Prof. Dr. Ayhan SOL
İAEK Üyesi

Prof. Dr. Ayhan Gürbüz DEMİR
İAEK Üyesi

Doç. Dr. Yaşar KONDAKÇI
İAEK Üyesi

Yrd. Doç. Dr. Pınar KAYGAN
İAEK Üyesi

Yrd. Doç. Dr. Emre SELÇUK
İAEK Üyesi

Appendix H: Turkish Summary /Türkçe Özet

Zor Zamanlarda Annelik: Annelerin Türkiye'deki Terör Saldırılarına İlişkin Tepkileri, Kaygıları ve Başa Çıkmaları Üzerine Bir Olgubilim Çalışması

Terör saldırıları, bireysel ve kolektif düzeyde toplumu etkileyen insan kaynaklı afetlerin içerisinde yer alır. Bu saldırıların, insanlar üzerinde, anksiyete, stres, korku gibi travma etkilerinin yanı sıra Travma Sonrası Stres Bozukluğu (TSSB) gibi çok ciddi psikolojik etkileri olabilmektedir. Öte yandan terör saldırısına doğrudan maruz kalmamış insanları da toplumsal travma yaratarak toplumsal kimlik üzerinden etkileyebilmekte; (Shipilova, 2004; Alexander & Dromi, 2011; Procevska, Kaprans & Uzule, 2011, Baelo-Allué, 2012; Janoff-Bulman & Sheikh, 2006) hatta toplumun güvende olma hissini ve insan doğasının iyiliğine olan inancını da yıkmaktadır (Abo & Zalsman, 2003; Mathewson, 2004; Abu-Ras & Abu-Bader, 2008). Terör saldırılarının psikolojik ve fizyolojik etkileri bir süreç olarak devam etmekte kişinin biyolojik ve psikolojik özellikleri, geçmiş deneyimleri, yaşanan diğer olaylardan olumsuz etkilendiği takdirde yaşanan travma ya da travmalar zamanla ağırlaşarak kişide TSSB gelişebilmektedir (McFarlene, 2011). İlgili alan yazınında TSSB özellikle klinik psikolog ve psikiyatristlerce sıklıkla çalışılmasına rağmen, toplumda etkilenmiş ama psikopatoloji geliştirmemiş gruplar genellikle gözardı edilmiştir. Terör olaylarının potansiyel olumsuzlukları göz önünde bulundurularak, dolaylı olarak maruz kalan insanlar psikopatoloji geliştirmeseler dahi mental sağlık uzmanlarınca dikkate alınmalı, bu alandaki çalışmalara önem verilmelidir.

Terör saldırıları ile ilgili bir diğer problem de terör stresidir. Terör stresi, belli bir süreç boyunca devam eden ve süregiden strese bağlı mental ve fiziksel pek çok sağlık sorununa sebep olabilen bir tür olduğu için bu stresle yaşamak zordur (Zakowski, Hall & Baum, 1992; Baker & Kevorklan, 1995; Bleich, Gelkopt, Malemed & Solomon, 2006). Örneğin, teröre maruz kalan kimi toplumlarda, jinekolojik sağlık da dahil olmak üzere kadın sağlığı ve stres arasında bir ilişkinin olduğu öne sürülmüştür (Cwikel & Segal-Engelchin, 2005; Chaaya, Bogner, Gallo & Leaf, 2003; Glover, Novakovic & Hunter, 2002). Bu tarz saldırıların doğası gereği zamanlama ve gerçekleşme şeklindeki

muğlaklık, insanların risk ve tehdit algısını arttırdığı düşünülmektedir. İnsanların çevrelerinde kendilerine bağımlı bakım ihtiyacı olan diğer kişilerin olması durumunda risk ve tehdit algısının daha da artması beklendik bir sonuçtur. Bu noktada pek çok çalışma geleneksel rollerinin de etkisiyle önemli bir bakım-veren grubu olan annelerin özellikle dikkate alınması gerektiğini vurgulamaktadır (Örn. Baker & Kevorklan, 1995; Baca, Baca-Garcia, Perez-Rodrig & Cubanas, 2004; DiGrande et al, 2008; Raveis et al, 2010; Dekel, 2010). Dahası, 60 hanede yaptıkları çalışmada Baker ve Kervoklan (1995) annelerin babalardan iki kat daha yüksek oranda depresyon ve anksiyeteye sahip olduğunu göstermiştir. Ek olarak, ebeveyn tepkileri olayın doğal ya da insan kaynaklı bir afet olmasından bağımsız olarak çocukların tepkilerini etkilediği için ayrıca önemlidir (Gil-Rivas & Kilmer, 2003; Hamblen, 2002; Lee, Isaac & Janca, 2002). Örneğin, çocukların ve ergenlerin stres düzeylerinin anne babalarının stres düzeylerinden farklı şekilde etkilendiği savunulmaktadır (Agaibi & Wilson, 2005). Agaibi ve Wilson (2005) çalışmasında çocuklar ve ergenlerin babalarının stres seviyelerini içselleştirdiklerini fakat travmalar karşısında tepki verme şekillerinin ise annelerin başa çıkma sitilleri ve rollerinden etkilendiğini ortaya çıkarmıştır. Bu açıdan, annelerin terör stresiyle başa çıkma alışkanlıkları ve sergiledikleri roller çalışılması gereken önemli bir konudur. Dahası, ebeveynlerin kendi stresleri ile baş etmenin ötesinde, çocuklarına terör olayları ile başa çıkmada yardım etmeye çalıştıkları belirtilmiştir (Shamai, 2001; Dekel, 2004; Warria, 2016). Dolayısıyla, annelerin terör stresi ile nasıl başa çıktıları ve çocuklarına nasıl yardım ettikleri teröre maruz kalan toplumlar için önemli ve pratik bir sorudur. Ek olarak, anneler yetişkin başa çıkma yöntemlerini kendi bakım-verenlerinden, başka bir deyişle annelerinden ve diğer kadın akrabalarından öğrenmektedirler (Cwikel, Segal-Engelchin & Mendlinger, 2010). Bu sebeple, eğer annelerin bu stresle başa çıkma pratikleri ciddi şekilde ele alınmazsa, işe yaramayan başa çıkma mekanizmalarının kısır döngü şeklinde devam edebileceği öngörülmelidir.

Bu noktada ilgili alanyazını ebeveynlerin verdiği bazı ortak tepkilerden bahsetmektedir. Bunların bazıları stresle başa çıkma noktasında yararlı, bazıları ise durumu daha da kötüleştiren tepkilerdir. Örneğin, Cohen ve Eid (2007) terör saldırılarını tartışmanın, duyguları paylaşmanın ve dışarı çıkmak gibi gündelik rutinlerde yapılan kısıtlamaların Arap ve Yahudi gençlerinde yüksek stresle ilişkili olduğunu göstermiştir. Fakat ortaya

çıkarılan bu bağlantı ile doğrudan sebep-sonuç ilişkisi öne sürülemeyeceğinden, bunun bazı ebeveynlerin halihazırda travmatize olduğunu gördükleri çocuklarıyla tartışma ihtiyacından da kaynaklanmış olabileceği şeklinde yorumlanmıştır (Cohen & Eid, 2007). Yine de alanyazınına göre günlük rutinlerin devam ettirilmesi yaşanan travmatik olay sonrası normalleşme açısından önemlidir: İsrailli gençlerle yapılan bir başka çalışmada, ebeveynlerin çocuklarını yaşam rutinlerine geri döndürmeye teşvik etmesinin çocukların yaşadıkları stresle başa çıkmalarında yardımcı olduğu belirtilmiştir (Horenczyk, Schiff & Doppelt, 2006). Ayrıca, ebeveynlerin genellikle beklendik rollerine ve günlük rutinlerine dönerek ve çocuklarıyla konuşarak çocuklarını desteklemeye ve kaybettikleri güvenlik hissini yeniden kurmaya çalıştıkları öne sürülmektedir (Hafstad, Haavind & Jensen, 2012). Özellikle 11 Eylül sonrası ABD, 2005 saldırıları sonrası Lübnan, İsrail gibi dünyanın farklı bölgelerinde meydana gelen terör saldırılarından sonra negatif ve kısıtlayıcı şekilde yapılan gündelik rutinlerdeki değişikliklerin insanlar üzerindeki etkileri (Grewal, 2006; Borell, 2008; Klar, Zakay & Sharvit 2002; Moscardino, Axia, Scrimin & Capello, 2006) ve annelerin bu durumla başa çıkma yöntemleri araştırmaya değerdir.

Bir diğer önemli nokta ise, Comer ve arkadaşları (2008) tarafından "ikinci elden terörizm" olarak adlandırılan medya yoluyla travmatizasyondan çocuklarını korumak için ebeveynlerin aldıkları önlemlerdir. Alanyazınında, bu şekilde medyaya bağlı olarak hem yetişkinlerin ve çocukların travmatizasyonundan bahsedilmektedir (Wayment, 2004; Ben-Zur-Gil ve Shamshins, 2012). Bu durumun önüne geçilmesi amacıyla, bazı araştırmacılar tarafından çocukların medya takibinin ebeveynler tarafından denetlenmesi ve ebeveynin çocuğuna yardım için duygusal yanıt verebilirliğinin yüksek olması gerektiği öne sürülmüştür (Lee, Isacc & Janca, 2002). Alınan bu tedbir özellikle çocukların sağalması ve bakım verenin çocuğu güvende ve korunuyor olduğunu temin edeceği ortam açısından gereklidir. Bakım verenin sağlayacağı desteğin yanı sıra diğer aile üyeleri, arkadaşlar, akranlar, komşular ve din adamları, pedagog ve pediatristler gibi profesyonellerden oluşan meslek elemanlarının sağlayacağı destek sistemlerinin işlevsel hale getirilmesi çok önemlidir (Bassuk, Konnath & Volk, 2006).

Terör stresiyle baş etme mekanizmaları incelendiğinde bazıları duygusal odaklı başa çıkma yöntemlerinin erkeklerden çok kadınlar tarafından kullanıldığını öne sürmesine rağmen (Blalock & Joiner, 2000), bazıları ise çalışmalarında erkeklerin daha çok

duygusal odaklı başa çıkma kullandığını bulmuştur (Ben-Zur & Zeidner, 1996). Yine de yakın tarihli makalelerden birinde de tartışıldığı üzere İsrail'de süregelen durum, terörle başa çıkmanın dinamik ve interaktif doğasından dolayı, insanları birden fazla başa çıkma mekanizması kullanmaya ve bunları birleştirmeye yöneltmiştir (Cohen-Louck & Ben-David, 2017).

Alanyazınında 11 Eylül sonrası Amerikan halkından ya da İsrail-Filistin çatışmasından ve süregelen savaş ve terörden dolayı İsrail toplumundan elde edilen verilerle yapılmış çalışmalar ağırlıklı olarak yer almaktadır. Özellikle 2015'ten bu yana Ankara ve İstanbul'daki şehir terör saldırıları, ülkenin doğusunda devam eden terör olayları ve Suriye sivil savaşı dolayısıyla gelen kontrolsüz göç sebebiyle Türkiye'de yapılan ve yapılacak olan çalışmalar önem kazanmaktadır. Dolayısıyla, bu çalışma Türkiye bağlamında aşağıdaki sorulara cevap vermeye çalışmaktadır:

1. Özellikle 2015'ten bu yana Türkiye'de yaşanan terör saldırılarıyla ilgili olarak, annelerin deneyimleri nelerdir?
2. Özellikle 2015'ten bu yana Türkiye'de yaşanan terör saldırıları ile ilgili olarak, annelerin gözünden çocukların terör deneyimleri nelerdir?
3. Annelerin terör saldırıları ile ilgili endişeleri nelerdir?
4. Anneler bu terör saldırılara yönelik endişeleri ile nasıl başa çıkmaktadırlar?

Yöntem

Katılımcılar

Bu nitel çalışma, 3-15 yaşları arasında en az bir çocuğu olan 21 anne ile yapılan mülakatlara dayanmaktadır. Annelerle, özellikle 2015'ten bu yana Türkiye'de meydana gelen saldırılarla ilgili olarak; tepkileri, deneyimleri, duyguları, endişeleri ve başa çıkma yöntemlerine ilişkin sorular üzerinden mülakat yapılmıştır. Mülakatın içeriği ve ülkenin içinde bulunduğu politik iklim insanları terör olayları gibi konulardaki deneyimlerini paylaşmadan önce karşıdakine güvenmeye ittiği için kartopu yöntemi kullanılmıştır. Annelerin yaşları 30 ile 46 arasında değişmektedir ve ortalaması 38'dir. Annelerin, 13'ü bir işte günde en az sekiz saat çalışmakta, 14 tanesi ise çocuklarıyla ilgili bakım desteği almaktadır. Annelerin altısı lise, yedisi lisans ve sekizi de yüksek lisans ve üstü seviyelerde eğitim almış ya da almaktadır. Daha düşük eğitim seviyesindeki kadınlara ulaşılmaya çalışılmış olmasına rağmen, bu kadınlar sosyal çalışmalara olan güvensizliklerini sebep göstererek çalışmada yer almayı reddetmişlerdir.

Katılımcılardan sadece bir tanesinin üç çocuğu vardır ve dokuzu iki çocuk sahibi iken, kalan dokuzunun ise tek çocuğu vardır. Annelerden yaşa bağlı gelişimsel farklılıkları dengeli şekilde dağıtılmış toplam 30 çocuk hakkında bilgi alınmıştır. Tüm annelere anonimlik sebebiyle uydurma isimler verilmiştir.

Araçlar ve veri toplama

Veri toplamaya başlanmadan, yarı yapılandırılmış mülakat formu ve olası yan soruları uzmanlara ve etik komiteye gönderilmiştir. Mülakat soruları, katılımcı ile arada bir güven ilişkisi oluşturmaya ve annenin, anne-çocuk ilişkisi üzerindeki algısını anlamaya yardımcı olacak bir başlangıç bölümüne sahiptir. Bunun yanı sıra, annelerin terör deneyimi, annelerin çocuklarının terör deneyimi algıları ve buna nasıl tepki verdikleri ile annelerin endişeleri ve başa çıkmaları ile ilgili üç ana bölüm daha vardır. Bütün mülakatlar izin formunun sözlü bir sunuşu ile başlayıp, görüşme sonrası genel bilgilendirme bölümü ile sona ermektedir.

Veri toplama aşamasından sonra katılımcıların psikolojik yardım talebinde bulunması durumunda ilgili yerlere yönlendirmelerin yapılabilmesi için gerekli ön hazırlıklar yapılmıştır. Ortalama 45 dk ile 120 dk arasında süren, yüz yüze veya telefon mülakatları yapılmıştır. Çalışma esnasında katılımcılar tarafından genelde ses kaydı alınmasına izin verilmiştir. Çok az katılımcı sadece not-alınmasını tercih ettiğini ve çalışmaya ancak bu şartla destek vereceğini belirttiğinden sadece not alınarak çalışma tamamlanmıştır. Bu katılımcılarla bilgisayarda eş zamanlı notlar alınmış ve sonrasında katılımcıya alınan notlar okunmuştur. Ses kayıtları ise görüşmeci tarafından yazıya dökülmüş ve görüşme süresince kaydedilen yapılandırılmamış gözlemler de analize eklenmiştir.

Veri analizi

Yazıya dökülmüş ve anonimleştirilmiş görüşmeler, nitel veri analizi programı Atlas.ti'nin Mac versiyonu ile analiz edilmiştir. Veri görüşmecinin kendisi tarafından in-vivo ve tanımlayıcı olarak kodlanmış ve diğer kodlayıcı tarafından kullanılacak başlıkları ve kod kitapçığı oluşturulmuştur. Kod kitapçığını temel alarak, diğer kodlayıcı verileri kodlamış ve iki kodlayıcı bir araya gelerek sonuçları tartışmıştır. Kodlayıcılar arası güvenilirlik Kappa değeri .98 ve standart sapma .003 olarak hesaplanmıştır. Sonrasında başlıklar tez danışmanı ile birlikte kod ormanında yeniden

düzenlenmiştir. Kodlar arasındaki ilişkiler kod ormanında görüşmede geçtikleri sürece işaretlenmiş ve böylece araştırmacı tarafından kavram haritalarının oluşturulması sağlanmıştır.

Sonuçlar

Annelerin terör deneyimleri

Annelerin terör deneyimleri üç kategori altında gruplanmıştır: (1) risk faktörleri (2) anneleri etkileyen haberler ve (3) annelerin yanıtları/tepkileri. İlk olarak hiçbir anne tarafından risk faktörlerinden bahsedilmemiş ama atlanmaması için görüşmeci tarafından açık bir şekilde sorulan "doğrudan maruz kalma"ya rastlanmamıştır. Buna rağmen, katılımcıların yarısının bir şekilde yaşamış olduğu "duyma ya da görme" ve çoğu katılımcı tarafından psikolojik ya da fiziksel anlamda bahsedilen "alana yakınlık" önemli risk faktörleri olarak değerlendirilmiştir. Alana yakınlıktan, psikolojik anlamında alana oldukça aşina olmak ya da olay sırasında, bazı ipuçlarını duyabilecek ya da görebilecek şekilde orada bulunmak şeklinde bahsedilmiştir. Çocuk sahibi olmak ise çocuğun yaşından bağımsız olarak bir risk faktörü oluşturmaktadır. Haberler, annelerin olayın şokunu ve şaşkınlıklarını atlatmakta kullandıkları önemli bir bilgi kaynağı olarak belirtilmiştir, yine de anneler gençlerin ölümleri, şehit haberleri ve çocukların hastalık ve ölüm haberlerinden oldukça etkilenmektedir.

Annelerin olaya yanıtları/tepkileri "ilk tepkiler" ve "gecikmiş tepkiler" olarak duygu, davranış ve düşünceler boyutlarında kodlanmıştır. İlk duygusal tepkilerden birincisi, özellikle katılımcıların %80'ince bahsedilen şok ve şaşkınlıktır:

> Şaşkınlık, benim ilk tepkim hep şaşkınlık oluyor zaten. Yani evet içindeyiz biliyoruz, yayımlanan şeyler var, uyarılar var, sağda solda şuraya gitmeyin böyle yapmayın sağda solda uyarı var. Hani fiziksel olarak kendimizi korumak adına. Ama aklıma gelen şaşkınlıktı. (ZEYNEP)

Bir diğer bahsi geçen tepki ise "aciz hissetme" dir ve annelerin yarıdan fazlası açık bir şekilde bunu şok ya da terör algısıyla ilintili olarak dile getirmiştir:

> Yapacak birşey yoktu o konuda, sadece telaşlı telaşlı etrafa bakmaktan başka, herkes bir panik içerisindeydi, otobüsün içinden çıkıp gidecek halimiz de yoktu. (EMİNE)

Keder, kaygı ve terör ise katılımcıların %90'ınca bahsedilen ilk duygusal tepki kodudur. Saldırıların, sesler, sarsıntı, medya üzerinden dahi olsa görsel imgeleri gibi fiziksel

bileşenleri anneleri oldukça etkilemiştir. Dünyanın sonunun geldiğini düşünmek, ertesi güne uyanamayacağını (öleceğini) düşünmek gibi ifadeler annelerin yüksek stres ve tehdit algısının göstergesi olarak yorumlanmıştır. Her ne kadar, mülakatlar başladığında en yakın olay olan darbe girişiminin üstünden altı ay geçmiş olmasına rağmen, annelerin olaylar hakkında konuşurken hala duygusallaştığı gözlemlenmiştir.

Ertelenmiş duygusal tepkiler açısından, güvensiz hissetme, devam eden kaygı, endişe ve son olarak hayatta kalma suçluluğundan bahsedilmiştir. Çoğu anne güvenlik duygularının saldırılarla yıkıldığını, olası saldırılar hakkındaki dedikodulara daha uyarılır hale geldiklerini ve tehdit algılarının arttığını böylece sonraki haftalarda da devam eden kaygı ve endişeye yol açtığını söylese de, hayatta kalma suçluluğundan sadece bir katılımcı bahsetmiştir. Her ne kadar batı kültürlerinde önemli bir kavram olsa da Erdur (2002) tarafından yapılan çalışmada da bahsedildiği üzere, Türk kültürel bağlamında bu şekilde bir duygusal tepki pek yer almamaktadır. Dolayısıyla, 21 anneden sadece bir tanesinin bahsettiği duygular hayatta kalma suçluluğu ile ilişkilendirilebilir:

> Böyle bir haber olduğunda ben vicdan azabı çekiyorum insanlar suçsuz yere ölünce, ben eğlenecek olsam eğlenemiyorum, ben bir tatlı dahi alıp yiyemiyorum, güzel bir yemek dahi istemiyorum. İçtiğim su bile vicdan azabı geliyor. Eğlence istemiyorum, o insanları düşünüyorum. Masum yere ölen insanları. (CEREN)

Erken davranışsal tepkiler ise genellikle erken duygusal tepkilerce ateşlenen bilgi arama, sevdiklerinin güvenliğini kontrol etme ve ağlama olarak listelenmiştir. Bilgi arama özellikle şok ve şaşkınlık ile ilişkili olarak görülmüş ve annelerin medyaya ile sosyal medyaya bağlı olarak ne olduğunu anlamaya çalışmasının bir sonucu olarak listelenmiştir:

> Hatırladığım önce sesi duyduk, sonra facebook gibi haber sayfaları gibi kaynaklara whatsapp grubunda kimse birşey biliyor mu duydu mu işte Kızılay'a daha yakın yaşayan arkadaşlardan bilgi edinmeye çalıştık ama nerede olduğu ya da ne olduğu, işte araç mıydı, kişi miydi, bina mıydı, neresi ne olduyu öğrendiğim kısmı çok hatırlamıyorum ama başvurduğum kaynakları hatırlıyorum, işte nerede nasıl bilgi edinebiliriz acaba diye. (ZEYNEP)

Dahası, gözlemlendiği üzere, internet medyası önemli bir bilgi kaynağıdır. Özellikle, cep telefonlarından da ulaşılabilmesi ve geleneksel medyanın sahip olduğu editörlük, sansür gibi basamaklara ihtiyaç duymadan hızlı ve doyurucu bilgiye ulaştırabilmesi

açısından oldukça kullanılışlıdır. Sevilen insanların güvenliğini kontrol etme ise genellikle bu bilgi arama davranışıyla ilişkili olarak ortaya çıkmakta ama sevilen kişinin alana yakınlığı asıl gösterge olarak sunulmaktadır:

> Bu Güvenparktaki olayda ben evdeydim, oğlum kurstaydı, patlamanın olayını ben duydum, oğlumu aradım neredesin diye dedim böyle bir olay var haberin var mı, var anne biliyorum dedi ve eve geldi…. (KARDELEN)

Son olarak ağlama davranışı, erken tepkilerden "keder, kaygı ve terör" ile ilişkili olarak görülmüştür. Bunun yanı sıra görsel imgeler annelerin ikincil travmatizasyonda bir rol oynamaktadır:

> Çok üzüldüğümü hatta ağladığımı hatırlıyorum. O patlamadaki görüntüleri gördüğümde basından ağladığımı hatırlıyorum. O insanların, küçük küçük videolar yayınlanmıştı, o sırada insanların orada olanların çektikleri videolardan, ağladığımı hatırlıyorum. (AHU)

Öte yandan, ertelenmiş duygusal tepkiler ise daha çok başa çıkma ve kendilerini koruyacak yöntemler bulmaya çalışma, alışveriş merkezlerine ve kalabalık yerlere gitmeme, çocuklarını korumaya çalışma, arkadaşlarla konuşma gibi önlem alma davranışlarıdır:

> Bir süre dışarı çıkmıyorsun, AVM'ler gibi kalabalık ortamlara girmedik, biraz daha koruyucu olmak durumunda kaldık, biz kendimiz gitmek durumunda kalsak bile kızımı annemlerde bıraktık. Dışarı çıkartmadık, o anlamda. Çünkü sonuçta olabilecek olan ölüm ya da yaralanma o anlamda. (SARA)

Düşünce tepkileri açısından ilk tepkiler tehdit algısı, şans eseri olarak yaşadığını düşünmek, sevdiği insanların orada olabileceğini düşünmek ve geleceğin kötü olabileceğini düşünmek şeklindedir. Bunların anksiyete ve korku tepkileriyle ilişkili olduğu düşünülebilir. Ertelenmiş tepkilerde ise tehdit algısının devam ettiği, başkalarına güvensizlik, detaylardan kaçınma, göç etmeyi düşünme ve yurt dışına gitmek için diğer seçenekleri araştırma ve son olarak da "o ben olabilirdim" şeklinde düşünme sayılabilir. En sık bahsedilen ise "o ben olabilirdim" kodudur:

> Yani, insan ölümün kendisine ne kadar yakın olduğunu hissediyor. Yani geçtim ve o an ben de oradan geçiyor olabilirdim. Ya da benim çocuğum da o gün orada olabilirdi. Sevdiğim bir insan orada olabilirdi. Hiç önemli değil zaten kaç tane annenin, kaç tane babanın canı yandı. Çok acı. Ve hiçbir suçu yok, hiçbir günahı yok, hiçbir şeyi yok... Çok üzülüyor insan, sonra kendi hayatınız bir şerit gibi etrafınızdan geçiyor. (AYŞE)

Özetle, annelerin hem ilk hem de ertelenmiş tepkileri onların terör saldırılarına bağlı olarak yüksek bir tehdit algısı, kaygı ve anksiyete yaşadığını göstermektedir. Bu ilerleyen kısımlarda bahsedileceği üzere çocukları ve annelerin çocukların tepkileri hakkındaki algılarını ve tepkilerini etkilemektedir.

Çocukların terör deneyimleri: annelerin gözlemleri

Çocukların deneyimleri bölümünün altında, risk faktörleri, annelerin gözünden çocukların tepkileri ve annelerin bu tepkilere verdikleri yanıtlar kodlanmıştır. Çocukların travmatizasyon riskinin bir parçası olarak, doğrudan maruz kalma, annelerin yarısınca bahsedilen görme ve duyma, 15 anne tarafından bahsedilen ebeveynlerin aksiyetesinden etkilenme ve annelerin yarısı tarafından bahsedilen arkadaşlarından duyma sayılmıştır. Benzer şekilde doğrudan maruz kalma açık bir şekilde sorulmuş ve hiçbir çocuğunun doğrudan maruz kalmadığı öğrenilmiştir. Çocukların tepkileri de duygu, davranış ve düşünce açısından analiz edilmiştir. Annelerce algılanan çocuğun duygusal tepkileri, terör, korku ve kaygı, devam eden psikolojik semptomlar, ebeveynin endişesini kopyalamak ve evde güvende hissetmektir. Bunların arasında en önemlisi anneler tarafından açık bir şekilde ifade edilmiş olan ebeveynin endişesini kopyalamaktır:

> Aslında oradaki şeyde bizim konuşmalarımızdan, endişelerimizden belki kaynaklı olarak o da bu anlamda korktu ve ağlamaya başladı, ne olduğunu anlamlandıramadığı için ister istemez kaygılandı. Biz de konuşmalarımıza dikkat ettik, onu oyuna yönlendirdik sonra süreci daha iyi atlattık, onu sakinleştirdik. Sonrasında soru sormadı ama ilk başta hani ne oluyor gibi soru sordu ona korkmaması gerektiğini söyledik. O ilk başta bizlere birşey mi olacak gibi bir kaygıya düştü. (SARA)

Davranışsal tepkiler açısından çocukların ağlaması ve titremesi ile çocukların soru sormasından sıklıkla bahsedilmiştir. Bu tepkiler açısından, özellikle annelerce çocukların konuşmaları temel alınarak bahsedileni ise kötü bir şeyin olduğunu düşünmek, tam olarak anlayamamak ve son olarak da anne-babanın ölümünden endişe duymaktır. Örneğin, bir anne çocuğunun olaylardan sonra annesinin ölümünü gördüğü kabuslarının başladığını söylemiştir ki bu mental sağlık profesyonelleri tarafından bir alarm olarak yorumlanabilir.

Annelerin çocuklarına tepkileri ise altı kod altında incelenmiştir (1) çocuğu rahatlatma (a) ona güvende olduğunu ve yaşananların normal olduğunu söylemek (b) sarılma, elini tutma gibi fiziksel bağlantı kurmak, (2) çocuğun ilgisini başka şeylere çekmek, (3) çocukla soru sorabileceği ve endişelerini açıklayabileceği şekilde açık bir iletişim içinde bulunmak (4) çocuğun sorularına cevap vermek (a) doğruyu söyleyerek (b) açıklama yapmayarak ya da uydurma cevaplar vererek (5) rutinler hakkında bir karara varma (a) rutinlere devam etmek (b) değiştirmek; ve son olarak (6) denetlemek (a) haberleri denetlemek (b) ebeveynlerin kendi davranışlarını denetlemeleri. Bu kodlar arasında, annelerin çocukların sorularına cevap vermedeki tutumları oldukça önemlidir: Çocukların sorularına açıklamada bulunmamak ya da uydurma açıklamalar vermek, örneğin patlama seslerinin havaii fişek olduğunu söylemek ya da üstlerinden uçan jet uçaklarının gösteri provası yaptığını söylemek küçük çocuklarda işe yarar görünse de , yaşça büyük çocukların bu açıklamaları reddettiği ortaya çıkmıştır. Dahası, özellikle de aşağıdaki örnekte görüldüğü şekliyle çocuklardaki tehdit algısını arttırabilmektedir:

> Jetler uçmaya başladığında ilk o sesleri duydu, anne ne oluyor, falan filan dedi, ben zaten hemen birtakım şeyler olduğunu anladım yani. Dedim ki oğlum işte jetler gösteri yapacak, prova yapıyorlar, ama tabii çok yakından uçmaya başladıklarında, işte şiddeti ve sesler artmaya başlayınca anlıyor birşey olduğunu, o zaman işte bana anne bunlar tatbikat değil dedi. …Sen dedi ben korkmayayım diye söylemiyorsun ama bu dedi Rusya'nın uçakları, Ruslar bizi öldürecek (KUBRA)

Son olarak, çocukların rutinlerin değişmesiyle ilgili olarak anneler çocuklarının rutinlerini değiştirmenin çocuğun psikolojisini olumsuz etkilediğini ve çocuğun cevaplamak istemeyecekleri sorularla geldiklerini gördüklerinde, genelde rutindeki davranışın daha az riskli versiyonunu yapma kararı aldıkları görülmektedir. Örneğin, konser salonunu değiştirerek, ama yine de daha az kalabalık ve daha az popüler konser salonlarında gösterilere giderek davranmaktadırlar. Bazı anneler çocuklarının rutinlere devam etmekten ve normalleştirmeden olumlu etkilendiklerini belirtmişlerdir:

> Baktı ki biz rutin hayatımıza devam ediyoruz, o da devam etti. İşte ertesi gün, oğlum markete gider misin dedim, hani dışarı çıkmayacaktık dedi. Yok oğlum yokmuş öyle birşey dedim. Biz normalleştirdik.(MELİKE)

Özetle, çocukların tepkileri hem annelerin tepkilerinden etkilenmekte hem de bu tepkileri etkilemektedir. Özellikle annelerin kaygılı ve paradoksal açıklamalarda bulunmaları çocukları daha kaygılı hale getirmektedir. Normalin dışında birşeyler olduğunu sezen ve ne olduğunu öğrenmek isteyen çocuklar için de bilgi aramak önemli

bir ihtiyaç olduğu için, annelerin de önemli bir bilgi kaynağı olduğu düşünülebilir. Bu açıdan, anneleri eğitecek önleyici ve müdahale programları yararlı olacaktır.

Annelerin terör saldırıları ile ilgili endişeleri

Annelerin endişeleri, terörle ilgili endişeler, gelecekle ilgili endişeler ve genel endişeler olmak üzere üç kategoriye ayrılmaktadır. Terörle ilgili endişeler çocukların fiziksel iyi oluşları ve hayatları, çocukların psikolojik iyi oluşları, sevilen birinin kaybı ve ölerek çocuğunu yalnız bırakmaktır. Katılımcıların %85'inden fazlası çocukların fiziksel iyi oluşlarından ve hayatlarından endişe duyduklarını açıklamıştır:

> Seninle konuşurken ben de farkettim, kendimi yakaladım aslında. Sanırım en çok korktuğum şey çocuğuma fiziksel olarak birşeylerin olması. Onun güvenliği.(JANSET)

> İlk önce çocuklarımın hayatta olmalarını, sağlıklarının yerinde olmasını istiyorum. Onların canlarına bir zarar gelmesini istemiyorum, en derin kaygım bu her zaman için … (AHU)

Çocukların psikolojik iyi oluşları da bu güvenlik endişesiyle birlikte gelen bir diğer önemli koddur:

> Tabii ki güvenlik kaygısı en temel endişem. Can güvenliklerine bir zarar gelmesi. Ondan sonra duygusal bütünlüklerine bir zarar gelmesi. Bir de ülkede Suriyeliler var, genel olarak güvenli değil. Çocuk istismarı felan duygusal olarak da insanlar çok etkileniyor dolayısıyla bir yerde psikolojik bütünlüklerine de zarar gelmesinden çok korkuyorum. (JULIDE)

"Eğer ölürsem çocuklarıma ne olacak" benzeri cümleler de genellikle ölerek çocuklarını yalnız bırakmakla ilgili kodun altında yer almaktadır:

> En büyük endişem, bana birşey olursa çocuklarım ne yapacak endişesiydi. Ya birgün bu şeyin içinde ben kalırsam çocuklarım ne olacak? Ya da böyle bir durumda çocuklarıma ulaşamazsam ne yaparım, endişesiydi. (AYSE)

Gelecekle ilgili endişeler arasında ise, çocukların gelecekleri, ülkenin geleceği, insanlar arasındaki güvensizlik ve belirsizliğin kötü bir şeye dönüşeceği ile ilgili endişeler en sık bahsedilenlerdendir. Özellikle kendileri de çevreye güvenmeyen anneler, insanlar arasındaki güvensizlik ikliminden rahatsız olduklarını ve bunun çocuklarının ileride sağlıklı ilişkiler kurmasına engel olabileceğinden endişe duyduklarını belirtmişlerdir:

> Yani bu kadar belirsizlik, bu kadar çok güvensizlik, insanlar arasında bu kadar çok kutuplaşma, yani siyasette olanları bir tarafa bıraksak bile toplumda insanların arasında bu kadar çok güvensizlik beni çok korkutuyor açıkçası.

> Yani, müslüman bir ülke, kimse kimseye güvenmiyor, öyle bir noktaya geldik ya da en azından bana öyle geliyor, herkes herkesten şüpheleniyor, kimse kimsenin kim olduğunu ne olduğunu tam olarak bilmiyor, ne yaptığını ne düşündüğünü, ve zaten insanlar haklı olarak biraz da konuşmaktan korkuyorlar, böyle bir ortamda yaşamak... (GULIN)

Son olarak, genel endişeler çocukların kötü niyetli insanlarla karşılaşmaları, çocuklarını koruyamamak ve çocuklarına bakamamak gibi üç kategoriye ayrılmaktadır. Özellikle çocukların çocuk kaçıranlar, uyuşturucu satıcıları, çocuk tacizcileri gibi kötü niyetli insanlarla karşılaşmaları süreğen bir tehdit olarak algılanmaktadır:

> Allah korusun her şey olabilir, güvenli bir zamanda yaşamıyoruz, her şey gelebilir başlarına, Allah korusun tecavüz olayı olabilir ki şu an kızı-erkeği yok bu işlerin. Kaçırılma olayı olabilir, ondan sonra artık insan kapı komşusuna bile şüphe ile bakar oldu. Yani öyle bir toplum olduk, öyle bir ülke haline geldik, maalesef. (KUBRA)

Kısacası, annelerin bu endişeleri ile nasıl başa çıktıkları önemli bir konudur çünkü bu onların hayatlarında süreğen bir strese yol açarak, annelerin hem mental hem de fiziksel hayatlarını etkileyebilmektedir.

Annelerin başa çıkmaları

Annelerin hem problem odaklı hem de duygusal odaklı başa çıkma kullandıkları görülmüştür. Yine de, verilerimiz annelerin çocukları ile ilgili onları koruyamamak veya onlara bakamamak, ölerek onları yalnız bırakmak, çocukların fiziksel ve psikolojik iyi oluşları gibi endişelerinde problem odaklı başa çıkma kullanma eğiliminde olduklarını belirtmektedir. Dolayısıyla, annelerin problem odaklı başa çıkmaları çocuklarını fiziksel ve psikolojik olarak korumak ve çocuklarını güçlendirmek üzerine kurulmuştur. Çocuklarını fiziksel olarak korumak için anneler onları yanlarında tutmak ve riskli olarak algıladıkları alışveriş merkezleri ve benzeri kalabalık yerlere gitmelerini engellemek şeklinde davranışlarda bulunmaktadırlar. Psikolojik olarak çocukları korumak adına da genellikle çocukların rutinlerini aynı tutmak ve haberleri izlemelerini denetlemeye çalışmak sayılabilir. Çocuklarını güçlendirmek adına anneler onları açık bir iletişime teşvik ettiklerini ve sorunlarını kendilerinin çözmesine yardım ettiklerini belirtmişlerdir. Bu kodların içerisinde, %80 oranıyla tüm yaşlardan çocukların anneleri, çocuklarını kalabalık yerlerden koruduklarını, yine de bunları düşünmek zorunda olmanın açık bir şekilde onlarda duygusal strese sebep olduğunu belirtmişlerdir:

> Kolay değil tabii ki, kendini ve çocuğunu bir şekilde yaşamsal durumdan, tehdit altına düşürmeden yaşayabilmek kolay değil bu ortamda. Yine de elimizden geldiği kadar dikkat etmeye çalışıyoruz, kalabalık ortamlardan uzak duracak şekilde, çok fazla şehir içine gitmeyecek şekilde, uzak duracak şekilde, kendimizi korumaya çalışıyoruz. Yani fiziksel olarak kalabalık bir yerde bulunmamak dışında bir önlem alamıyorum yani ne yapabilirim onun dışında diye düşündüğümde de pek sanmıyorum başka birşey yapabileceğimi, ancak bu şekilde bir önlem alabiliyorum, riskli ortamlardan uzak duracak şekilde bir tavır dışında başka bir önlem alamıyoruz (ZEYNEP).

Öte yandan, terör saldırılarının oluşturduğu stresten kurtulmak adına, anneler daha kabullenme, normalleştirme, ilgisini dağıtma, düşüncesini durdurma, maneviyat, aile, arkadaş ve profesyonellerden sosyal destek, yeniden çerçevelendirme ve suçlama, umut ve psikolojik sağlamlık gibi duygusal odaklı başa çıkma yöntemlerini kullanmaktadırlar.

Özetle, 21 anneden 30 anne-çocuk ikilisine ilişkin edinilen veriler ilgili alan yazınında ortaya koyulan sonuçlar ile oldukça paraleldir. Ayrıca, terör olaylarının, Türkiye'deki annelerin yüksek terör-tehditi algısına ve yüksek güvenlik/terörle ilintili strese sebep olduklarını göstermektedir. Dolayısıyla, bu konunun profesyoneller, politika yapıcılar ve akademisyenlere ilişkin bazı yansımaları olacaktır.

Tartışma

Alanyazınındaki sonuçlarla (Wayment, 2004; Ben-Zur-Gil and Shamshins, 2012) örtüşen mevcut araştırmadaki bulgular, dolaylı maruz kalmanın bile insanları terör tehditi ve travma açısından etkilediğini göstermektedir. Gelkopf ve arkadaşlarının önerdiği üzere, terör alanına yakınlık önemli bir risk faktörüdür. Halihazırdaki çalışma kapsamında yapılan görüşmelerde ortaya çıkan durumda, fiziksel olarak yakın olmanın ötesinde algılanan psikolojik bir yakınlığın, yani o alana aşina olmak ve alanda sıklıkla bulunmanın da bir risk faktörü olarak algılandığı gözlemlenmiştir. Buna ek olarak, terör stresi insanların psikolojik ve fiziksel iyiliklerini etkileyen devamlı bir durum olduğundan (Zakowski, Hall & Baum, 1992; Baker & Kevorklan, 1995; Bleich, Gelkopt, Malemed & Solomon, 2006), tüm stres mağdurlarının ve bu çalışmanın

katılımcılarını oluşturan Türkiye'deki annelerin de dikkatle ele alınmaları gerekmektedir.

Bu kapsamda çalışma bulgularından yola çıkarak oluşturulmuş ve aşağıda liste olarak sunulan öneriler konuyla ilgili tüm tarafların bilgilerine sunulmaktadır.

Psikolojik danışmanları ve okul psikologlarını da içerecek şekilde, Türkiye'deki mental sağlık profesyonelleri, terör kaynaklı stresi gözardı edemez ve terör konularını çalışmak durumundadırlar. Bu sebeple, kendileri için tasarlanmış eğitim programlarına katılabilir, kendilerini eğitmek konusunda ilgili davranabilir ve bağlı oldukları dernek, vakıf gibi kuruluşlardan bu tarz programlar ve atölyeler hazırlamaları ve fonlamaları için talepte bulunabilirler. Okul müfredatlarında terör stresi ve travması, kriz sonrası kişilere yardım üzerine seçmeli dersler koyulabilir. Mental sağlık çalışanları bu tarz önleyici ve müdahale programlarında çalışabilirler.

Politika yapıcıların rolü mental sağlık profesyonelleri ve akademisyenlerle bu önleyici ve müdahale programlarında iş birliği ile başlayabilir. Özellikle, sağlık çalışanları, okullardaki öğretmenler, polis memurları gibi kamu personelini eğitmek yararlı olabilir. Dahası, verilerden gözlemlendiği kadarıyla bu olaylar sırasında ve sonrasında açık ve doyurucu bilgiye ihtiyaç olduğundan, yüksek bürokratlar ve politikacılar bu tarz bilgileri doğru ve etkileyici şekilde verebilmelidir.

Son olarak, mevcut çalışma genellikle şehirli, çalışan ve yüksek eğitimli kadınlardan elde edilmiştir. Çalışmanın bu kısıtı dikkate alındığında daha düşük eğitim seviyesine sahip, kırsal kesimden ya da ülkenin farlı bölgelerinde ikamet eden annelerin yanı sıra, babalar ya da aile içinde diğer bakım-verenlere yönelik yapılacak çalışmalar ilgili alana katkı sunma potansiyeline sahiptir. Bunun ötesinde, alanyazınıza en çok katkı sağlamış Amerika ve İsrail gibi ülkelerle iş birliği bilgiyi arttıracağı gibi bu müdahale/önleyici programlarının mental sağlık açısından etkinliğini de arttırabilir.

Appendix G: Tez Fotokopisi İzin Formu

ENSTİTÜ

Fen Bilimleri Enstitüsü ☐

Sosyal Bilimler Enstitüsü ■

Uygulamalı Matematik Enstitüsü ☐

Enformatik Enstitüsü ☐

Deniz Bilimleri Enstitüsü ☐

YAZARIN

Soyadı : GÖKYAR
Adı : MERYEM
Bölümü : EĞİTİM BİLİMLERİ

TEZİN ADI (İngilizce): MOTHERHOOD IN HARD TIMES: PHENOMENOLOGICAL STUDY ON MOTHERS' RESPONSES, CONCERNS AND COPING IN RELATION TO TERRORIST ATTACKS IN TURKEY

TEZİN TÜRÜ: Yüksek Lisans ■ Doktora ☐

1. Tezimin tamamından kaynak gösterilmek şartıyla fotokopi alınabilir. ☐
2. Tezimin içindekiler sayfası, özet, indeks sayfalarından ve/veya bir bölümünden kaynak gösterilmek şartıyla fotokopi alınabilir. ☐
3. Tezimden bir (1) yıl süreyle fotokopi alınamaz. ■

TEZİN KÜTÜPHANEYE TESLİM TARİHİ: