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Multi-centered project: Health consequences of SED-injustice



Gesundheitliche Langzeitfolgen
von SED-Unrecht
Verbundprojekt
Jena Leipzig Magdeburg Rostock

Background

Repression in the GDR^{1,2}

- The *German Democratic Republic* (GDR; 1949 – 1990) was an authoritarian state strongly influenced by the Soviet Union
- The Ministry of State Security kept the population under surveillance and acted repressively towards (perceived) oppositional groups and individuals
- Other than imprisonment, political repression methods in the GDR included *covert „quiet“ measures* to avoid arousing international attention

Main criteria of quiet/non-criminal repression¹

- Anonymous
- Person-centered

Long-term consequences^{3,4,5}

- *Physiological and psychological* health consequences in victims (e.g., anxiety disorders, Depression, PTSD, addiction, sleeplessness)
- Psychosocial consequences: lower social support, lower socioeconomic status, higher interpersonal problems

Example Measures¹

- Systematic discrediting of public reputation
- Organizing social and professional failures
- Using anonymous phone calls, letters, or compromising photos
- Summoning of individuals to government agencies
- Causing mistrust and suspicion within groups and organizations

Hypothesis: Long-term health consequences in victims of political repression are associated with dysregulations in the stress system

„How severely deep this insecurity, this humane insecurity, this loss of trust is. (...) I cannot enter relationships with other people above a certain degree of intimacy. That's completely clear, it just doesn't work. I mean, not because I would not want to / it doesn't work (...). And I see this in every one [of us].“
(Anonymous informant #2, 16-02-2023)

Discussion

Non criminal repression shares main mechanisms of *severe chronic stressors*^{6,7}:

- Uncontrollability
- Anticipatory anxiety
- Uncertainty
- Social / Ego threat
- Shame induction

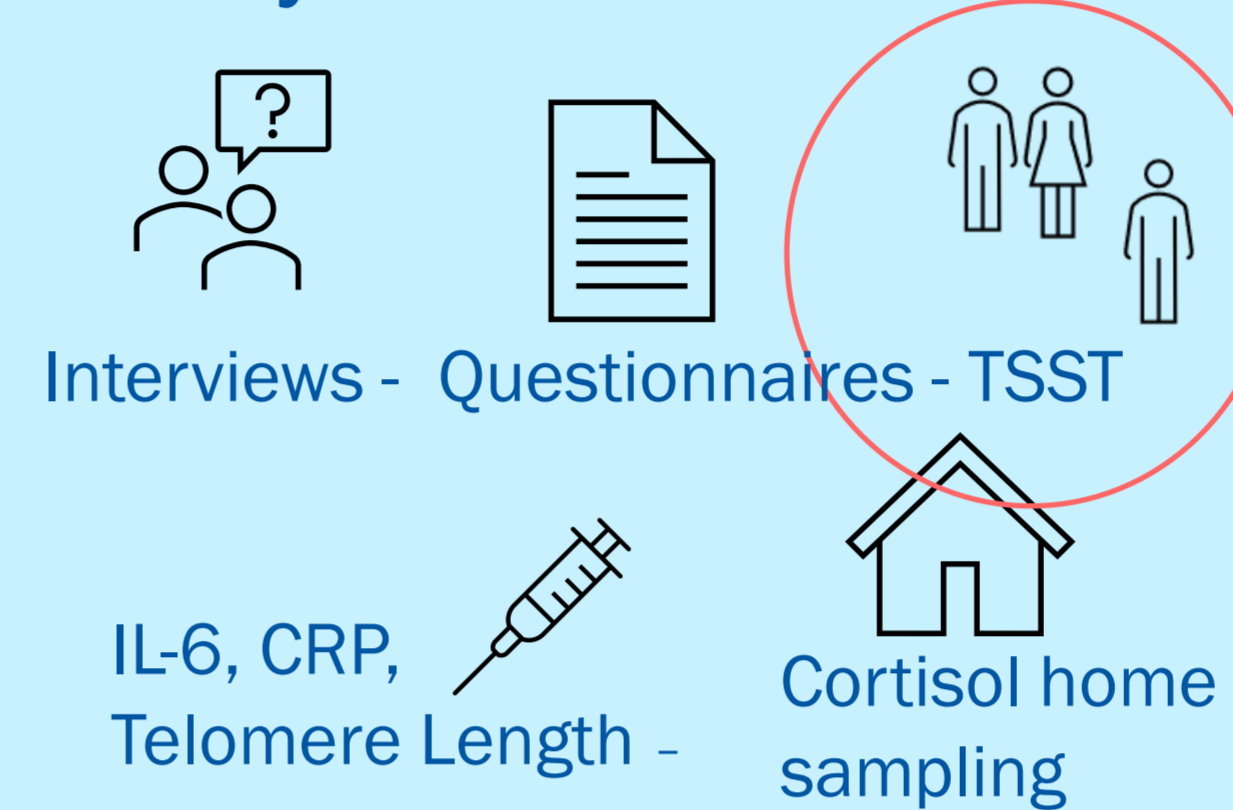
Stress system seems dysregulated even years after experience

Relevant for proper health care, acknowledgement and rehabilitation of former and future victims of repression

Methods

Target sample (N = 100):
Repression group: n = 50
Control group: n = 50
(matched for age, gender & origin)

Study Parts:



Trier Social Stress Test⁸
9 x Cortisol
9 x Subjective Stress

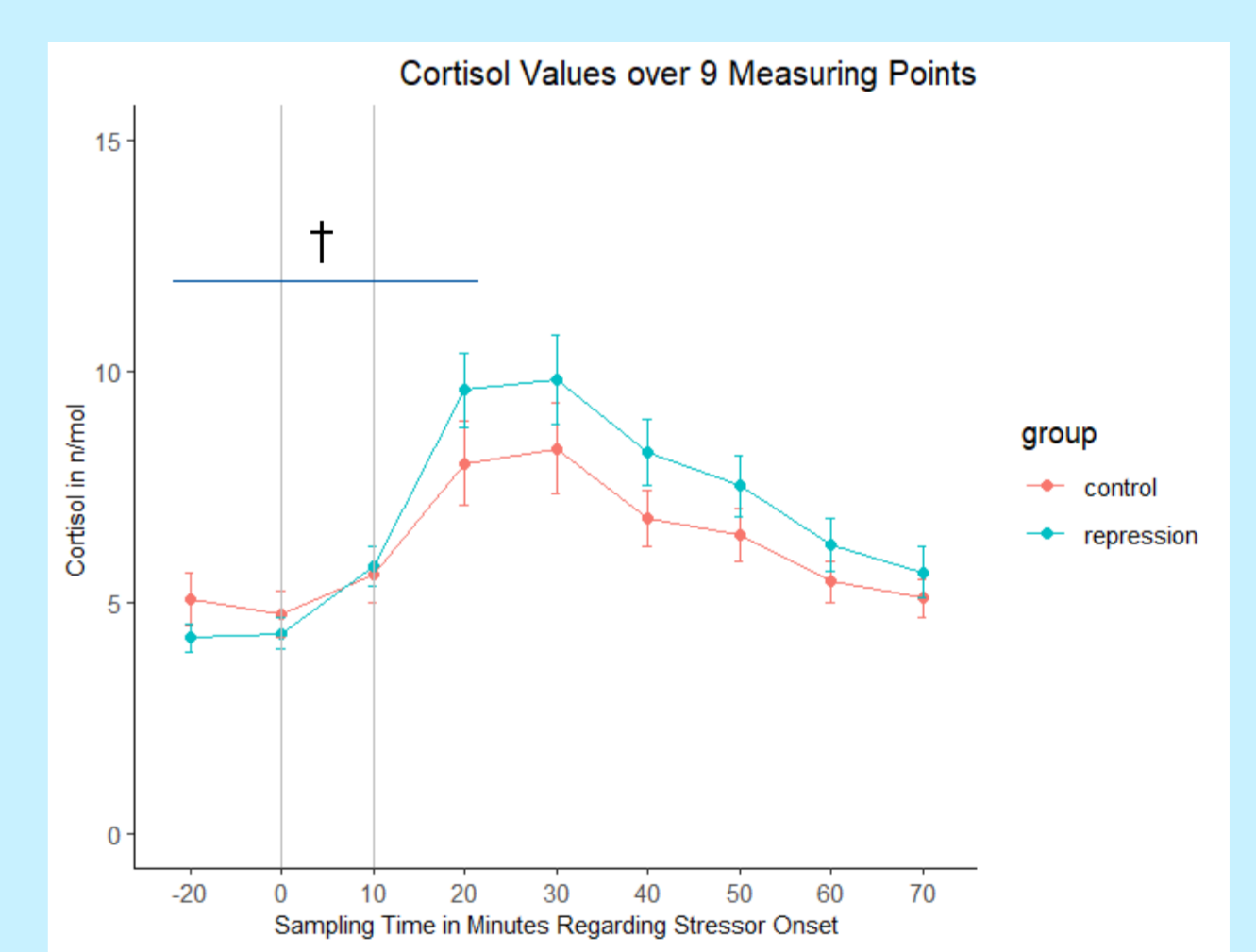
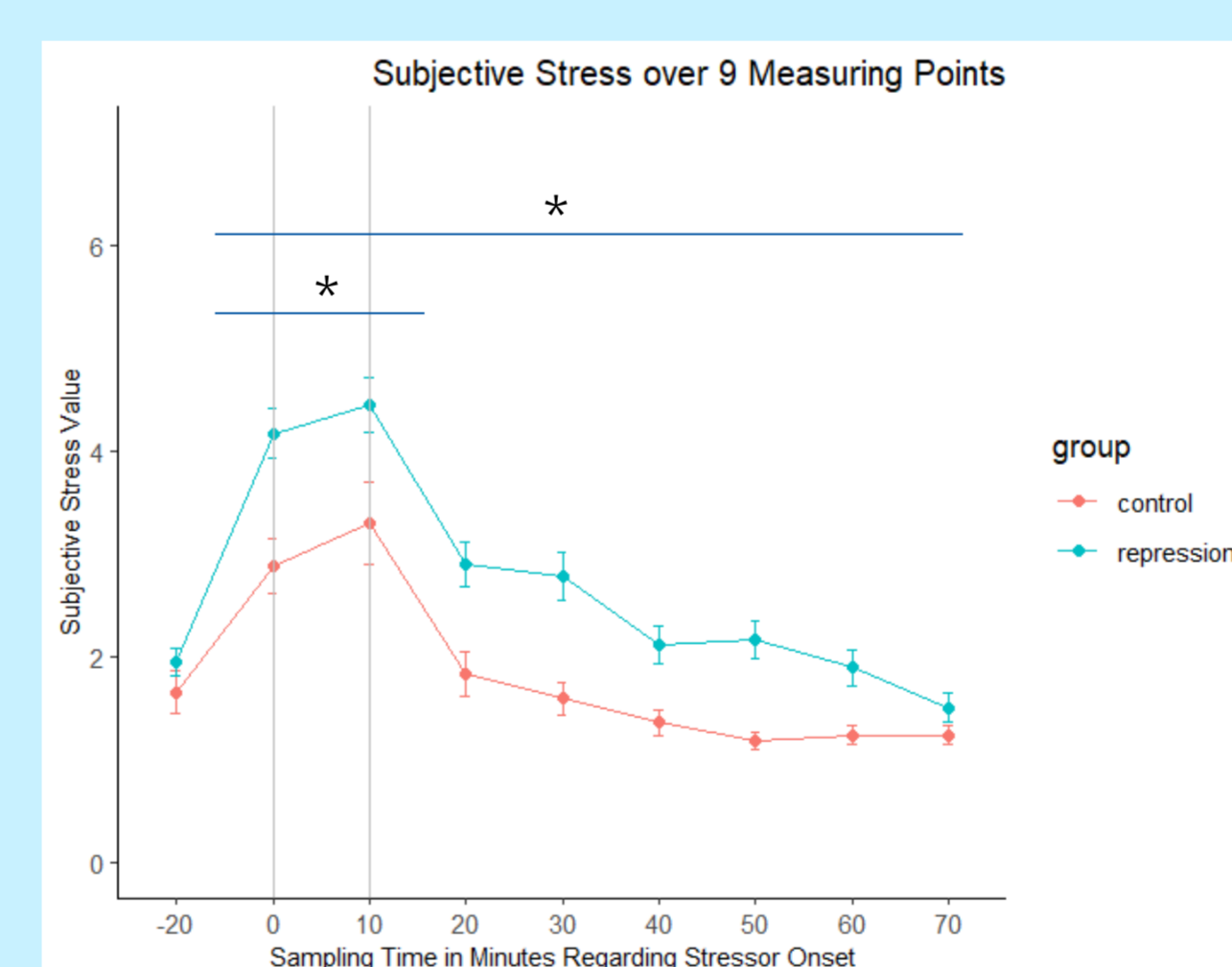
Changes:

- Fewer authoritative elements (no cameras, microphones, labcoats)
- Higher feeling of control (more information beforehand)
- TSST-committee acts neutral-friendly

“(...) they were always at my door. They knew exactly where I was. They did not do anything, but they always made me feel insecure. Either they rang my doorbell at minute intervals, or they came into the house and knocked on my door. When I looked through the spyhole, I could not see anyone. That was horrible.”
(Anonymous informant #1, 25-11-2022)

Preliminary Results

	Repression	Control
N	n = 18	n = 13
Female	n = 10	n = 9
Age	M = 63.28; SD = 6.71	M = 66.68; SD = 8.65



Repression group vs. control group:

* Significantly higher subjective stress reaction to TSST (AUCI, peak-baseline, repeated measures ANOVA)

† Trend: Higher cortisol increase in response to TSST (AUCI, peak-baseline)

Take Home Message

Political repression measures rooted in uncertainty, uncontrollability, and social threat can induce severe consequences on the victims, even years later. The physiological stress system appears to play a significant role in these consequences.



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