

Collective Harmdoing: Developing the Perspective of the Perpetrator

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This Special Issue on collective harmdoing aims to explore, from the perspective of the perpetrator, the association between harmdoing and well-being, and the processes through which people engage and disengage from harmdoing. We present 6 articles, comprising 3 theoretical analyses and 3 empirical articles, that represent a diversity of perspectives on manifestations of collective harmdoing from youth violence to genocide, and from soldiers in combat to terrorism and counterterrorism. A discussant piece, as well as this introduction, together consider the themes, achievements, and omissions of the special issue.

Keywords: collective action, group processes, harmdoing, peace and conflict, well-being

The present special issue of *Peace and Conflict: The Journal of Peace Psychology* explores collective harmdoing from the perspective of the perpetrator. It is well documented that harmdoing is painful for the victims, in work ranging from minority stress (e.g., Meyer, 1995, 2003) to genocide (e.g., Staub, 2003, 2012). This special issue brings a new focus on perpetrators, aiming to illuminate the association between their harmdoing and their well-being, and the

processes through which people engage and disengage from harmdoing.

Why Harmdoing and Well-Being?

A focus on perpetrators' well-being may seem misguided to some readers. At one level, if collective harmdoing is understood simply as a form of collective action, there might be no reason to expect any particular outcomes for perpetrators' mental health and illness; if anything, the expectation would be of positive outcomes (e.g., Drury & Reicher, 2000, 2005, 2009; Louis, 2009). There is an ample literature from group processes and intergroup relations to show that when people identify as members of groups, they adopt the norms of those groups; that groups frequently develop norms to harm other groups, to acquire benefits or to defend against threats; and that in this way great atrocities are regularly and routinely perpetuated, from serfdom to Stalinism, from colonialism to Darfur, from Guantanamo Bay to Abu Ghraib (e.g., Haslam, Reicher, & Platow, 2013; Louis, 2014; Staub, 2003, 2012; van Zomeren, 2013; Zaal, Laar, Ståhl, Ellemers, & Derks, 2011).

Moreover, if collective harmdoing is seen as an outcome of moral weakness, interrogating the well-being of perpetrators might be seen to hint at making excuses for evil or for sinfulness. Such is not our perspective (Louis et al., 2014). By developing an analysis of the role of well-

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being of people who perpetrate harm, we do not eliminate the question of morality: it does not excuse domestic violence or childhood sexual abuse to point out that many perpetrators are troubled, and themselves often victims (e.g., [Anderson, 2002](#)). But it does allow for more attention to developmental trajectories, moderating variables, and for the hope of more effective interventions.

Our interest in this topic arises out of our recent research which had two relevant threads. One thread addresses the quality of group members' motivation for harmful behavior—the 'why' of such behavior—and in particular, the extent to which normative harmdoing can be endorsed out of self-determined, authentic motives ([Amiot et al., 2012, 2013, 2014](#)). A second thread examined antecedents and outcomes of radical and violent collective action and explored its prosocial (or at least, proingroup) motives ([Thomas & McGarty, 2009](#); [Thomas, McGarty, & Louis, 2014](#); [McGarty, Thomas, & Louis, 2012](#)). Both threads have led us to ask whether there are well-being consequences for collective harmdoing, which led us to target the present gap in the literature.

Indeed, when we looked more closely at the most extreme form of collective harmdoing, active killing, we found that the literature on its relationship with well-being was intriguingly contradictory. On the one hand, it is now clear that harmful outcomes have been observed for killing in some cases, both of animals and of humans. When practitioners such as soldiers, health workers, or veterinarians kill, worse mental health has been documented (e.g., [Komarovskaya et al., 2011](#); [Maguen et al., 2009, 2011](#); [Onwuteaka-Philipsen et al., 2012](#); [Witte et al., 2013](#)), and so have worse organizational outcomes, such as job satisfaction and turnover (e.g., [Anderson et al., 2013](#)). However, other research contests these associations (e.g., [Tran et al., 2014](#)). There is contrary evidence that killing can be 'desensitized' so that it is accepted as routine (e.g., [Grossman, 1995](#); [Martens et al., 2007](#)); that satisfaction or pleasure can be derived from killing (e.g., [Buchholz, 2014](#); [Grossman, 1995](#); [Martens et al., 2010](#); [Seligman & Fowler, 2011](#)); and even that in some situations positive mental health outcomes may flow from engaging in killing ([Mitchell et al., 2013](#)). This is confronting, controversial, and interesting. Developing theoretic-

cal models of the association between collective harmdoing and well-being, and of the moderators which might promote positive versus harmful outcomes, is one major agenda of the present special issue.

Why Collective?

Many readers would instinctively associate harmdoing with individual pathology, yet it is clear that group differences exist, over and above individual differences. Even a disturbed criminal is unlikely to kill more animals than a veterinarian, farmer, or hunter; or more humans than a combat soldier. Real world genocides, from Auschwitz to Darfur, remind us that groups accepting killing can result in the deaths of millions (e.g., [Staub, 2012](#)). More broadly, it is groups that accept and promote particular standards for the treatment of others, from the desire for Empire or Manifest Destiny to the Geneva Convention or international human rights laws. Leaders' and group members' desires to serve their group and promote its interests often fuel mass harmdoing toward others ([Haslam et al., 2013](#); [Moghaddam, 2006, 2008](#); [Reicher, Haslam, & Hopkins, 2005](#)).

Little research considers harmdoing as a global topic: it is typically studied in segmented silos (murders; rapes; gang violence; war) and that research is disproportionately focused on individual pathology (e.g., forensic, clinical; cf., e.g., [Jylhäkangas et al., 2014](#); [Staub, 2012](#); [Wiltermuth, 2012](#)). In this special issue, we pursue the groups who embrace harmdoing, across a range of contexts.

This Special Issue

The present special issue includes six articles, and concludes with a seventh discussant piece by [Ben Hagai and Crosby \(2015, p. 409\)](#), which puts forward a penetrating analysis of the themes of the special issue and unanswered questions that must be explored.

Three articles provide theoretical analyses and reviews to account for the links between collective harmdoing and psychological well-being. Building on her established work, [MacNair \(2015, p. 313\)](#) presents the concept of Perpetration-Induced Traumatic Stress Disorder (PITS), defined as symptoms of Post-Traumatic Stress Disorder (PTSD), where the trauma that

causes the symptoms comes from perpetration of harmful acts rather than from being a victim. Admitting that perpetrators can suffer from their harmful actions is confronting: It implies that they are human too and that what their ingroup (e.g., one's country in the case of the military) asked them to do may have had harmful consequences on members of the ingroup. In psychiatry, the *Diagnostic and Statistical Manual of Mental Disorders*, fifth edition (*DSM-5*; 2013) is the first version to address the idea of perpetration as a cause of trauma when discussing PTSD; but whereas the DSM focuses on military contexts, PITS has been shown to apply to a wider range of perpetrators, including people who engage in abortions, animal slaughter, torture, police who shoot in the line of duty, and criminal homicide. Such acts can generate moral injury and the guilt it generates should be amenable to medical and psychological treatment.

In her article, MacNair illustrates how treating PITS involves a number of challenges, including the emotional numbing created by the trauma (which makes processing of the harmful act particularly difficult), and the fact that people can become addicted to the hormonal 'high' (i.e., adrenaline rush) associated with harmdoing. Another challenge to treatment pertains to whether we are truly committed to treating perpetrators of harmful acts. To this aim, MacNair points out that providing therapy to perpetrators should actually prevent them from committing further acts of violence. She concludes by highlighting how violence in humans is not inherent or natural, but that on the contrary, it leads to ill-being.

Neville and colleagues (2015, p. 322) focus on the phenomenon of youth violence, which represents a significant health risk (both physical and mental) to youth. They do so by applying a public health approach that aims to minimize the problem of youth violence by developing primary, secondary, and tertiary interventions to minimize youth violence. Primary interventions aim to prevent acts of violence from happening in the first instance. Programs are typically delivered to entire year groups of students in their own classes (i.e., students are not selected on basis of risk) in preschool, elementary, middle, and high school settings and take the form of peer mediation, social development initiatives, and social norms

approaches. Whereas secondary interventions aim to reduce involvement in violence after violence has begun to manifest, tertiary interventions focus on long-term responses to deal with the consequences of violence and prevent it from happening again. Secondary and tertiary interventions often focus on gangs; for example, some programs have aimed specifically to decrease shooting and retaliatory violence between groups, with mixed effects. Other interventions adjust the punishment for engaging in gang violence (in terms of swiftness and severity) while simultaneously offering gang members services and other kinds of support through youth work, probation and police officers, churches, and other community groups. Finally, the authors present studies conducted among gang members, police officers, and child soldiers, investigating the link between health and youth violence. And as was the case in the MacNair article, Neville and colleagues conclude on the basis of these studies that engaging in harmful actions is associated with lower health and well-being. Both articles also highlight the importance of adopting innovative and interdisciplinary approaches to harmdoing—including psychiatry, public health, criminology, as well as clinical and social psychology—to fully account for this phenomenon.

In turn, Leidner, Li, and Kardos (2015, p. 334) adopt an intergroup perspective to explicate how and why ingroup-committed violence can positively or negatively affect the health of ingroup members. Attachment and glorification components of ingroup identification are distinguished, with the latter resting on the desire to establish the ingroup as superior to other groups. Attachment identification is proposed to be associated with nondefensive strategies to address collective harmdoing, which can include acknowledgment of wrongdoing and collective restitution and reconciliation. Glorification is proposed to be associated with more defensive strategies, such as denial of wrongdoing and demonization of the other. The authors then propose a longitudinal dynamic, such that nondefensive strategies may be less adaptive for maintaining and/or improving health in the short term, but are more adaptive in the longer term. The authors conclude that harming outgroup members can hurt or help ingroup members.

The final three articles explore empirical data and present analyses of perpetrators' wrongdoing with samples from South Africa, Rwanda, and the U.S.A. Two of these articles use a more inductive analysis to the question of the perpetration of harm, its relationship with well-being, and other psycho-social outcomes. Both articles point out that inductive, qualitative approaches are perhaps uniquely positioned to shed light on the phenomenology, or lived experience, of harmdoing.

Kraft (2015, p. 359) draws on the rich testimonies of perpetrators who gave their testimony to the South African Truth and Reconciliation Commission to develop an analysis of the ways in which perpetrators made sense of their violent acts. Kraft shows that perpetrators maintained and derived benefit from their harmdoing by developing specific narratives that justified and vindicated the violence. For example, perpetrators used military language and characterized the conflict as a war to rhetorically justify their harmful actions. One remarked, "Without the active counteractions of the South African Police, the government would not have survived the leftist, Communist onslaught." Similarly, a perpetrator in the armed wing of a liberation organization which had attacked a crowded bar, killing three young people, remarked in testimony, "First of all, we are soldiers." Later, he insisted, "I am not a terrorist. I am a freedom fighter." The sense of active self-fulfilment of perpetrators, and the meaning and excitement derived from participation, are also highlighted on a number of occasions. For example, one perpetrator gave as his reason for joining the Security Branch of the South African Police, "Then I would be something of a James Bond type of character and lead this exciting life dealing with very important issues." Kraft's analysis also points to the role of group processes in terms of intragroup competition, cohesiveness and secrecy in the maintenance of harmdoing and its benefits: "There was a team spirit like no other. . . ."

King and Sakamoto (2015, p. 378) analyze interviews recorded as part of a program promoting individual and group healing between the Tutsi and Hutu in Rwanda (the Healing of Life Wounds program) to shed light on the question of how intervention can successfully or unsuccessfully promote disengagement and healing in the aftermath of genocide. King and

Sakamoto use a dialogic performance narrative analysis to show how the dynamics between survivors and nonsurvivors (perpetrators) changed over the course of the program. Although interactions between perpetrators and survivors were initially indirect and evasive, they became increasingly frank over the course of the program. Perpetrators reflected feelings of extreme social isolation and shame and used these as rhetorical devices to seek empathy and acceptance for the perpetration of harm, and to forge new links across survivor-boundaries.

Finally, Hijazi, Keith, and O'Brien (2015, p. 395) examine posttraumatic growth after witnessing and participating in war violence, in a clinical sample of American combat Veterans. A majority of the sample endorsed at least a moderate degree of posttraumatic growth on at least one dimension, with increased appreciation of life being the most frequently endorsed dimension. Interestingly, when considered jointly with other variables, greater perception of moral wrongdoing was significantly associated with greater posttraumatic growth, and so too was killing someone in combat, although on only one subscale of the posttraumatic growth inventory: perceived personal strength. This provocative finding awaits replication, explication, and longitudinal analysis. The authors acknowledge the possibility that greater perceived personal strength after killing may be an artifact of greater perceived personal control and power, from taking a life. However, particularly in light of the theoretical articles, it is interesting to hypothesize that taking responsibility for moral wrongdoing may afford veterans the opportunity for growth, and/or that post traumatic growth might empower veterans psychologically to be able to acknowledge greater perceptions of moral wrongdoing! Of course, third factors such as more inclusive political values or certain religious faiths might also promote both outcomes.

What We Have Achieved, and What We Are Missing

We are excited by the special issue's achievements in bringing together a range of theoretical perspectives and international data, in comparing contexts from gangs and youth violence to genocide to military combat, and in addressing the research question of the well-being impacts

of collective harmdoing directly. These synergies are explored by Ben Hagai and Crosby, in a penetrating analysis that also highlights many of the unanswered questions of the special issue. It is clear however that there is still a long way to go. The theoretical analyses put forward important contextual moderators which the empirical analyses are only beginning to consider. Analyses of gender, of wealth and resource inequalities, of technological developments, of political and religious values, are all comparatively neglected in the special issue, relative to their apparent influence to a casual observer of historical or contemporary collective harmdoing. Specific mediators and moderators, such as emotions like contempt (Becker, Tausch, & Wagner, 2011; Tausch & Becker, 2013) or the reactions of third parties (Saab, Tausch, Spears, & Cheung, 2014; Simon & Klandermans, 2001; Subašić, Reynolds, & Turner, 2008), also need to be addressed. Importantly, the ethical and logistical challenges of studying perpetrators, highlighted by the authors of all three of the empirical articles, are considerable, and are likely to pose ongoing challenges for the field. Nevertheless, it is our perception that the special issue is an exciting step forward into new scholarly terrain; we hope that readers will agree.

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