

Book/article reviews

Joop de Jong (ed.) (2002) *Trauma, War and Violence: Public Mental Health in Socio-Cultural Context*. Plenum, New York. pp. 454.

This book presents key insights from the experience of projects and programmes supported by, or otherwise linked with, TPO (the Transcultural Psychosocial Organisation) over the last decade. Fieldwork experience is shared from South and South-East Asia, Central, East and North Africa and the Middle East, with a framing introductory chapter on the values and principles of TPO from de Jong, its Director.

Attempts to theorise the field of psychosocial intervention have been marked by significant controversy, with antagonism between the codes, values and concepts of the various disciplines that attempt to represent the suffering of war and means to ameliorate it. In this collection, it is striking how divergent presentations from psychiatrists, psychologists, and anthropologists use very different disciplinary language, but are united in engagement with a familiar core of issues and themes.

For example, it is to be greatly welcomed that there seems to be an emerging 'orthodoxy' of seeing individual and familial capacities in the context of community resources and capabilities, which are in turn 'nested' within wider societal values and conditions. This insight, which is explicitly developed in the introductory chapter but illustrated throughout, is now central to a number of formulations (Hobfoll 1998; PWG 2003). Further, although some read-

ers will be distracted by the varied concepts used to appraise and structure intervention in specific contexts (ie. DSM categories in some settings, indigenous illness categories in others, community development concepts in yet others) it is the rhythm of engagement across such varied settings that is most compelling, and probably of greatest importance. Many chapters begin with detailed political and cultural histories of the setting, and then demonstrate how such issues have been utilised in developing analysis and intervention. The strongest chapters (such as that by van der Put and Eisenbruch on programmes in Cambodia) create such firm linkages between analysis of culture and formulation of intervention that the common fear of mere 'lip service' being paid to the cultural contextualisation of services can be confidently dismissed.

Other welcome trends include the recognition of the importance of social capital as a concept in understanding the impact of war on communities, and the identification of rights-based interventions as a major contribution to psychosocial well-being. Seeing human capacity (here represented principally in terms of mental health), social capital, and culture and values at the heart of psychosocial well-being – and these domains then defining alternative and complementary routes to intervention – is central to a more integrated and effective approach to psychosocial intervention (PWG 2003).

The sub-title of the text is interesting. De Jong argues that the interventions described should be considered as 'public mental health' measures. There are clear advan-

tages to this proposal. Interventions are then generally located at tertiary and secondary levels, being preventive in orientation and supportive of existing services. Such a formulation encourages awareness of the comparative burden of disease associated with mental health issues, and potentially facilitates access to a discourse of cost-effectiveness. However, there are also potential drawbacks to such categorisation. Framing the interventions in the book as 'public mental health' measures when, in many instances, they are more explicitly linked to the wider social mobilisation of disrupted communities may marginalise these efforts that should otherwise be considered central to post-conflict recovery and rehabilitation. Also, in many of the contexts considered in this collection, mental health provision is almost entirely the province of the informal and traditional sectors of healthcare. There is thus little in the way of established infrastructure for external interventions to link with within the formal sector, while interventions within the informal and traditional sectors run the risk of disrupting the delicate ecologies of local belief and cosmology in the fashion articulated by many critics. The 'Problems, Resources, and Interventions' analysis offered by van der Put and Eisenbruch demonstrates a focus and pragmatism that suggests a far wider relevance of psychosocial principles than the field of mental health alone.

References

- Hobfoll, S (1998) *Stress, Culture, and Community: The Psychology and Philosophy of Stress*. New York: Plenum.
- PWG (2003) *Psychosocial Intervention in Complex Emergencies: A Conceptual Framework*. Edinburgh: Psychosocial Working

Group [available at: www.forcedmigration.org/psychosocial]

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Higson-Smith, Craig. (2002). *Supporting communities affected by violence. A case-book from South Africa*. Oxford: Oxfam Publications ISBN 0 85598 477 5

It happens occasionally that, as a reviewer, I really enjoy the way an author is capable of describing very complicated matters in a clear, accessible and stimulating way. This small book is such an example.

Craig Higson-Smith was one of the founders, and, for many years, the director of the Kwa Zulu Natal Programme for Survivors of Violence (KZN-PSV) in South Africa. The book is written based on his experience and that of many colleagues devoted to supporting disintegrating communities affected by decades of violence.

The book begins with a global description of the history of violence in South Africa during the last two centuries and the specific trajectory of the Kwa Zulu Natal region in the eastern part of this country. In this province, the final struggle against apartheid was aggravated by a civil war between supporters of the African National Congress and the Inkatha Freedom Party. Both political currents had violent supporters and partisan armies. Not only the province but also villages and families were cleaved by the conflict between them.

In this violent atmosphere the KZN-PSV programme was started in 1991 by a group

of psychologists and social workers in Pietermaritzburg, one of the major cities in Kwa Zulu Natal. From the very beginning the help was scarce; a small group of 25 volunteers had to support a province of eight million people. To make this work as effective as possible from the very beginning, literature reviews and action research were conducted to investigate the problems as concretely as possible. The reviews showed that the literature on the consequences of violence centred too much on individualistic concepts of post traumatic stress disorder, developed in western countries. These ways of reasoning and assistance have similarities to the indigenous South African healing and support traditions but were not capable of describing the complexities of the effects of state and civil violence. Despite attempts to link the psychological literature to studies in the field of social and economic reconstruction, these proved insufficient to fully understand the complex world that the KZN-PSV volunteers were faced with. As a result, it was their own action research carried out in the communities that formed the grounding for the development and application of intervention strategies.

The book has two parts. In the first part, the author describes the theoretical frame of reference the organisation used for setting priorities. In the second part, the specifically targeted programmes that were based on these priorities are described.

In the theoretical chapters, the author describes four major concepts: 'fragmenting' and 'disempowering' versus 'linking' and 'empowering'. The first two processes can be observed in disintegrating communities, the last two are the aim and result of the community assistance. Disempowering is the process by which civil violence prevents people and organisations from fulfill-

ing their function and original purpose. Fragmenting is a breakdown in interpersonal and group communication. People in communities struck by violence suffer from this disempowerment and fragmentation, not only in general but also at a family and personal level.

Disempowerment and fragmentation are the causes for great chaos and badly arranged needs for help. This causes great and often conflicting demands on the helping organisation. Yet the helping organisation and individual assistants must have a framework to prioritise, choose and evaluate their work which is no more than a drop in the ocean.

That is why the organisation has to answer these four questions to guide them.

1. On which communities should attention and resources be focussed?
2. What intervention strategy is best suited for a particular community?
3. How can we prevent burn out and secondary traumatic stress among field staff?
4. What limits should be set for involvement with a particular community?

The time dimension is important in answering these questions. These questions can only be answered during a long period of engagement in the communities. There are some constant elements in this process.

First there is the basic involvement of the communities in the work. The intended beneficiaries in communities and groups of people are stimulated from the very beginning to re-empower and to link with others. Projects are always implemented at several levels within a community. This makes it possible to develop strength, self confidence and trust.

Another element is the way in which workers constantly evaluate their work. This attitude of self critical evaluation is main-

tained throughout the development of the community assistance. It allows adaptation and reorientation based on the input of the beneficiaries. It helps to formulate new needs and target groups within the community, and it helps assistants and beneficiaries to set and accept limitations and the end of the work.

The third element in the work is the courage to make choices. The choices of where and what to support, are always difficult choices. There are many urgent needs, due to the great extent of the suffering and the lack of resources. Choices must be made. They can only be made and explained if their transparency is granted to community members and staff.

The fourth element is action research and investigation. Before every project starts, the history, leadership, resources of the community and social dynamics that might sabotage the work in the communities are investigated. There is also an important further element: allow plenty of time, don't rush to gain quick results but be prepared for a laborious, time-consuming project with a beginning *and* an end.

This framework is explained very thoroughly, illustrated by examples of the work, in the second part of the book. Here the author describes different areas of work, dealing in turn with the work with young people, women, and children and with the community leaders.

Here the task of the reviewer becomes very difficult. Summarizing this work does not do justice to the stimulating and self critical developments in the field. These are the chapters that are worth reading by field workers themselves, and I strongly recommend that they do so.

The book ends with a critical reflection on the work of KZN-PSV. The helping organisation must first decide if they have the

resources to assist a community seeking help. The following principles of community intervention are suggested: credibility, never suggesting that people are ill, showing respect, accurate empathy, opportunities for emotional expression, opportunities for people to tell their stories, opportunities for people to change their beliefs about the world, collaborative relationships, trust, honesty and openness, working with small groups, building on existing resources and strategies for coping, respect for local culture and safety. Also the long term care of the organisation and its personnel at organisational, team and individual level should be invested in to make this difficult work beneficial to all people involved.

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