

From the editor: breaking new ground and old favourites

Our regular readers may be surprised to discover that this issue has no special focus or theme, unlike the last four issues. However, that does not mean that there is nothing new to discover, nor that there are not a few old favourites with a new twist, as well.

Breaking new ground

For the first time, *Intervention* is introducing a *Key implications for practice* box at the beginning of each main research article. This has been a growing trend in other journals, one which the *Editorial Board* felt was an important addition to provide clear, concise information on how the research presented can be applied in the field. Our regular readers will be aware that this bridge between theory and practice is a key element in *Intervention*, and one which we hope to continue to develop with this additional information. Please do let us know your views on this new addition to the journal articles.

The other new ground came about neither through design nor intention, but was a random happen stance that we would like to note: all of the first authors of our main research articles are women. This is the first time ever, in the history of *Intervention*, that this has occurred.

Recent, highly controversial, research by Ingalhalikar (2014) suggests that *'male brains are structured to facilitate connectivity between perception and coordinated action [i.e. they tend to focus in on tasks], whereas female brains are designed to facilitate communication between analytical and intuitive processing modes [meaning they move between associated and non-associated concepts and multi-task]'*. This would suggest that male and female researchers may have different approaches to a subject, and the editors at *Intervention* would very much like to know if our readers

have noticed such differences in approach as you read our offerings this amazingly, rich and multi-layered issue.

Articles

The first main article is by *María Vergara, Emilia Comas, Irada Gautam & Uma Koirala* and examines ways the relationship between mother and child can be supported within a context of domestic violence. They describe a pilot parenting programme in Surkhet, Midwestern Nepal, specifically developed to support mothers with past, and ongoing, experiences of domestic violence. The programme is not aimed at ending such structural violence, which in the context of this programme is another question, but here the focus is on establishing meaningful relationships between the mothers and their children in order to improve their interaction, and in recognition of the impacts of such violence on both generations. The pilot is encouraging, and while it is important to work with the actual, daily reality of these women, I can't help but wonder why these kinds of initiatives cannot be coordinated with programmes to reduce the domestic and structural violence that colour the daily reality of this group of women and children. There are so few studies that address MHPSS in Myanmar, that we were thrilled to receive the contribution from *Maria Vukovich* and *Gwen Vogel Mitchell*. They present a study on an eight session psychotherapy group programme, *Sharing Circles*, working with specific vulnerable groups, such as lesbians, gays, bisexuals and transgender people, those who are unsure of their sexuality, formal political prisoners and people living with HIV/AIDS. *Sharing circles* is a method for improving psychosocial support and reducing psychosocial

symptoms. The programme shows a slight improvement regarding psychological stressors, depression, anxiety and stress, but, maybe equally important for groups that are marginalised or excluded, the participants felt part of a group, also essential for wellbeing.

The article of *Kristen E. McLean, Bonnie N. Kaiser, Ashley K. Hagaman, Bradley H. Wagenaar, Tatiana P. Therosome and Brandon A. Kohrt* presents a qualitative assessment of a brief, structured training (with and without apprenticeship supervision) for community health workers. The authors implemented a multi-stage, transcultural adaptation for a pilot, task sharing training in Haiti. They studied both trainings on task sharing training and supervising. In their research they conclude that, post training supervision is one of the strongest predictors of behaviour change. This studies pleads for a serious consideration what kind of supervision is needed and best when implementing programmes. Too often, the type of supervision is not taken into consideration

And, last but not least, in terms of the main articles, *Shweta Verma* presents qualitative research that examines not only the many roles that women take on; 'a widow, a victim, a mother', but also looks at resilience and wellbeing within the complexities of women's lives in Kashmir. She shows that it is too simplistic to speak of people who are resilient or not, or whose wellbeing is good or not. The paper highlights the different identities, strategies and negotiation skills this group of women use to improve their wellbeing. Through one case study she presents, the impact of different contexts are clearly highlighted; one context stresses victimhood, while another may stress the fact that she is a widow or a mother. Labels, such as: resilient/non resilient; adaptive/maladaptive; or doing well/not doing well, often does not adequately address the daily realities in which people cope with adversity in multiple ways, and in multiple contexts.

Old favourites, new twists

The very first Editor-in-Chief of *Intervention* (and current member of the *Editorial Board*), *Guus van der Veer*, has contributed much over the years, both to these pages and to the development of the field. As such, in my opinion, his opinion matters. So, while we often reserve *Field Reports* for issues that focus on one topic, event, intervention or regional situation, the field report offered by *Guus van der Veer* in this issue is informed and infused with his own opinions and methods of working on the important issue of what organisers of capacity building projects need to know before they hire a trainer. So, while this field report may be seen as a mix of a personal reflection and field report, it gives such clear instructions and suggestions for facilitating a training course for psychosocial workers and/or mental health staff, I decided to publish it as a field report. In it van der Veer also describes what should be included in a report of a workshop for MHPSS workers and what organisers of capacity building projects need to know about training psychosocial workers and mental health staff.

The *Personal reflection* from *Nadim Almoshmosh* is also a slightly different twist to most *Personal reflections*, in that his paper is a plea to MHPSS workers and agencies for better coordination to begin to alleviate some of the extreme, and ongoing, suffering of Syrian refugees and those internally displaced. Almoshmosh is a psychiatrist of Syrian origin, and therefore best placed to address the mental health needs of Syrian refugees, having seen it from early on in the conflict. I can only agree that these issues need to be addressed quickly, but in a way that 'does no harm' and has a chance of actually doing good, having seen first-hand the refugee camps and impacted communities in Turkey and Jordan. His experience shows that the '4Ws'; *Who is Where, When, doing What in Mental Health*' developed by the IASC Reference Group for Mental Health and Psychosocial Support in Emergency Settings (2012) is

sadly not (yet) common practice in the field. Furthermore, the question is raised if in such an ongoing humanitarian crisis, what actions should one organisation take to ensure better coordination of efforts and quality of interventions?

Another favourite feature repeated in this issue is the *Book review*. The book reviewed in this issue, could ironically be applied to many of the ongoing humanitarian crises highlighted throughout the issue. *Global Mental Health: Principles and Practices*, Vikram Patel, Hayy Minas, Alex Cohen & Martin J. (Eds.), was reviewed by another favourite contributor and member of the *Editorial Board*, Pau Pérez-Sales, and highlights the book's strong focus on human rights and the need to develop methodologies for local, reality based approaches, with strong cultural, social and political components.

The final favourite, brings us back to the beginning, as the issue actually opens with what is quickly becoming a common thread in these pages, a further discussion of the contribution of Vikram Patel in the 'New frontiers' Extra issue of *Intervention* (12.4). Patel stated in that issue that the world of global health is too *supply driven*. He questioned if we engage with the people suffering in a way that makes more sense to the beneficiaries or the support agencies. *Anica Mikuš Kos* responded in the last issue (13.1), by raising the question of how to translate and implement the ideas

presented. In this issue, *Derrick Silove* contributes to the debate on how to integrate ideas and practice. Silove describes the difficulties for researchers and clinicians to integrate a worldview of the global and transcultural mental health movements. According to Silove, the problems lie in the fact that we treat diagnostic categories as if they are concrete or *'real'* entities, while diagnoses are more useful abstractions and not indicators of a psychopathological process. Further, that the *'Mental-Social Gap'* is itself an artificial distinction we make between the mental and social worlds.

As always, we would very much enjoy any opinions our readers would like to contribute.

Marian Tankink
Editor-in-Chief

References

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