Letter to the editor

Josi Salem-Pickartz, Samir Samawi & Lidia Barakat

We, the authors listed above, would like to take the opportunity to make some additional comments concerning the paper by Quosh (2011), published in Intervention 9(3). We would like to express a perspective we felt was missing from the original article. Two of us, Samawi and Salem-Pickartz, wrote the handbook that was mentioned in the article, in close cooperation with the Inter-Agency Working Group, and were the principal trainers of the Training of Trainers (TōT) mentioned in the article. Lidia Barakat worked as a co-trainer and supervised the trainings that were subsequently conducted by the trainees. The handbook uses a client-centred, empowerment-based approach, and emphasises how environmental stressors and opportunities reflect on personal capacities, including people’s mental health. In our view, it was essential that the trainees, all professionals with several years of experience in mental health and psychosocial support with refugees, could share their own stressful, and sometimes traumatic, life experiences. This can only happen if there is enough trust in the group. Some of the trainees had experienced threats and persecution, or were themselves refugees. In a second step, we confronted them with the situation existent for Iraqi refugees in Syria, by asking refugee families to share their plight with the group. This was a powerful learning experience, which shed light on the need for multi-professional team working in order to respond to the refugee families’ needs in a comprehensive manner.

In the TōT project in Syria, we had to deal with many unforeseen developments along the way, including personal, physical, emotional and social distress, as well as learning to cope with it through cultivating proper self-care and respectful, constructive communication. We understood that the (occasional) emerging different perspectives were a reflection of valuable differences in personal experience, and offered a chance to learn from each other.

We know from our work with refugees in the Middle East, that the needs for psychosocial support and mental health care always exceed available resources. Specialised tertiary services (clinical psychologists, social workers, and/or psychiatrists) are often not accessible to refugees, or not prepared to address their needs. Therefore, it is indeed important to train front line workers in integrated mental health and psychosocial support, however, with a clear reference to resources and concepts. In our experience, this can only be effectively done through an experiential way of training that includes explicit attention to prior experiences by the trainees themselves, by emphasising the need for self-care, and learning to deal with (nearly) overwhelming demands.

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Intervention 2012, Volume 10, Number 1, Page 79 - 80

Dr. Josi Salem-Pickartz is a clinical psychologist in Amman, Jordan. She co-founded the Al Himaya Foundation for Trauma Recovery, Growth and Resilience in Amman/Jordan with the goal to support regional capacity building projects. E-mail: drstofloat@hotmail.com

Dr. Samir Samawi is a psychiatrist, based in Amman, Jordan. He is co-founder of the Al Himaya Foundation.

Dr. Lidia Barakat is a clinical psychologist in Damascus, Syria. She worked extensively with Iraqi refugees in Syria and supervised front line workers for various organizations.