

Brain Stimulation 2018: Contextual investigation: Lessons thought while Carrying Out a MHPSS Intervention with War-Affected Children

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Introduction: Protecting and improving people's mental health and psychosocial well-being in humanitarian crises has recently emerged from its 'humanitarian ghetto' (Wessells, 2009) towards acceptance as a fundamental and essential part of any post-humanitarian emergency provision. Yet, this newly emerging field of mental health and psychosocial support (MHPSS) has a long way to go before acceptance and full integration as an evidence-based component of all post-conflict and post-disaster interventions. This is because this incipient field is hampered by gaps in practitioners' field experience (IASC, 2007), a scarcity of rigorously evaluated research studies (Jordans, Tol, Komproe, Lasuba, Nt-amutumba, et al. 2010) and inadequate training of international humanitarian psychologists who deliver these MHPSS interventions in the field (Wessells, 2009). In order to avoid the many pitfalls of inadvertently causing harm through good-intentioned yet ultimately detrimental practices, there is a need to incorporate new emerging insights (IASC, 2007) and learn from the experiences and oversights of others.

One of the greatest oversights in the field to date has been the under-estimation of resilience (Wessells, 2009). This has resulted in a deficit trap whereby researchers focused on the psychopathology of survivors to the detriment of research on the assets and resources that these survivors can draw upon. Resilience is defined as the ability to cope relatively well in situations of adversity (IASC, 2007) and is influenced by the level of family, community and societal support a person can access. Knowledge of these support structures is particularly important in emergency contexts which are by nature fluid, volatile and complex.

Although recent research on resilience is slowly emerging, it is largely confined to a focus on the resil-

ience of adverse groups who are the net beneficiaries of MHPSS interventions. Few studies have thought to examine practitioner resilience – the ability of mental health and psychosocial workers to adapt to and cope with the challenges of working in hostile environments and cultural contexts very different from their own.

This case study seeks to serve two purposes. Firstly, it explores the demands placed on practitioners who carry out MHPSS interventions with war-affected children in DR Congo (McMullen, O'Callaghan, Shannon, Black & Eakin, 2013; O'Callaghan, McMullen, Shannon, Rafferty & Black, 2013). Secondly, it seeks to peel back the surface and share the 'soft data' on what life is like in the field. In so doing, it informs the next generation of MHPSS practitioners about the realities of work in emergency contexts - an insight that can often get lost amid the statistics of success and stories of survival that frequently make it into print.

Lesson: Do Not Leave your Bags Unattended in an Embassy It took us 3 days, two borders and journeys by plane, bus, taxi, motorbike and on foot before my colleague and I finally crossed the pot-marked, unpaved no-man's-land between Rwanda and the Democratic Republic of Congo and arrived safely in the country that is to be our home for the next two months. But what adventures occurred in those three days!

Having missed the early bus from Kampala, Uganda to Kigali, Rwanda by 15 minutes, we had to wait in Kampala for a full day to get the 8.30pm overnight bus to Rwanda's capital city. Arriving in Kigali at the ungodly hour of 5am we headed straight to the DRC embassy. But from being 15 minutes too late for our bus before, we were now 2 hours too early for the embassy. So we deposited our luggage inside the

gate with a kindly watchman and went in search of sustenance. Upon returning we were met by an older, taciturn watchman who shut the gate in our faces and told us to wait outside. Five minutes later we were being ticked off by the head of a private security company for leave our bags in the DRC (the embassy, after all, we were informed, was DRC soil) and were told that in the current security climate leaving bags unaccompanied was not a good idea! Our visas came at a cost: \$450 for two people for a two month stay. We were also told that if we wanted our visas processed while we waited, it would cost us an additional \$50 – a charge made all the more ridiculous when we saw only three other applicants that whole morning requesting visas.

But our brush with embassy bureaucracy pale into insignificance when compared to the trouble visitors can have trying to enter the DRC at the border. It's bizarre that a country so few want to visit (bar the odd missionary, mercenary, or mental health practitioner) makes it so difficult for those who do come to enter. So, I was really dreading the border crossing having read blogs about Westerners being hassled, arrested, refused entry or charged exorbitant 'additional fees'. But forewarned is forearmed and prior to departing I secretly rehearsed my 'Swahili speech' to oil the wheels of bureaucracy. It's incredible the power a local language wields. From being disinterested and brusque the border guard transformed into a jolly ebullient man who quickly returned to bring his 'Swahili-speaking oddity' to see the head border

guard and her female assistant. Every one of the last 1,000 hours spent studying the language was put to the test as I fielded a multitude of good-natured questions on which I was, where I was from, what I was doing etc.

CONCLUSION: When I look back on our time in Congo I feel blessed and fortunate for having met some of the finest and most competent people in the country to help us with our intervention. Firstly, there was Marie*, a wonderful motherly woman who was present for every single session, diligently took notes, visited a host of families of the girls and boys we were concerned about and never lost her sense of humour and joy. Then there was Jacque*, our translator and all-round local fixer. Now, Jacque's English was not perfect (he once asked the difference between 'Hamlet' and 'omelette' and set up an NGO 'for raping girls'—an unfortunate confusion between the gerund and the past participle). His judgements were somewhat hasty; all girls he met in Hotel Beni were 'harlots', most child soldiers were 'possessed by demons' and beer was the 'drink of the devil'. But despite his erstwhile faults, he was a colourful communicator and talented teacher. He quickly picked up the principles underlying Cognitive Behaviour Therapy and soaked up its techniques and learning points. He then regurgitated this knowledge in his own imitable style. In fact, so committed was he to the seminar, he even taught his wife one of the mental imagery tasks we taught the children and reported that it worked brilliantly for her too.