Psychosocial community approaches and practices in Latin America

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The use of the term 'community approaches' in psychosocial work often involves multiple meanings, all of which contrast with individual approaches to mental health. The importance of the context emphasizes the need to design and implement emergency programmes in ways that 'make sense' to local populations. This requires not only consideration of generational, gender, spiritual, and cultural practices within the community, but also reinforcing existing resilient resources in the face of adversity. In this commentary we describe several examples and sources that present ways of working in Latin American communities after disaster. We discuss the Inter-Agency Standing Committee (IASC) Guidelines on Mental Health and Psychosocial Support in Emergency Settings, with a specific focus on 'Community Mobilization and Support' and the four common functions it contains.

Keywords: Inter-Agency Standing Committee (IASC), guidelines, mental health, psychosocial support, community approaches, community mobilization, Latin America, Participatory Action Research (PAR)

Within the realm of psychosocial work, the use of the term 'community' represents a clear contrast with more individually oriented approaches to mental health. Recent holistic revisions of the concept of 'wellbeing' also increasingly include collective approaches to recovery and resiliency. There are always similarities, as well as differences, among the members of a community. Despite sharing common backgrounds, experiences and goals, the existence of this diversity chal-lenges the frequently assumed homogeneity within the 'community' unit. Also, the very phrase 'community work' itself often carries multiple meanings and encompasses various methods of working that are not always rigorously described, or clearly defined (Beristain, 2006). In response, there are grow-ing calls in the field for new ways of relating to, and caring for, refugees and survivors of emergencies - ways that avoid giving token meaning to concepts linked to 'community' such as: 'psychosocial', 'participation', 'local leadership', 'group decisions', 'ownership', 'sustainability' and 'process' (Garcia del Soto, 2008).

Communities around the world display uni-versal characteristics, but it is often the unique cultural specifics that influence the dynamics of their relationships with outside institutions. The *IASC Guidelines on Mental Health and Psychosocial Support in Emergency Settings* aims to address these realities through consultation with professionals and local groups implementing psychosocial work around the world.

In Latin America specifically, no generalized notion of a unique continental approach to 'community work' adequately captures the diversity of local community understandings and practices. However, if we follow the representations of others in regard to this part of the world, we find several stereo-types that provide initial food for thought. These are listed below.

(1) A sense of individual identity strongly connected to group life;

(2)   a tendency for collective needs to take priority over individual needs ('*companero*' is a term that this region has exported to the rest of the world);

(3)   links with political and social movement activism;

(4)   the idea of resistance and justice in contrast to (and sometimes in opposition to) reconciliation; and

(5)   the importance of preserving memory.[1]

The Colombian sociologist Orlando Fals Borda (2007), one of the founders of the Participatory Action Research (PAR) approach, describes the importance within this approach of exchange and connections between different locations around the world (e.g., India, Brazil, Colombia, Mexico, Tanzania) and the so-called '*advanced countries*' (e.g., the UK and Australia). These links portray important universal factors that reflect community approaches towards increased visibility and increased engagement in choosing their own goals and strategies for advancement, sometimes with external support. Fals Borda argues that the three primary '*strategic tensions*' shaping how we work with '*other*' populations involve ongoing debates about three main challenges: (1) theory versus praxis, (2) the subject versus the object in research and/or applied work ('*them*' versus '*us*', or survivors versus researchers), and (3) universality versus local value systems.

Also, we find different interest groups in emergency and development situations. First, there are the victims and survivors who want their basic needs met, strive to rebuild their lives, and demand justice and visibility. Second, there are the emergency workers and researchers who want to understand the dynamics of conflict and recovery, and to implement the most adequate programmes. And third, in the author's opinion, there are the elites and institutions in charge of the '*transitional*' phase, eager to overcome the disasters and to move forward (while often denying the survivors' real needs). Although these three collectives may agree on the basic goal of ameliorating the impact of violence, they usually differ - often considerably - in their understanding of what lends dignity, who should define the needs, and how best to implement programmes.

The shared commitment to alleviate the impact of emergency situations should create a bond between survivors and workers in charge of the emergency programs, through always emphasizing the needs and strengths of the communities affected. The guidelines mention four core functions within the domain of '*Community mobilization and support*', (Action sheets 5.1 to 5.4, pages 93 – 115). This paper will briefly discuss these four core functions with a specific look at the Latin American context.

Facilitating conditions for community mobilisation, ownership and control of emergency response in all sectors

A good example of community mobilization involves the families of the missing in Colombia coming together to present their cases to the Inter-American Court. Another involves Peru's displaced groups presenting their vindications (demands based on their needs), linked to registration systems, health and education - on how to implement social reparations after the Commission for the Truth and Reconciliation. It could be argued that these examples are not '*emergency related*' but have the nature of so-called '*development work*.' The fact is that in Latin America there are places that hardly do not have a label of '*emergency*' or '*development*', but present features of both.

In emergency settings, prevention efforts promote bonds that enable communities to anticipate appropriate reactions and to reinforce a minimum sense of control when a natural disaster arises or violence erupts. Memory and the learning from previous experiences (known as *'feed forward'*) are crucial. The *control of emergency response* in all sectors can be accomplished through general steps such as described by Perez-Sales for El Salvador (Pérez-Sales et al., 2005).

Facilitating community self help and social support

The tension between the individual and the collective, their diversity and commonalities, should ideally allow for different survivors to speak with a common voice and thereby be better heard. The challenge for survivors of emergency situations (and the rest of the social actors) is not only to promote their individual resiliency to maintain control of their lives, but also to rebuild their trust about living in their communities and societies. Universally, both levels of recovery - individual and collective - are crucial for better understanding the prevention of the catastrophic impacts of violent political conflicts and natural disasters. This is reflected in the following quotes from individual testimonies of survivors in Chile as presented in Patricio Guzman's documentary (*The Pinochet Case*, 2000):

- *'The relevance of staying connected to others for the individual and the community mental health [. . .]*
- *The type of wish for survival you get through the involvement in the movement'*;
- *'when they steal your voice, and your physical strength, but not your will to resist and fight'.*

The basic point is that getting together (mobilizing as a group) shapes and materializes the need to continue living their lives in the best possible way; that it is positive for the survivors.

Facilitating conditions for appropriate communal cultural, spiritual and religious healing practices

It is essential for emergency work to be *'committed to the context'* when designing and implementing programmes. This means finding ways of working that *'make sense'* to the so-called *'beneficiaries.'* It also requires attention to different generational, gender, and vulnerable groups; highlighting their resilience in the face of adversity. Crucial considerations include the actors and actions involved in local ways of healing, the symbols connected to *'Mother Earth'*, the generational and gender realities (e.g., the positive role of women on the one hand, as well as the rape killings along borders, the increasing sexual abuses and domestic violence, on the other hand), and the extended phenomena of migration, urbanization, and land/property issues. The importance of spiritual practice and burial rituals were already described in the handbook of the Sphere Project (2004) and need to be recalled in every emergency.

Facilitating support for young children (0−8 years) and their care givers

This last function relates to the health and education fields that are described elsewhere in the guidelines. Infants and young children are highly vulnerable to both sudden onset and chronic disaster events due to their partial, or total, dependence on adults. However, that does not make children *'victims'* without any agency. Results of research with children after disaster counters assumptions that responses of child survivors would tend to

be maladaptive and passive. (Ensor, 2008) Many children around the world live in a constant state of disaster as a result of chronic poverty, violence, or unsafe living conditions. Therefore, the number of global organizations for children in adverse situations are increasing, particularly in South Asia, South America and Africa (UNICEF, 2007). In several Latin American settings the increasing awareness of the realities of orphans and child labourers have spurred movements such as NATS (*Niños y Adolescentes Trabajadores, working children and teenagers*).[2] NATS enhance, a mong other things, the voices of the children themselves, acknowledging the real contexts that challenge some universal statements/assumptions about children.

In sum, listening to and learning from the diverse communities in various Latin American settings is essential for improving the psychosocial support in emergency situations. The communities themselves, and the learning extracted from the past, can promote prevention and more effective ways of coping and establishing strategies that reinforce the ultimate goal: to aim towards greater wellbeing and a better humanity.

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[1] It could be argued that these representations pertain not only to this part of the world, but can also be found in the anti-apartheid community mobilizations in South Africa, in the work of the minority Muslim groups in Batticaloa, Sri Lanka, and in the displaced communities around Srebrenica in Bosnia Herzegovina.

[2] See videos at http://www.youtube.com/user/ danijaras.

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