



# REGIONAL EMERGENCY PSYCHOSOCIAL SUPPORT NETWORK

Q U A R T E R L Y      N E W S L E T T E R

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## FIRST EXPERT GROUP MEETING

# Asia and Pacific Regional Experts' Meeting on Psychosocial Response in Emergencies

ON AUGUST 30 AND 31, 2002, the 1st Asia and Pacific Regional Experts' Meeting on Psychosocial Response in Emergencies was held at the Royal Princes Hotel, Lan Luang, Bangkok, Thailand. Ms. Margaret de Monchy, Adviser-Child Protection, welcomed the participants while Mr. Bo Viktor Nylund, Emergency Planning Officer, facilitated the activities. Both are with the UNICEF EAPRO (United Nations Children's Fund – East Asia and the Pacific Regional Office).

Ms. de Monchy gave an overview and background of the social/political unrest and conflict situations in the East Asia Pacific region. She discussed the need to strengthen regional capacity for providing timely and culturally appropriate psychosocial responses for children and their families affected by armed conflicts and natural disasters. Thus, the Regional Emergency Psychosocial Support Network was proposed. The Network aims are: (1) development of a database on Regional expertise which ensures rapid access to assistance; (2) establishment of a resource center for relevant and useful materials and (3) development of a training program for capacity building.

The organizations and their representatives who were present were: Dr. Irwanto from the Center for Societal Developmental Studies,

Atma Jaya Catholic University, Indonesia; Dr. Nurdin Abdul Rahman from the Rehabilitation Action for Torture Victims in Aceh, Sumatra, Indonesia; Dr. Elizabeth Protacio-de Castro, Convenor and Ms. Agnes Gamacho, Program Officer, from the Program on Psychosocial Trauma, University of the Philippines; Dr. Les Spencer, an enabler for the UN-INMA, Australia; Dr. Michael Heganauer from the World Vision International Regional Office, Bangkok; Dr. Penchan Saipan from Sapasittiprasong Hospital, Ubolratchathani, Thailand; and Dr. Srivieng Pairojkul from the Department of Pediatrics, Khon Kaen University, Thailand.

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Visit our website and experience  
the 21st century way of Psychosocial Networking!

## FAQ

Gives you answers to most frequently asked questions about emergencies and psychosocial responses.

## ABOUT US

Gives you a brief description of the Regional Emergency Psychosocial Support Network and its objectives.

## NEWS

Up-to-date information on activities and events involving the network and its members can be accessed here.

## ONLINE RESOURCES

Gives you access to the searchable database:

- Resource Persons database (name, contact details and services offered)
- Organizations database (name, mission-vision, contact details and services offered)
- Information database – a collection of relevant international laws research studies and training modules relevant to psychosocial response in emergencies. (author, subject, title, geographical scope)

## ONLINE REGISTRATION

Individuals and organizations may use this form if they wish to be included in the searchable database. Inclusion will be decided on by the Secretariat in accordance with the criteria set by the group.

## MESSAGE BOARD

Where you can post messages for discussion!

## SECRETARIAT

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## FORUM

# Interfacing Alternative and Complementary Wellbeing Ways For Local Wellness **Intercultural Peacehealing in the SE Asia Oceania Australasia Region**<sup>1</sup>

A Conversation Paper prepared for the SEAsia Oceania  
Psychosocial Emergency Response Network Support (a UNICEF Initiative)

Les Spencer<sup>2</sup>, Dihan Wijewickrama & Andrew Cramb

## Emerging Possibilities

This paper discusses the possible actions that nurturers of psychosocial and other forms of wellbeing (First, Third and Fourth Worlds) may connect themselves. This is crucial in their support for victims of manmade and natural disasters because these actions enrich local ways.

## The Context

Nowadays, First World Aid bodies come to the SE Asia Oceania Region often with scant understanding of local ways and logical frameworks. They usually employ First World wellbeing ways, concepts or methodologies. However, the way of the First World is not the primary or appropriate way of the region. This results to the fraying of the cultural fabric of the very people being supported.

“This paper is a response to a call from members of the working group for a discussion paper on the interface or convergence between First, Third and Fourth World healing wellbeing ways, especially with interfacing with the healing ways of Oppressed Indigenous people and Oppressed Small Minorities in the Region.”

Included here is an analysis of the Netherlands paper ‘Guidelines for Programmes’<sup>3</sup>- Psychosocial and Mental Health Care Assistance in (Post) Disaster and Conflict Areas.’ This document, which is very consistent with First World ways, is highly specialized and is the “distilled wisdom of highly specialized people.” Sadly, the First World way is not appropriate for the SE Asia Oceania Region.

Indeed, there is a “dearth of Western psycho-social aid bodies that have any experience of Indigenous and Oppressed Small Minority nurturing/healing wellbeing Way, or experience in enabling locals engage in self-help.”

## Future Possible Actions

The paper looks into ways of nurturing locally emergent contexts and practices imbedded within the disaster context. This will enable local voices, resources, wisdom and capacity to co-reconstitute themselves according to their local

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ways. This link is missing in the Netherlands document and in the First World Aid generally. First World groups hint on their desire to embrace the locals, though their frameworks make no provisions on how to do so.

“Intercultural enabling and support of the local ways are embodied action finessed by mentored experience engaging in enabling real contexts.” It is the ability to draw on embodied intercultural wisdom in order to act appropriately unto the moment; the

ability to be gently present so as to identify and connect with the local wisdom and ways. Intercultural enablers, who are very special people with scarce and vital experiences, may be found among other Indigenous and Oppressed Small Minority People in the Region - within the Laceweb.”

The working group is seeking to encourage action at the interface of the Worlds. In this light, they commit to work on a sequel to this paper. They are also looking into initiating an email exchange, telephone conferencing and sub-group meetings. Here, key nodal intercultural enablers from the Laceweb will have the opportunity to contribute. They also propose to non-compromisingly explore the wellbeing interface between grassroots self help and other entities (First World & Regional governance, NGOs and CBOs). Lastly, funding for small local community visits to identify local nurturers is being considered. ■

## RESPONSE TO THE PAPER

Dr. Elizabeth Protacio-De Castro of the UP-CIDS Psychosocial Trauma and Human Rights Program raised some questions and noted some points on Dr. Spencer’s paper. Dr. Spencer acknowledged them and responded by requesting the group to study the full-length study format which contains the details of the study pertinent to Dr. Protacio-De Castro’s inquiries. Included below are excerpts from the exchange:

**DR. PROTACIO-DE CASTRO: Who are the Oppressed Indigenous and Oppressed Small Minority People or grassroots?**

DR. SPENCER: The region has around 75% of the global ‘indigenous’ population (approx. 180 of 250 million). Laceweb also seems to have resonance for oppressed Indigenous people elsewhere - for example North American First Nations.

The region has ‘trans-border’ demography. We understand that in the Region, Indigenes and Small Minorities are threatened on two broad fronts: environment (physical), survivability, sustainability status, spiritual, cultural and communal.

In particular localities, varying people may be called ‘grassroots’. The Laceweb model<sup>4</sup> is emerging as resonant or harmony with natural living systems for nurturing wellbeing within and between all people of the Earth. The SE Asia Oceania Australasia Region has small Intercultural Normative Model Areas (INMAs) emerging for exploring peacehealing.

**DR. PROTACIO-DE CASTRO: What if the victims/survivors of armed conflict and violence do not fit this category? Will the informal network and model still work or be applicable?**

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DR. SPENCER: We sense the Laceweb informal network and model may still work and be applicable. The Laceweb model has been evolving for intercultural healing between the Worlds. Mediation Therapy and Peacehealing processes evolved within the Laceweb network may soften the monologues between the conflicted, working towards relational dialogue and mutual re-constituting action. A Laceweb foci is the respect and celebration of difference for unity. To introduce a term used by Anthony Judge, the Laceweb is evolving a meta-answer

'The difficulty is to avoid the temptation of defining this meta-answer as an answer and thus ending up in the current trap (Pertaining to the formulation of answers whose nature forces them to compete in the unending, and essentially inhumane, "gladiatorial combats" of the "answer arena", in an effort to attract the temporary support of fickle "spectators" partly inspired by novelty. -eds.). But at the same time, if it is to be relevant, the meta-answer should do more than simply provide a context for the emergence of better answers.'

The issues raised by the foregoing paper will be a theme in a future paper.

The Laceweb model has been demonstrated to work and work well among First World people of Anglo origin in Australia since the Sixties. These people were the most marginalized people - those from asylums and prisons. The model also works among people with diverse ethnic backgrounds now living in remote areas of Australasia. Dr N. Yeomans also artfully used this model among the 'elite' engaged in the psychosocial area in Sydney - social workers, criminologists, parole officers, prison officers, sociologists, psychologists, anthropologists, and also businessmen (interested in "the people side" of business). The processes emerging in that network were embodied into the Fraser House dynamic. Margaret Mead linked into this energy and remarked to an Anthropologist (that the principle author is interviewing for his Ph.D.), words to the effect that this psychosocial network/Fraser House energy nexus was the most 'complete' process for wellbeing renewal that she had ever found anywhere.

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Participants to the Asia Pacific Regional Experts Meeting

The participants shared about their work in the psychosocial response field. The Philippines and Indonesia gave detailed presentations on the responses to emergencies based on their recent experiences of armed conflicts. This gave the group a glimpse and an understanding on the situation in the two countries. The participants from Thailand reported on the current level of psychosocial response in their country. They expressed their support in putting up the network that would improve Thailand's capacity to respond during conflicts or natural disasters.

Mr. Sean Devine, UNICEF Consultant, presented the current database of organizations engaged in psychosocial emergency response in the South East Asia and the Pacific Region as culled from the worldwide web.

The participant from Australia showed his current work with indigenous Australian and refugee populations. His work is focused on enhancing natural indigenous healing networks already existing in these communities. The representative from the World Vision Regional Office showed his work on psychosocial recovery that is focused on care for caregivers.

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Two papers have recently been written by Stuart Hill (a Professor of Social Ecology from University of Western Sydney) applying Laceweb Cultural Keyline principles at the heart of the Laceweb model firstly, to agriculture, and secondly, to Australian Industry ('Industrial Keyline').

The book that the 'Shrimps and Greens' reference comes from outlines many examples of First World organizations who are beginning to explore some aspects of wellbeing possibilities flowing from recognizing mutual human action as being 'organic' - as being a living system with self-organising thrival potentency (Pascale R. T., Millemann, M., & Gioja, L., 2000). The authors of current paper are founders of the Centre for Self Organizing Systems.

We reiterate that, we do not speak for others. Most in the Laceweb, are concerned about how to get through the present day. These people have local focus. Some have wider foci - tuned to bigger possibilities I sense that some experienced male and female Laceweb enablers may be available as resource people for the SE Asia Oceania 'expert' group - along with myself.

**DR. PROTACIO-DE CASTRO: I can think of many exceptions to this category. What if they are not a small minority and what if they are victim/oppressors themselves? Is there another model for them?**

DR. SPENCER: As mentioned above - the same model may apply. The model has been used well with indigenous (as well as First World) combatants, ex-prisoners and murder/rapists within prison populations. The principle author has been involved in these contexts. Dr N. Yeomans arranged for him to work for 18 months with murderers and rapists (in prison) using group processes to enable the prisoner's self and mutual help and enrich the experience of the jail psychologist.

**DR. PROTACIO-DE CASTRO: In your list of differences between First World Ways and Local Grassroots Way: Local governments in some cases are alright and not necessarily always the protagonists. Their service delivery systems may**

**be the only one that works in some areas of conflict.**

DR. SPENCER: Yes. If the local people are decimated and there is little by way of self-help, then this type of context may be enabled by the Laceweb model - refer to the 'Shrimps and Greens' example. Enablers within the Laceweb model have fostered (or will soon foster) lateral links with local government service delivery - as is happening in the Cairns district in Far North Queensland.

Laceweb people in Cairns energized local indigenous people to be involved in voluntary mutual-help alongside local and state government action for a massive transformation to community housing and urban habitat in two of Cairns most degraded suburbs - the Manoora and Moorabool Projects.

**DR. PROTACIO-DE CASTRO: In really extreme cases (e.g. East Timor), it may be necessary for outsiders to come in to help the locals, of course, on a temporary basis and still respecting local ways.**

DR. SPENCER: Yes, as discussed in the paper.

The First World has driven East Timor renewal along First World lines despite local protest. The model is driven to set up a 'Nation' is top-down in principle and effort. First, an adversarial political structure was set up. This was followed by the legal - criminal court-policing-prison infrastructure and the reconstituting of civil society and care. Bougainville has been resisting outside driving. A Laceweb model that is a reversed, reframed, isomorph (of similar form) of East Timor's First World driven process is in <http://www.laceweb.org.au/ext.htm>.

**DR. PROTACIO-DE CASTRO: How does one account for multi-cultural and multi-lingual experiences that include western (First World) ways? Due to the country's colonial past, these western ways are already integrated in their "healing practices" e.g. Christian bible studies and prayer groups. Is this also part of indigenous ways of healing?**

DR. SPENCER: This is unfolding all the time with the West Papuans, Bougainvillian and Australian Aboriginal people.

The local people share what works to others. From these interchanges they choose the healing ways they want and adapt as they see fit. For example, while many Bougainvilians follow Christian beliefs but many among

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them also practice Animism. When Lacweb people enable urbanized (those who have adopted much of First World way) groups of indigenous people in self-help and mutual-help gatherings, often it is the really old ones who say that what is happening now in the Gathering is the 'old way' and that it is vital. We look forward to further dialogue in the group.

**DR. PROTACIO-DE CASTRO: Thanks for your well thought out replies to the comments/points I raised. I appreciate that you took time to do this. ■**

1 Full text of this paper may be viewed at [http://www.psychosocialnetwork.org/faq\\_interfacing.htm](http://www.psychosocialnetwork.org/faq_interfacing.htm)

2 Dr. Les Spencer is one of the members of the Regional Emergency Psychosocial Support Network. He is an enabler under UN-INMA, Australia.

3. Full text of the paper, "Guidelines for Programmes-Psychosocial and Mental Health Care Assistance in (Post) Disaster and Conflict Areas" can be downloaded from [www.nizw.nl/nizwic](http://www.nizw.nl/nizwic)

4 More information about the Lacweb model can be found at <http://lacweb.org.au>.

exchange network; (3) training source; (4) rapid response conduit. As a resource center, the network shall maintain a relevant and up to date database. Being a venue for information exchange, the network shall create a website, e-groups, e-conferences, a newsletter and a CDROM.

The network's training function includes two training phases. The first focuses on consolidating existing materials and initiatives in a database. The second phase scheduled for the latter half of year 2002 or early 2003, will focus on training a regional emergency response team with a common language, vision and an understanding of the lessons learned in the region. As a response conduit, the network shall promote cooperation and information sharing for specific emergency situations. This function also includes developing a database of institutions and people who could be quickly deployed in emergencies; development of preparedness training; creation of an emergency kit with key materials and advice; and forming conference calls as required during emergencies.

It was agreed that a Secretariat will be established and it will be based at the Psychosocial Trauma and Human Rights Program in the University of the Philippines and an e-group will be created as a consultative group that will give support to the Secretariat. ■

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Mr. Bo Viktor Nylund facilitated the brainstorming session on the current proposal and regional needs. Groups were formed to conceptualize future logistical plans for the implementation of the support network. The first group tackled policies, training and rapid response while the second group focused on organization, research and database development. The results became the basis for the Proposal for a Regional Emergency Psychosocial Support Network and the group action plans.

The Proposal for the Regional Emergency Psychosocial Support Network indicates the following functions for the network: (1) a resource center; (2) an information

## **ANNOUNCEMENT!**

We are looking for a **CONSULTANT** who will develop an emergency kit and who will build-up and manage our database resources. For more information, email us at [admin@psychosocialnetwork.org](mailto:admin@psychosocialnetwork.org)

Let us know your needs. Let us learn learn from each other. We are open to your contributions. Visit our website at [www.psychosocialnetwork.org](http://www.psychosocialnetwork.org). or reach us through our **SECRETARIAT** c/o Psychosocial Trauma and Human Rights Program, G/F Bahay ng Alumni, Magsaysay Ave., University of the Philippines, Diliman, Quezon City 1101 Philippines. Telefax: 632-4356890/ 9293540. Email: [Admin@psychosocialnetwork.org](mailto:Admin@psychosocialnetwork.org)

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