

sustaining hope

A Mental Health Program for Women to Help Overcome the Traumas of War in Afghanistan

*d*r. Melin Vranesic is a psychiatrist who was born and raised in Sarajevo and who has worked with the United Nations and other international agencies over the last several years in the Balkans, the North Caucasus and now, Afghanistan – tending to victims of the upheavals and trauma in those regions. What spurs him on, he says, is “bearing witness to the strength of the human spirit despite the most inhumane conditions.”

Working under the auspices of the International Medical Corps, which has been helping meet Afghanistan’s health needs since 1984, and thanks to a program developed in partnership with the Bristol-Myers Squibb Foundation, Dr. Vranesic is now on the ground in the Shomali Plain region north of Kabul, seeking to help develop a pilot, 16-month, community-based mental health program for women in the area. The “human spirit” has been challenged there by years of war, internal conflict and displacement. The program in which he is involved will provide training to female health professionals who will offer counseling, treatment and educational services for area women. They will focus on common mental illnesses including depression, anxiety and posttraumatic stress disorder. During the pilot, it is expected that 25,000 women and girls will receive treatment and nearly 7,000 counseling sessions will be conducted. In addition, trainers will be trained, new clinics established and a model for other areas created.

There are few mental health professionals in Afghanistan; a WHO report in 2001 noted eight psychiatrists, 18 psychiatric nurses and 20 psychologists in the country. Thus, the program aims to create a process that will train female mental health professionals, who, because of culture and tradition, are the only ones who will be able to work with other women. “The problem of diagnosing and treating mental health disorders is compounded,”



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Dr. Vranesic says, “because in Afghan society many women feel unacknowledged, disavowed and exploited. Most are uneducated and illiterate, leaving them at the mercy of their husbands, families and communities.

“There is a huge stigma attached to sharing any sort of mental health problem. Since this is not a culture friendly to overt psychological suffering, you teach yourself to present these things in a physical way: ulcers, chronic headaches and pains that never go away. When you scratch the surface, acute social problems are brought up. In this society, too many women have no sense of ownership over their minds, their bodies or their lives. They are born into a set of answers

rather than a set of questions.”

He adds that it is important not only to provide counseling to these women, but also to support a sense of community as well. “It is important for women to have a place of freedom and safety where they can share their problems and hurts, and also be able to find a way to provide for their households and feed their children,” Dr. Vranesic says. “You can take a single individual out of a situation where they get abused or beaten, but if you put that person back into that same unchanged situation, you haven’t done much. As you provide a mental health service you also have to work at the community level to provide resources and create a level of improvement in living conditions.

“Everywhere you look at wars and natural disasters, communities have an inherent capacity to rise up to the situation and provide for one another,” he says. That’s why he’s optimistic about the outcome of this project. “That’s where I see hope – having communities take care of themselves. And that’s why I think working at the community level to provide mental health support has the greatest hope for success.”

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