



## **NARRATIVE REPORT**

### **6th International Conference for Health and Human Rights Communities in Crisis: Strengthening Resources for Community Reconstruction**

21-24 June 2001

Cavtat  
Croatia

#### **Preparation of the Conference**

The 6th International Conference for Health and Human Rights, entitled "Communities in Crisis: Strengthening Resources for Community Reconstruction" was prepared by the local organising committee, chaired by Dean Ajdukovic, and the international program committee, chaired by Loes van Willigen. Two announcements of the conference were sent out and distributed world wide, the first in September 2000 with the aim to raise interest in the conference, the second in December 2000, with the Call for Papers. Apart from these (hard copy) announcements, a website was opened with all information about the Conference, and with the forms for electronic submission of abstracts, inscription for participation and a request for financial support. Detailed information about the venue, registration fees and accommodation were also provided. Three weeks before the conference the program was also put on the web site. Small flyers were produced for distribution at local and regional meetings and by email.

Around 150 abstracts were submitted and reviewed by the members of the program committee. Subjects that did not correspond with the themes of the Conference and/or were not topical anymore were rejected. Around 130 abstracts were accepted and the authors, from 45 countries of all regions in the world, were notified that they could prepare their contribution to the Conference. Most abstracts concerned individual oral presentations, only a few symposia were proposed, one proposal concerned a round table discussion, three video presentation and around 16 posters were to be presented.

Before the conference 93 requests for travel grants and financial assistance from 39 countries were received. These were reviewed by the conference grant committee based on the following criteria: developing country status (DAC), presentation at the conference, not more than two grantees from the same organisation, priority given to countries and individuals who have participated seldom at international conferences, representation from the region and active role at the conference. Based on the amount of grants and the conditions given by the conference donors, the total of 77 conference assistance grants were approved to participants from 31 countries. The grantees were informed about this one month before the conference. As some of the subsidies arrived late, several grantees were not able to use the travel assistance grant either because of their other commitments already made or because the time for visa



procurement was too short. Thus, the total of 72 participants have finally benefited from the travel assistance grant. These grants covered expenses for accommodation and food, registration fees and partial travel costs.

The Conference took place in Hotel Croatia in Cavtat, where most participants were accommodated. Some participants preferred to stay in a cheaper hotel close by. Hotel Croatia has adequate facilities and meeting rooms for international conferences and is situated beautifully at the small bay of Cavtat. The size of Cavtat as a town facilitated informal gatherings of participants in the evenings. Since the international airport of Dubrovnik is at a distance of 15 minutes by car from Cavtat, the Conference was relatively easy accessible for participants from all parts of the world.

The hotel room fee included breakfast. Lunches in hotel Croatia were free of charge for the invited speakers and guests, and the grantees. Other participants could join the lunch for a reduced price. Hotel Croatia also offered a dinner buffet to the participants for a reduced price. Most participants, however, preferred to have dinner on one of the various terraces in the Cavtat' harbour.

### The outline of the program of the Conference and other general information

The main aim of the Conference was to focus on and develop ways of addressing destabilised communities from a human rights and health perspective. Both title and aim of the Conference underline the shift in the professional paradigm in the area of trauma, human rights violations and health. Whereas pathology and treatment on an individual level were subjects highly focused during our first international conference in 1987, in Paris, France, the attention at the present moment is directed towards interventions at a community level aiming at strengthening coping abilities and resilience of those affected by human rights' violations. Many presentations during the Conference, and more specifically during the first day, June 21, discussed practical experiences and results of based on studies concerning Community Reconstruction in the aftermath of war and violence..

This year we were commemorating the adoption of the Refugee Convention of Geneva in 1951, but at the same time the interpretation and implementation of the Convention are subject to national and international debates. Therefore, Communities in Crisis also clearly referred to the many asylum seekers and refugees in the world who are confronted with the measures of restriction and deterrence with regard to admission and reception in countries of arrival. These measures have undoubtedly an impact on their health and well being. Various workshops were dedicated to this theme, especially on June 22.

In former conferences attention has been given to impunity of gross human rights' violations. and how the mental health of on those affected by the abuses is impacted by impunity. Fortunately, however, the last decade has seen a growing awareness that truth, justice and reconciliation processes are needed for social reconstruction of affected communities. Such process have been developed in different ways both on national and international levels. During the third day of the conference (June 23), a number of presentations discussed the impact of



those processes on mental health of the affected communities, families and individuals.

An increasing number of colleagues are involved nowadays in providing training to others. An evaluation of experiences with training can improve future training programmes with regard to contents and methodology. A daily round table discussion regarding lessons learned from training was arranged.

Apart from the main themes mentioned above, workshops and other sessions were dedicated to specific target groups, like children, adolescents, women, torture victims and / or to specific interventions. Models and results of research were presented, and a variety of issues regarding Health and Human Rights discussed.

Internationally and regionally very renowned colleagues accepted our invitation to introduce the themes of the day each morning in a plenary session, respectively from an international and a regional perspective.. They represented theoretical perspectives, international policies, the academic world and daily practice.

Because of limited funds simultaneous translation in the two official conference languages, from English into Spanish and vice versa, during all sessions or the plenary sessions could not be realised. This has seriously hampered the efficiency of some sessions and has brought about complaints from some participants. Instead of that consecutive translation took place during the plenary sessions, and, when desired, during the Spanish spoken workshops. Also participants translated individually on a one-to-one basis for other colleagues from English into (mostly) East European languages.

Since several participants and presenters of papers did not arrive at the Conference without a cancellation of their participation, among whom were a few grantees, unfortunately at the last minute some changes had to be made in the program. This concerned especially the last two days. However, the chair of the program committee promptly dealt with these issues so that the participants were constantly informed of program changes.

### The opening session of the Conference

On Wednesday, June 20, at the 18.00 hours the Conference was opened by a speech of welcome from the local host, Dean Ajdukovic, followed by an opening speech from the secretary general of the International Society for Health and Human Rights, Dr Nora Sveaass. Unfortunately Dr. Ante Barbir, Assistant Minister of Health of Croatia could not leave Zagreb in time to give his welcome speech in person, but faxed his speech which was read before the audience. Dr. Zarko Puhovski, Chair of the Croatian Helsinki Committee for Human Rights closed the formal opening with an impressive speech about the need for construction of the civil society in countries with poor democratic tradition and affected by organised violence that would promote human rights and by extension care for people's health.

The opening session was followed by a welcome reception. Old acquaintances were renewed, new ones made.



Thursday, 21 June 2001 – From crisis to reconstruction

Mrs. Mary Petevi, representing the World Health Organisation, started the plenary session with a presentation of the recently published WHO document "Declaration of Cooperation. Mental health of Refugees, Displaced and Other Populations Affected by Conflict and Post-Conflict Situations". She declared that the prevailing opinion is that without early psychosocial support 180 million people will suffer from serious mental health problems. This number could be doubled if one also added the number of those who would develop cognitive, psychosocial and economic dysfunctions that would jeopardise both own and national reconstruction and peace. She followed by stating that given the nature and magnitude of the problem new approaches should be developed to "do the most for the most". According to Mrs. Petevi a public health model associated with active community participation, with multisectoral and pluridisciplinary capacity building must be used. Local, non-mental health personnel and community workers can be effective in providing the needed community-based psychosocial support once they have adequate training, technical guidance and the political and financial support. WHO believes that this approach will reduce the risk of pathologising suffering, will stimulate resilience and empower the concerned communities to work towards personal and community reconstruction, poverty and vulnerability reduction in a more efficient, cost-effective and sustainable manner. She called upon the audience to endorse the Declaration and work towards stronger partnerships and co-operation.

The second keynote speaker was Dr. Anica Mikus Kos from Slovenia who spoke about "Community based approaches to mental health protection in the post-war situation". She spoke critically about the vision of international agencies about rebuilding mental health services and developing programs. Despite the fact that one has seen a clear development over the last years, where the focus has shifted from individual and clinically oriented models towards community based and public health models, a balance between individual, clinical and community based public health approaches has still not been achieved. Nevertheless, in areas affected by armed conflicts many innovative and efficient psychosocial programs aiming at protecting mental health of children and adolescents, have been developed. These may well serve as models for work and interventions in the wealthy and war free countries as well. Mrs. Kos pleaded for a continuation of the discourse on the best practice of mental health and psychosocial activities in war affected populations. Guidelines and principles for international support should be developed based on these valuable experiences.

After a discussion based on these presentations and a coffee break the participants went to one of four parallel sessions. Experiences in the last ten years with community based approaches in the Republics of Former Yugoslavia, Peru, Europe, Australia and East-Timor were presented and discussed in three sessions in the morning. In the fourth the relation between culture and forms of community healing was spoken about.

After lunch the participants could choose between three sessions with presentations about community approaches in various regions in the world and experiences with ecological and psychosocial models of assistance, or join the round table discussion on training. The sessions following the break can be



described as follows: in one session specific models of community approaches were presented and discussed; in a Spanish spoken session experiences with therapy in Latin American countries were presented; in another session various observations and experiences with and around refugee communities in Europe were discussed; and in a symposium different forms of non-verbal therapy, like dance, movement and massage, were put to the fore, in form of presentations and active exercises with the participants of the symposium.

The program on day 2 finished at 17.30 and was followed by the General Meeting of the International Society for Health and Human Rights, in which amongst others, the WHO Declaration for Co-operation was endorsed by the Assembly.

### Friday, 22 June 2001 – Refugee Convention and Health

Prof. David Ingleby, the Netherlands and UK, opened the plenary session with a presentation entitled "Asylum policies: part of the solution or part of the problem?" In his keynote presentation he focused on the threat to health and well-being which asylum policies and procedures pose. He divided the health risks into two different categories. First, according to him, host countries erode the rights of refugees and asylum-seekers if they fail to provide them with adequate, accessible health care. Health care should be culturally appropriate and should recognise the special needs of recipients. Secondly, host countries must recognise the threat to (mental) health inherent in the procedures which asylum seekers and refugees have to undergo. In recent years, as Prof. Ingleby observed, strong concerns have arisen about the inhumanity of the procedures to which asylum seekers and refugees are subjected and the unnecessary stress which may be caused. In their anxiety to avoid being seen as a 'soft touch', governments may condone practices and procedures which amount to a fundamental subversion of the aims of the 1951 Convention and other internationally binding agreements on human rights.

The second speaker, Prof. Dean Ajdukovic, from Croatia, spoke in his keynote presentation, entitled "Refugee fate: fleeing, suffering and still hoping", about the effects on mental health of the recent wars in Middle and Eastern Europe. He observed in the past ten years a typical refugee pattern that is repeated once again, from Croatia to Bosnia to Kosovo and Macedonia. Both the refugees and the societies have gone through several phases: from disbelief and helplessness, over collective empathy, to bitterness, repatriation, and organised community responses. The difficulties of the social reconstruction of the post war communities pose more demanding tasks than anticipated by the authorities and the affected populations. The returned refugees in most cases feel fully neglected once they return to their communities. This is illustrated by the data demonstrating increasing prevalence of depressive symptoms, especially in children. Resettlement needs to be viewed as a slow and painful process within the larger framework of social reconstruction that last for years. Prof. Ajdukovic pleaded that programs should be developed that will not only respond to the acute needs, but also facilitate community development. The international community should recognize that facilitating social reconstruction, promoting human rights and building civil society, along with investments in local economies, are ways of preventing future conflicts. According to him, restrictions and deterrence as increasingly imposed on refugees by their governments will



have poor effects and bring about more suffering. Both papers were discussed with the participants after which the coffee break started.

After the break three parallel sessions took place in the morning. A symposium was convened about temporary resettlement issues in Australia; in one session through various presentations the important role of the school for the health of refugee children was discussed; and in one session results were presented of different evaluations of projects and research.

After lunch the round table discussion on training was continued. In three other parallel session various current issues in refugee health care were discussed, like the reaction of recipient countries on the increase in numbers of persons seeking asylum, the adaptation of forms of assistance to the governmental policies and the forms of counter-transference in assistance and therapy for refugees. Also forms of interventions for traumatized families and children were presented and discussed.

After a break 11 posters describing studies and/or descriptions of projects and models of interventions for populations affected by conflict and in post-conflict situations were presented. A very lively exchange took place between the authors and participants about the contents of the posters.

In the evening the organisers had arranged a Conference Dinner at the Konavoski dvori restaurant. For the invited speakers and guests, as well as for the grantees this Conference Dinner was free of charge. Other participants had to pay a reasonable fee for the dinner. Busses brought and fetched the participants to the site. A buffet with local food and wine was served and a Croatian band played music. This social event created a new opportunity to informally meet with other colleagues from other parts of the world, which was highly appreciated by the participants.

### **Saturday, 23 June 2001 – Truth, Justice and Social Reconstruction**

Dr. Paz Rojas Baeza, from Chile, opened the day with a plenary presentation entitled "Mental health disturbances due to absence of truth and justice". She reflected on the meaning and value of Truth and Justice concepts, based on the concrete experiences in medical, psychiatric, social and legal attention to people, families and communities in Chile. She presented a synthesis of the psychopathology and social disturbances produced by the absence of truth and the lack of justice within people's self, as well as its social fabric.

An overview was given of the creation of Extra-judicial Commissions of Truth and Justice in post war periods and of the meaning of those for the victims. Dr. Rojas continued with indicating the norms set by the Special Rapporteur on Reparations for Victims of Gross Violations of Human Rights and Fundamental Freedoms of the United Nations, and the consequences that these norms have in the mental health and human rights area. Finally, in her opinion, obstructions to arrive to a "Never Again" will hamper a complete Reconciliation.

Mrs. Edita Ostojic continued the plenary session with a presentation about "Telling the Truth". There is a common assumption that telling the truth





concerning events that occurred during war could have an important role for the reconciliation and social reconstruction processes. But because of the different interests, there seems to be more than one truth to distinguish, the truth of the perpetrator, of the victim and of the bystander. According to Mrs. Ostojic, the precondition for telling the truth as a healing process is twofold: (1) the three parties should be capable and willing to tell and listen to each other; (2) there should be an atmosphere in which telling the truth is seen as a process of learning from mistakes, with the possibility of rehabilitation of criminals instead of (only) punishment. To create those two preconditions three domains of knowledge should be enforced: (1) the effect of trauma, the denial, also transgenerational, within the three groups; (2) a demystification of violence as if of interest of entire nations, as well as more knowledge about the treatment of perpetrators; (3) the resources for spiritual recovery.

A short discussion between the presenters and audience took place.

After the break four parallel sessions took place: One was a Symposium about Justice, Accountability and Social Reconstruction which was continued in the afternoon. During this symposium the results of studies were presented, based on the processes of social reconstruction in Bosnia, Herzegovina and Croatia. The relationship between the work of International Criminal Tribunal for Former Yugoslavia in The Hague and these processes were highlighted. Other sessions in the morning concerned the consequences on mental health of impunity in various Latin American countries (also continued in the afternoon), the experiences with interventions in some regions in former Yugoslavia, and various human rights issues, like guidelines for assisting people in hunger strike, and guidelines for the examination of victims of torture (the Istanbul protocol).

In the afternoon the round table discussion on training and the two sessions which started in the morning continued and in one session various papers were presented concerning sexual violence of women as part of organised violence. The program for Saturday afternoon finished at 16.00 h., what was gratefully used by most of the participants for a visit to Dubrovnik or a swim in the sea.

### Sunday 24 June 2001 – Closing sessions

At Sunday morning the Conference was finished with a plenary Closure session. But before that 5 parallel sessions took place, of which two video session and the closing session of the round table discussion on training. The video session entitled "Calling the ghosts" concerned the testimonies of two former Yugoslavian women who have been detained, tortured and sexually violated. In the other video session two videos were presented about creative, health promoting activities for refugee children in groups and at school. In another session the effects of the truth and reconciliation process in Chile and South Africa were discussed. And in the fifth session four papers were presented concerning specific vulnerable groups, like traumatised fathers, adolescents, women and children.

Mr. Amin Medani, Chief of Mission in Croatia of the UN High Commissioner for Human Rights, addressed the participants as the first speaker of the plenary Closure, emphasising the importance of the Conference. He was followed by Dr. Svetlana Broz, cardiologist, author of the book "Good People in a Time of Evil.



Human Destinies in the Bosnian War, 1992 –95” and grand daughter of the late Marshall Josip Broz Tito, former leader of former Yugoslavia. She told about her impressive work, namely the interviewing of people of the three ethnic groups in Bosnia Herzegovina about their personal experiences during the war. She was inspired in her work, as she said, by the publication of Victor Frankl, survivor of Auschwitz. With her interviews she was able to uncover the goodness of people in the three ethnic groups despite their confrontations during war. As she found out after the publication of the interviews in former Yugoslavia, it contributes to mutual recognition and therewith to social reconstruction and reconciliation.

Mrs. Nora Sveaass, Secretary General of ISHHR, formally closed the Conference. She gave a brief summary of the conference and underlined the importance of signalling to the world that the question of truth and justice following human rights abuses is one of high relevance to health and reconstruction. The international work bringing the responsible to justice and showing all those in disrespect of human rights abuses that this will not be tolerated, and that no safe heaven must exist for them, is something the Society sees as a priority. The important work in relation to developing community oriented models, which has been the main focus of the conference, has taken an important step ahead, she commented, and concluded by pointing to the decisions taken at the AGM to endorse the WHO declaration and a Letter of collaboration with Red Cross. Both of these agreements represent great challenges in the future work of the Society and represent a clear will to refine and improve professional work and methods.

An informal gathering after the Closure gave the participants the opportunity for a last exchange and farewell.

### After the Conference

Resolutions proposed by participants were discussed and will be revised. After a request for comments from participants they will be sent to relevant organisations and institutions. The ISHHR Council decided to hold the 7th International Conference on Health and Human Rights in Palestine, in year 2004.

At the closing session the participants received a conference evaluation form to fill in, and 67 forms were returned. The participants were asked to assess a number of aspects of the conference using a scale from poor (1) to excellent (5) and also to provide comments and suggestions. The average overall conference assessment was 4.31 and other aspects ranged from 3.76 (options for free time) to 4.71 (conference venue in Cavtat). The conference staff assistance received second best assessment (4.60). The detailed evaluation results and comments provided by the participants are attached to this report showing that all the aspects were assessed as very good. The results of the evaluation will be used for the organisation of future ISHHR Conferences.

Authors of presentations were requested to submit their full, revised paper for publication in the Proceedings of the Conference and/or on the website of ISHHR. The publication of the Proceedings will be edited by and editorial committee and is expected for November/December 2001.





The ISHHR Council decided to hold the 7th International Conference on Health and Human Rights in Palestine, in year 2004.

Thanks to the generous support from the following funding agencies, the conference could be arranged and may be described as a success, both from a professional and a social point of view. A special thanks to:

- The Norwegian Foreign Ministry
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