

Book review

Christian Pross, *Verletzte Helfer: Umgang mit dem Trauma: Risiken und Möglichkeiten such zoo schützen. Leben Lernen - Klett-Cotta, Stuttgart 2009. 288p. ISBN: 978-3-608-89090-7*

In a recent issue of *Intervention*, Curling & Simmons (2010) explored a variety of stressors affecting humanitarian aid workers and reviewed structures for support. In the same issue, a protocol for how to 'care for the caretakers,' was suggested (Anonymous, 2010). Several earlier articles in this journal, such as van der Veer, de Jong & Lansens (2004) and Fernando (2004) also emphasised the need for clinical supervision for counsellors who work with survivors of war trauma to help prevent burnout. In addition, Westerveld-Sassen (2006) pointed out that all trainers working in the former Yugoslavia addressed the issues of secondary trauma, burnout and counter-transference.

The following account by the journalist Nicholas D. Kristof (2006) vividly illustrates the human tragedies that aid workers and war trauma therapists may observe in war torn regions of the world:

In my years as a journalist, I thought I had seen a full kaleidoscope of horrors, from babies dying of malaria to Chinese troops shooting students, to Indonesian mobs beheading people. But nothing prepared me for Darfur, where systematic murder, rape, and mutilation are taking place on a vast scale, based simply on the tribe of the victim. What I saw reminded me why people say that genocide is the worst evil of which human beings are capable.

On one of the first of my five visits to Darfur, I came across an oasis along the Chad border where several tens of thousands of people were sheltering under trees after being driven from their home villages by the Arab Janjaweed militia, which has been supported by the Sudan government in Khartoum. Under the first tree, I found a man who had been shot in the neck and the jaw; his brother, shot only in the foot, had carried him for forty-nine days to get to this oasis. Under the next tree was a widow whose parents had been killed and stuffed in the village well to poison the local water supply; then the Janjaweed had tracked down the rest of her family and killed her husband. Under the third tree was a four-year-old orphan girl carrying her one-year-old baby sister on her back; their parents had been killed. Under the fourth tree was a woman whose husband and children had been killed in front of her, and then she was gang-raped and left naked and mutilated in the desert. Those were the people I met under just four adjacent trees. And in every direction, as far as I could see, were more trees and more victims – all with similar stories.

Trauma therapists are similarly confronted with personal accounts of torture, cruelty and violence on a daily basis. In this process, we become personal witnesses to massacres, rape and persecution of enormous proportions. Clearly we cannot remain personally unaffected by these experiences and they leave indelible marks on all of us, including (or especially) professionals with years of experience. Apparently, as time passes, we become 'vicariously' wounded by the pain

and suffering of our clients, and, for some of us, it makes us feel so outraged that we tend to displace our anger on people who have nothing to do with the initial crime.

This is the subject matter of a new fascinating book on the 'wounded healer' published in the German language by Dr. Christian Pross, *Verletzte Helfer: Umgang mit dem Trauma: Risiken und Möglichkeiten sich zu schützen (Wounded Healer: Dealing with the Trauma. Risks and Ways to Protect Oneself)*. The well known trauma therapist and researcher was the cofounder (1992) and director, until seven years ago, of *The Berlin Center for the Treatment of Torture Victims (BZFO)*, which was founded with support from the German Red Cross. Since 2009, he was the scientific director of a working group for psychotraumatology studies at the centre for survivors in Berlin – affiliated with the International Rehabilitation Council for Torture Victims (IRCT). His earlier controversial book on the struggle surrounding reparations to survivors of the Nazi terror received wide claimed praise and was published both in German and in English (Pross, 1988/2001, Pross, 1998).

This new book on the *Wounded Healer* is based on a study that was sponsored by the Hamburg Foundation for the Advancement of Research and Culture. It is based on material that was collected from interviews with 72 professionals who worked in treatment centres for survivors of crisis regions, war, sexual abuse and political persecution and in organisations for human rights, supervisors and psycho trauma experts from eight countries, including low income countries. Earlier publications on this theme have clearly described the concepts of 'burnout', 'compassion fatigue', 'vicarious traumatization', and 'secondary traumatic stress.' (McCann & Pearlman, 1990; Pearlman & Saakvitne, 1995; Pross, 2006), emphasising the constant

need for some kind of 'care for caregivers.' However, in contrast to these earlier studies on the side effects of treating trauma survivors, which mainly focus on the individual helper, the present book deals with the effects of trauma therapy on teams and organisations working in this field. Since Pross observed that people working in such institutions 'move through a minefield of the abysses of human existence' (p. 28), over involved therapists tend to re-enact the vicissitudes of trauma within their specific institutional structure, often creating chaos and destruction. Studying such a controversial and almost taboo subject is not only courageous, but also very important, as it has been largely neglected in earlier literature.

The book is well researched and written in an easily readable style, with a number of illustrative situations. Pross draws on material from institutions from both the east and the west and high and low income settings. He identifies the many stress factors and parallel processes that are prevalent in treatment centres for trauma survivors and shows how a breach of the helpers can be effectively prevented. Some of the observations include how structural mechanisms in teams are affected by such an overload, as well as characteristic attitudes which alternate between self and narcissistic grandiose fantasies and congestion symptoms, including fatigue, depression, anxiety and addiction. Deprived or 'wounded' therapists will inevitably influence their working conditions and sometimes create a chaotic working environment for everybody. The book is providing ample evidence of how the 'toxicity of the trauma' has a strong influence on the employees in any such institution, sometimes creating a violent atmosphere of mistrust. It is a text suitable, not only for staff and leadership, but also for organisational psychologists who are called upon

to provide supervision and to facilitate team building and organisational development in such institutions.

Some of the methodology is based on the work of Wilson & Lindy (1994) on counter-transference in the treatment of clients with posttraumatic stress disorder (PTSD) and their understanding of the particular psychodynamics of helper and client. However, as many of the various structural and organisational factors in such institutions were not easily detectable with standardised questionnaires, Pross utilised a method of qualitative social research that involved intensive dialogue, coded interviews and personal encounters. With this methodology, he was able to reveal various characteristic structural patterns that seem to be present during different phases in the development of (more or less) stressful and conflicting institutions, both in the pioneer phase and later, which strongly influence the work situation of staff members. For example, in trauma treatment centres with a culture of high levels of stress and conflict, there might be some 'martyr' staff members with unrealistically high moralistic goals who would sacrifice their private life for their clients. Such staff members would gradually start to conceive therapy as a struggle and become over identified with their traumatised (victim) clients, whom they regard as 'better people'. As a result, some of these (narcissistic) individuals would start to suffer from overwork, dissatisfaction, family problems, depression, a wish to give up their positions, psychosomatic ailments, addiction, nightmares, a negative world view, sleep disturbances, and/or irritation. In addition, the infected dynamics between survivor and perpetrators would be displaced upon all hierarchy systems within the trauma treatment organisation so that any authoritarianism, discipline and setting

of limits would be viewed at least with some amount of suspicion, and at most, as a continuation of the violence and torture that the clients had experienced during their traumatic past. In a team, which, for example, were required to implement quality improvement, its leadership would be accused of abusing its power. Thus, a paradoxical situation would evolve in which professionals who are fighting against the misuse of power and violence, would be themselves inflicting wounds on others, and on themselves.

To counteract such negative influence, the book suggests a variety of interventions for disrupting the emerging parallel processes leading to secondary traumatic stress and vicarious traumatisation. Such recommended interventions include regular supervision, consultation, personal therapy, guided imagery, support groups, psychodrama groups, stress reduction programmes, mediation and spiritual renewal. Other antidotes for therapist burnout include personal activities referred to as *healing activities*: exercise; spending time with family, friends, and children; keeping a journal; travel; and other activities intended to reconnect practitioners with their bodies, minds and support networks. Pross recommends that the 'wounded helper' becomes aware of the fallacies of their professions and clearly state realistic goals, take time for documenting their work, engage in academic studies, continued education, and cultural activities, as well as utilising humour, sport, travel and other 'nontraumatic' activities. Clearly, the ability to negotiate a suitable personal and professional distance from the working place seems to be the intended purpose of such activities.

Also, the book emphasises the importance of making structural changes when they are needed – including a clarification of

the hierarchical structure – to minimise the destructive group dynamics in such institutions. Thus, a gradual organisational transformation may be negotiated to minimise the chaos that may have been created from a lack of leadership. In addition, it may be important to establish clear rules, sound regulations and working habits, even if there must still remain an understanding of the need for democracy and a space for some ventilation of aggression.

For many of us who work in such treatment centres, this book is not only an important academic study, but also a practical book with recommendations on how to protect ourselves from the additional stress of working with severely traumatised survivors of man made trauma and when confronted with human tragedy of unimaginable proportions.

An English excerpt of the findings of Pross' book is in press:

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