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**Handbook training in community-based sociotherapy:
experiences in Rwanda, East Congo and Liberia**

Dekker, C.

Citation

Dekker, C. (2018). Handbook training in community-based sociotherapy: experiences in Rwanda, East Congo and Liberia, 234. Retrieved from <https://hdl.handle.net/1887/68342>

Version: Not Applicable (or Unknown)

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Handbook Training in Community-based Sociotherapy

Experiences in Rwanda, East Congo and Liberia

Cora Dekker



Universiteit
Leiden



African
Studies
Centre
Leiden

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Experiences in Rwanda, East Congo and Liberia**

‘It is in the nature of beginning
that something new is started
which cannot be expected
from whatever may have happened before’
Hannah Arendt.

This handbook is dedicated to:

The first training participants in Byumba: Bernard, Bibiane, Canisius, Chantal, Charlotte, Claudette, Denise, Didacienne, Emmanuel, Eugenie, Felix, Francoise, Helene, Israël, Jean de Dieu, Jean Marie, Jonathan, Josephine, Juvenal, Kan, Kezia, Leocadie, Wherny, Nehemia, Safari, Sarabwe, Simon, Solange, Sylvere, Sylvester, Veronique, Vicky (in memoriam) and the sociotherapists who they trained.

In Nya-Ngezi: Agnes, Alice, Amato, Annemary, Balanga, Balole, Bishi, Bukenyi, Byamungo, Champagnant, Ginogerwa, Cirume, Gisele, Jean Baptist Safari, Jina, Josephine, Judith, Julienne, Jumapili, Kayi, Kiziba, Kulondwa, Kuzinga, Ngao, Mubalama, Mudahinga, Mukongomani, Mukundu, Ngao, Safari Amani, Vital and the sociotherapists who they trained.

In Nyamata: Aloyse, Angelique, Annemary, Daniel, Donavine, Eric, Eugenie, Felix, Gaspard, Jacky, Jean Claude, Jean Pierre, Justine, Justin, Laurence, Lilian, Marc, Mary Jeanne, Patrick, Philippe, Sylvie, Theophile, Vincente, Vincent and the sociotherapists who they trained.

In Kakata: Any, Augustine, Bendu, Cynthia, Daniel K., Daniel W., Darlington, Dorothy, Eugene, Famatta, Hawa, James, Kerkula, Lawrence, Linda, Maryama, Nelson, Rose, Sandy, Sumo and Vinah.

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Occasional Publication 32
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Cover design: Heike Slingerland

Cover photo: 'This is a programme for us' East Congo 2016. Collection Yolanda van den Broek

Photo collection Cora Dekker

All photos collection Cora Dekker except photo 8 collection Yolanda van den Broek

Layout design: Sjoukje Rienks, Amsterdam

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Printed by Ipskamp Printing, Enschede

ISBN: 9789054481683

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PART I

Training in Community-based Sociotherapy: Experiences in Rwanda, East- Congo and Liberia

Preface

The handbook before you is based on my PhD thesis *Terugvinden van waardigheid. Community-based sociotherapie in Rwanda, Oost Congo en Liberia (Regaining Dignity. Community-based Sociotherapy in Rwanda, East Congo and Liberia, Dekker, 2016)*. It describes the development process of a training programme in how to supervise and mentor sociotherapy groups in the African post-conflict context. I was the pioneering trainer in this process.

It was a few twenty-somethings from Sierra Leone who slowly but surely encouraged me to go on the road with sociotherapy. Staying at a Dutch clinic for medico-psychological trauma treatment, they argued that sociotherapy could have prevented a great deal of suffering if only their country of origin had known of it. In 2005, I took sociotherapy abroad; this book is a result of my travels.

The training programmes ran against the backdrop of the fact that the 99 sociotherapy trainees from the area of Byumba (Rwanda), Nya-Ngezi (East Congo), Nyamata (Rwanda) and Kakata (Liberia) together had lost over 800 family members and more than 1200 friends and acquaintances to war and genocide. The interventions were enabled through donor funding, which was also a determining factor for the duration, number of trainees and participants¹ per training location.

Central to the training programmes in community-based sociotherapy is that local residents (members of local institutions and organisations) train to be sociotherapists in a process where they learn from and with each other and then start up, organise and facilitate community-based sociotherapy groups. It is thus that the methodology is rolled out, with a great many residents benefiting from the programme.

With its group-oriented focus and its social orientation, the methodology has also been defined as ‘the community as a doctor’. The training programmes teach sociotherapy trainees three skills:

- How to methodically facilitate sociotherapy groups in their own region.
- How to develop and maintain a suitable organisation.
- How to recruit and train new colleagues insofar funding allows this.

1 Those taking part in the training programmes in how to supervise and mentor the sociotherapy groups are called the sociotherapy trainees, or trainees, for short. Those who take part in sociotherapy groups are called the participants since that name gives expression to the expectation of active participation.

Training groups develop according to process phases. The phases become distinguishable as, first, the concept of safety is addressed, followed by explorations of the concepts of trust, care (in the sense of looking out for each other), respect, control (in the sense of taking part in decision-making) and finally the processing of emotions.

In my role as a trainer I behaved like a guest to the yard who is trying to find her bearings in the new environment with its unfamiliar customs. In this way, and through training and practising the principles of sociotherapy, which consist of inter-est (in the sense of relating to being 'between and among people'), equality, democracy, participation, responsibility, learning by doing and 'here-and-now', the trainees learn to contribute input on an equal footing, to establish and engage in joint dialogue, to make decisions together and to work towards mutual cooperation.

A full-length training period takes three years, i.e. 36 months. Circumstances dictate whether that length of time is feasible. Within these 36 months, 60 days of training in a classroom are scheduled, together with 120 days when practical experience is gained. The first three months consist of one week of training alternated by one week in which no training is given. In this period, I trained 77 sociotherapists in three locations and supervised a co-trainer who was training a further 22 in the fourth location. Seventy-eight of these trained another 169 future colleagues in the last weeks of the three months.

Then, the remaining 33 months constitute the 'practice period' in which all those trained are paired off. These pairs then organise and facilitate eight different sociotherapy groups in their region (each practice period is a 15-week cycle with one three-hour meeting a week). Every six months, the practice periods alternate with follow-up training sessions. For these, the 99 trainees go back to the classroom for a few weeks. They then share what they have learnt with their 169 colleagues. This is done during refresher days and 'on the job'.

A coordinating staff of eight (2 in Byumba, 4 in Nya-Ngezi, 2 in Nyamata) provided services for the implementation of the programmes in the four geographically and politically different areas. In order to gain a good understanding of the meaning of sociotherapy, they took part in the first 16 days of training. Further coaching of the staff was part of the training intervention.

The sociotherapy groups were randomly composed, and were therefore also ethnically non-selective. Sometimes there would be men and women of all

ages and backgrounds, at other times group members shared certain experiences in common, as in groups of widows and wives of prisoners, ex-prisoners, unmarried young mothers or orphans.

In 2005, the World Health Organisation (WHO) advised shifting professional attention in post-conflict areas from individual-oriented psychotrauma treatment to social interventions. They did so on the basis of the experiences that a great number of expatriate psychiatric and psychological experts had gained in post-conflict areas. My research has proven the ability of community-based sociotherapy as a methodology to concretise this advice.

When the recommended shift in professional focus and tasks is methodically implemented, trainees' and participants' role definitions, expectations and ideas about the meaning of values likewise undergo changes as social change is brought about. If the method is followed as meant, regaining dignity is the result of one's own participation: after all, mutual trust and social help have returned and have proven to be reliable. People saw sociotherapy as *ihumure*, as a relief, as a programme 'for us'. Between 2006 and 2013 a number of 354 sociotherapists facilitated over 2500 sociotherapy groups, which means that at least 20,500 participants convened on 15 occasions. This also means that the sociotherapists practised carrying out organisational and administrative and logistic operations 30,750 (15 times 2050) times.

This handbook is a guideline for trainers facilitating future sociotherapy trainees to coach and supervise sociotherapy groups; by no means does it want to prescribe or lay down rules. It is hoped that this book satisfies the curiosity of all future trainers and staff members as well as sociotherapy trainees and participants.

Acknowledgements

This handbook came about because the trainees and staff from Byumba, Nya-Ngezi, Nyamata and Kakata rose to the challenge of learning to apply sociotherapy in their own living environments and because they kept pointing out to me a shortcoming: the method had not been put in writing. I combine my thanks for the inspiring and often touching collaboration and the solidarity and give a deep bow of respect for the impressive amount of courage you displayed. Your commitment was key in disseminating the intervention.

Further, I owe a debt of thanks to a number of war survivors who now, having been granted a residence permit, live and work in the Netherlands. While they were receiving treatment in one of the Dutch clinics, they came to attach great significance to the methodology, and it is this that inspired me to take sociotherapy abroad when the opportunity presented itself.

A very special word of great thanks must surely go to Marjan Kroes for the endless and immense patience with which she time and again made corrections to my use of the Dutch language, first when I was writing my PhD thesis and again when I was writing the present handbook. Without your help this result would never have been achieved.

Special thanks also to Hennie Smit, lecturer in Social Work at University of Applied Sciences Leiden. Hennie, the familiar way in which you generally managed my enthusiasm, but especially so during our weeks in Rwanda and Congo was and always will be instructive and inspiring. The friendship that we have built over the years is nothing less than a gift. Thank you very much.

I am extremely grateful to Professor Emeritus Annemiek Richters for her collaboration during the six years in Rwanda where we, in our different roles, combined academia and practice.

Lecturer Jaap van der Stel at University of Applied Sciences Leiden deserves a separate place in my word of thanks because it was he who took the view, in 2009, that my article about sociotherapy in East Congo should not be shortened but, rather, be expanded. My objections were overcome by his argument that the subject deserved PhD treatment.

Thanks also to my ex-colleagues at University of Applied Sciences Leiden, whose interest proved a truly motivating factor, and to Angela Janssen, who could barely wait for my thesis to be completed after she had become in-

volved in the 2013-2016 sociotherapy programme in Rwanda. And thank you to those fellow residents at the Vierwindenhuis who always showed a keen interest, among whom Fons Geerlings, who ever kept a critical eye trained on the commitment and self-interest of NGOs. To Tineke van den Klinkenberg, whose pertinent suggestions helped make my texts pithier, and to ex-Provincial Councillor Titia Bos, who prepared me with flair for any questions a PhD committee might ask during the public defence of my PhD thesis.

Thanks go, too, to my friends Marijke van Loenen and Johan van Berkel, Marcel Kalmthout, Sikanisiwe Dzinotywei-Mandangu and her family in Zimbabwe, and to various of my brothers' and sisters' friends. As my PhD progressed, I experienced encouraging interest from Margot Leegwater, Theoneste Rutayisire and Ruth Spijkerboer, who were similarly preparing PhD theses. I would like to thank Margot for the many pleasant hours in Kigali, Amsterdam and The Hague and for being able to share joys and sorrows over the years. It is impossible to leave out Theoneste (then my interpreter) here when I remember the first experiences with sociotherapy in Byumba. Theo, your reflections on the meaning and significance of that start and its follow-up, and on the complexity of the innumerable irreversible issues at play in Rwanda have always kept me alive to the fact that this PhD thesis had to be completed. Thank you very much for all the encouragement at crucial moments. I extend my sincere thanks to Ruth for insisting, during the first years of my research, that I was capable of writing a thesis about sociotherapy.

And ... wouldn't it have been marvellous if my late neighbour Jan Michielsen, who retired many years before I did, but encouraged me in my 'late calling', could have been my 'helper' at my PhD defence.

To 'questioner and gateway' Michael Mbona, his wife Christine and to, posthumously, John van 't Hoff, David Mandangu and Ambuya Kamhunga from Zimbabwe I am deeply indebted for all the indispensable cultural knowledge they shared with me at the time. It was via this 'university of life' that I developed a notion of the many aspects that played a role in the debilitating post-colonial transition conflict that kept expanding in my then work location Sint Peter's Mandeya Mission in Honde Valley and far beyond. Exchanging thoughts and experiences with Michael on how our theses were progressing was an inspiring extension of an ever enriching friendship.

Yolanda van den Broek and Caroline Grootendorst patiently insisted in 2013 that I go to Liberia for a month to supervise their implementation of the so-

ciotherapy programme there. You were right: it certainly proved an in-depth investment. That is why I would here like to thank you very much for your persistence and collegiality and friendship. Your professionalism and dedication is heart-warming and harbours the promise that sociotherapy will not slip into oblivion.

Without the decades of friendship with Vroon Groen-Bruin and Ria Berkhout and Margreet de Wildt it would have been decidedly more difficult to stay connected with those I love and cherish in the world of my youth. Because of you, the reassuring knowledge that I would always also be part of the stories of the still fairly intact cohesion in and around the North Holland village of Waarland assumed even greater significance as a home-coming after my experiences with the social disruption in Africa.

I would like to express my great thanks and gratitude to PhD supervisor Professor Guy Widdershoven and co-supervisor Professor Jos van Roosmalen for their interest in the subject, their patient supervision of my 'transition' from trainer to PhD candidate, their encouragement, and their suggestions for, first, shortening my texts, and subsequently tightening and sharpening my writing.

Thanks to translator Dr Eli ten Lohuis for her great patience with me and for the metaphor with which she, a few months after I obtained my PhD, made it clear to me that I would really have to kill 'the darlings' in my book in order to start work on the handbook. Eli, your comment persuaded me to call upon Professor Guy Widdershoven once more. Guy, you completely surprised me with your offer to advise me on transforming my PhD thesis into a handbook, for which many, many thanks.

A very special word of thanks to Harry Wells, publication manager at the African Studies Centre (ASCL) Leiden, and his colleague Machteld Oosterkamp for all their time and interest and in particular, for giving me the opportunity to submit my handbook in Dutch before it was translated into English and subsequently submitted, in translation, to the ASCL for publication and international distribution.

The translation of the handbook was made possible financially after a meeting with Marijke Janssen, a fellow-resident of the Vierwindenhuis. As a last resort, she offered to write to the guests who had been invited to the public defence of my thesis. Her initiative and the proceeds from it I view as moral support.

The exercise with sociotherapy in Africa would not have been possible if Cordaid, Zuid Oost Afrika (ZOA), the Dutch Embassy in Rwanda, the Dutch Ministry of Foreign Affairs and Development Cooperation and my then employers in, respectively, Amsterdam (Academisch Medisch Centrum/De Meren) and at University of Applied Sciences Leiden had not provided funding and been of general assistance to me.

Finally, some of my brothers and sisters expressed their concern in the first years of my research. Had my working life of over fifty years not been enough, especially in the light of the recent sudden death of our sister Pauline? Fortunately, however, alarm and concern have over the past years been replaced with heart-felt and proud interest. The reason why I could not yet view my 'job' as finished even as I reached the age of 65 is set out for you in this handbook.

My last word of thanks is for Phoebe Gorogodo from Zimbabwe, who appointed me as her (extra) mother back then, and has always called me so with flair to the present day. Who could have thought in 1991, Phoebe, that we would exchange thoughts and ideas about the South African constitution, and modules on traditional and modern marriage law, not in Zimbabwe but, because of political circumstances, in South Africa and that we would both complete our research in October 2016?

1

The Context

At the time that I got to know the people in the areas of Byumba, Nya-Ngezi, Nyamata and Kakata, they were living with recent memories of war violence. All of them had, in different ways, become involved in violent conflict. In the definition of the Dutch sociologist De Swaan, war victims have become caught up in violent conflict that has been inflicted on them with evil intent, without them being singled out separately for this. Those afflicted by war live with traumatic memories. And bringing such concepts as victim, treatment, syndrome and/or traumatisation on these survivors is in complete disregard of the man-made character and the evil intent behind the violence.

In the training groups I told the trainees that the participants in the upcoming sociotherapy groups would not primarily be treated as individuals with private problems. The participants are treated as group members who experience problems because of unresolved matters of a social nature. When every group member is acknowledged to have been caught up in war conflict, everyone will have the space in which to think about his/her own position in the conflict and decide whether or not to talk about this.

A sociotherapy group gets to cooperate constructively if the trained sociotherapist has or adds to his/her knowledge of the group members' social environment. The sociotherapist's starting point is a view of mankind as an active agent and s/he will therefore adopt a contextual approach.

Unrest and violence in Africa go back a long way: colonial interference started around 1860, with European colonial powers using violence as they appropriated the raw material resources and the African workers. Leaving workers no choice but labour migration, they undermined local customs and lifestyles with all their traditions.

Around 1960 the populations of Rwanda and Congo managed to liberate themselves from colonial rule; in Liberia, more and more protests were

staged against a state of growth without development. The process of decolonization in Rwanda and Congo took a turbulent course as different population groups had different interests with regard to means of subsistence and control. Violent conflicts broke out recurrently, with each time thousands of casualties and people taking flight. In 1994 a genocide took place in Rwanda that took the lives of nearly a million Tutsi and moderate Hutu. Once more, hundreds of thousands fled to neighbouring countries, including East Congo.

In Liberia street protests broke out against the present situation, which led to violent attempts to seize power, to ethnic groups being incited against each other and, finally, to two civil wars (1990-1996 and 1999-2003). In these, thousands of children were deployed as soldiers.

1.1 The situation in Rwanda

The UN's Security Council organised peace talks between the Rwandan government and the Rwandan Patriotic Front (RPF) in neighbouring Tanzania. The talks centred on the mounting political tensions between rebellious Hutu and Tutsi returning from exile. As the Hutu presidents of Rwanda and Burundi were returning on 6 April 1994, their plane was shot down within sight of Kigali airport. Both presidents were killed. In Rwanda politically extremist Hutu incited to murder; in the instantaneously ensuing slaughter, Tutsi were massacred with machetes, sticks and fire.

In the hundred days following the presidents' deaths, Rwanda turned into a hell. Between April and July 1994, 800,000 Tutsi and moderate Hutu were murdered. Hundreds of thousands left for other areas, either within Rwanda itself or in neighbouring countries. Over 100,000 children were orphaned. Families, communes, groups of friends, cooperatives, church and educational communities, hospitals, banks, companies, local government administrations and courts of justice were decimated. The pattern of the violent outbursts corresponded with the definition of genocide as drawn up by the United Nations (UN) in 1948.

After a hundred days, the genocide was brought to a standstill, with the RPF usurping state power and installing a government of national unity. A new army was installed, together with a firmly managed new police force that was to enforce the security policy. As (international) relief aid came flooding in, a start was made with rebuilding the destroyed or wiped out infrastructure. The government introduced a new concept of citizenship based on member-

ship of a central state. A political statement declared that every inhabitant was Rwandan and was to consider him/herself henceforth a Rwandan. And yet, the RPF government introduced a classification of its citizens into five groups, allegedly to establish who would be eligible for material, social or psychological aid. In the East Congolese cities of Goma and Bukavu,² the genocidal violence was not halted. Refugee camps had sprung up, housing hundreds of thousands of Rwandan refugees, including some 20,000 ex-soldiers and 10,000 radicalised Hutu militia members. These called themselves *interahamwe* (i.e. those who stand, or fight, together). The camps were used as a base from which reprisal operations were carried out in Rwanda, which posed a fiendish dilemma for the UN authorities. Should or, rather, shouldn't they view the refugees as a shield for the Rwandan soldiers and the militia members?

In 1997 the hundreds of thousands of refugees were expelled by a coalition of Rwandan, Ugandan and Congolese political groups for whom the camps posed a threat. The refugees were forced to return to Rwanda and further into Congo. This enforced return to Rwanda was followed by liquidations where political scores were settled, and the imprisonment of 120,000 people suspected of having taken part in the genocide. Reprisals were not long in coming for those Tutsi who had reported crimes: intimidated and harassed, they felt unsafe. Partners of prisoners and a multitude of school-age children similarly suffered the far-reaching social consequences. Moreover, the next humanitarian problem was about to occur. The prison was designed to hold 10,000 individuals instead of 120,000. And since a mere 20 out of the 785 practising judges had survived the genocide, trial proceedings according to the standards of International Law were estimated to take over a hundred years.

In the nine years between their return from the camps and the start of the first sociotherapy training in Byumba, the population was pre-occupied with reconstruction issues at the same time that they were beset with fearful questions. Who was still alive? Where had missing neighbours and friends gone? Who was being threatened? Who had been taken prisoner? What might happen during the community justice sessions?

² Some 850,000 refugees stayed in the East Congolese city of Goma with 650,000 in the more southern city of Bukavu.

When it became clear that just 300 trials could take place per year, a national initiative for communal justice (community-based justice) was worked out, modelled on 'gacaca'.

Box 1 Gacaca: from traditional to transitional jurisdiction

Gacaca courts are the traditional judicial meetings of the Rwandan communities where people gathered to discuss quarrels about property, theft and family problems. The traditional leaders had the last word, judicially. In 1998 this traditional model was used to roll out a transitional type of jurisdiction in order to:

- End the long history of unpunished violence
- Try the mass crimes in a community-based way
- Tackle the humanitarian issues in the prisons
- Find the truth behind what had happened
- Determine the level of punishments
- Bring about reconciliation and unity.

The transitional jurisdiction was restricted to cover the 1994 genocide only.

Crimes to be tried before the renewed gacaca courts had to be of the third and fourth category. Major crimes, of the so-called first category, committed by those who had masterminded the genocide, were tried at the International Criminal Tribunal for Rwanda in Arusha, Tanzania. Crimes of the second category, committed by the coordinating perpetrators, went to the national courts. Rape fell in the highest category.

In 2001 over 10,000 gacaca courts were installed, with as many gacaca committees. The committees were composed of citizens trained and authorised to have the last word and pass sentence on crimes. The modernised, statutory model was expected to restore trust and bring about reconciliation. The gacaca pilot was launched in June 2002.

The new Rwandan regime's policy was aimed at promoting national reconciliation. The government organised annual commemorations, erected numerous memorial monuments and undertook initiatives for trauma counselling. 'Unity and Reconciliation' was communicated on billboards along public roads.

1.1.1 Exploratory talks in Rwanda

A study trip (2004)

My work as a sociotherapist in the Netherlands with war-afflicted people had taught me that in order to achieve good results, a good way to start is to be or become conversant with survivors' socialisation process in their own living environment. Since a few twenty-somethings from Sierra Leone had argued that sociotherapy could have prevented a great deal of suffering if the country of origin had known of it, I began to entertain the idea more and more that a community-based use of sociotherapy could well be an appropriate tool in the post-conflict situations themselves. My contacts with a staff member of an international NGO in Rwanda enabled me to go on a study trip to Rwanda and talk with a range of agents from various organisations.

Subjects that came up in these talks included the genocide commemorations and community justice (gacaca). But people also talked about how there was too little help in the face of too much suffering, about the innumerable families whose composition had changed and about the previous and present governments. These talks would later become an important element in the intervention.

One result of the study trip was an invitation from the authorities of the Anglican Diocese in Byumba to come and talk about possibilities of launching an intervention with community-based sociotherapy.

During exploratory talks with local collocutors I observed how they expressed the social problems in their environment. Did they bring up information that I had not as yet read about in publications? Or did they skip over information that was mentioned in the literature? How did they think about solutions for social problems? In these talks I kept looking for any starting points or leads to talk about a potential training programme and for clues to assess the feasibility of a joint responsibility for embedding sociotherapy in the regular institutions at a later stage. In their turn, the collocutors assessed my abilities and reliability, and tried to imagine what my explanations about the methodology of sociotherapy entailed.

Exploratory talks in Byumba (2005)

What received special attention in these talks were the feelings of entrapment and paralysis from what people had endured. But there were also feelings of indifference as to the future, and a loss of dignity. Many sought help from administrators and pastors, others wandered about aimlessly without a survival plan or displayed unfocused aggressive behaviour. Diocese staff also mentioned their own feelings of hopelessness from having listened for so many years to complaints about loss, poverty, unsafety, isolation and the imprisonment of family and friends with little or no change. The pastor recounted that he sometimes locked the door to his office against women who kept asking for help and who he had tried to comfort with the same Bible quote again and again.

Other collocutors told how in 2003 a large group of released prisoners was to be integrated in an environment of orphaned children, genocide widows and returned exiles, with, moreover, an overcrowded prison surrounded by barbed wire fences.



Photo 1

Author's own collection. Exploratory talk in Byumba, 2005

Allegedly, many hundreds of men from Byumba had been summoned to the football stadium sometime between 1990 and 1994, never to return. In this context, the term 'double genocide' was used. I remembered that this term might pose a potential safety problem if it were to come up during the training programmes, because, formally there was a genocide against Tutsi. Using the term 'double genocide' implied, in fact, that there had also been a genocide on Hutu. A provincial director said that there had been no 'double genocide' in Byumba, but that there had been mass murder. He emphasised that today's post-genocide issues are rooted in the country's own history, and that the ensuing traumas keep the population in poverty. And so, emotional resistance holds back inhabitants from the socio-economic cooperation necessary to (re-)gain a livelihood from the cultivation of rice along the river banks.

It was also stressed that previous training programmes had produced hardly any radiating effect on the unravelled social fabric. What the collocutors were looking for was a method that could bring back dignity to the social fabric. The pastor felt it was a God-given blessing that I saw possibilities for conducting a community-based social-oriented intervention.

Exploratory talks in Nyamata (2007 and 2008)

Nyamata is one of the places close to the Bugesera marshlands where in 1959 the agency of the United Nations put Hutu in sight of seizing power after elections and to which they banished Tutsi.

In April 1994 Bugesera became one of the first targets of the murderous Hutu. In 2007 collocutors made a case for bringing sociotherapy to Nyamata; the paralysing experience of losing 65,000 (of the 120,000) inhabitants had robbed the survivors of all faith in their own problem-solving skills. People applauded the official attention given to the traumatic memories, but also claimed that this in itself was nowhere near enough. Fifteen reconciliation initiatives were said to be up and running but these did not go to the heart of the problem. Then again, during the commemoration days (between April and July) nurses trained in trauma counselling were brought in from the capital to give aid.

Collocutors talked about the thousands of dead who had fallen when vainly seeking refuge in the Catholic church: they had all been locked in, and then murdered. There were those among the local collocutors who had contacts

with the Tutsi who at the time were hounded, and had hidden in the muddy swamps for days and weeks on end. And they explained that women who had been raped were unable to tell before a *gacaca* court what had happened to them. Trauma was described as a deep well from which the present problems kept arising. Genocide survivors turned out to live side by side with perpetrators. People lived in isolation from each other.

1.2 The situation in Congo

In 1960 Congo became independent of colonial rule, but things took a turbulent course from the start. During the independence ceremony, the Belgian king described the transfer of sovereignty as the culmination of the generous work undertaken by his father, King Leopold II. But on the same occasion the elected PM of Congo, Lumumba, stressed the wounds inflicted on his people: the gruelling labour, poverty, mockery, the humiliating insults and the theft of land in the name of so-called legal texts (that only recognised the right of the strongest). Shortly after the hand-over, disturbances broke out simultaneously in many places. There may have been a formal transfer of power but the Belgians continued to keep control over the investments they had made in the areas that were rich in natural resources. When this caused a split among the newly-elected leaders, Prime Minister Lumumba found himself in political trouble. In 1961 he was executed by fellow Congolese in the presence and by order of Belgian authorities.

Having received backing from America for three decades, Mobutu's regime (1965) was overthrown in 1997 by the *Alliance of Democratic Forces for the Liberation of Congo* (ADFL). This coalition had earlier attacked the refugee camps in the east of Congo and driven out the refugees. As the ADFL advanced, journalists were kept away. After the power transfer, when leader Laurent Kabila declared himself president, the ADFL fell apart. Dissension arose between the Congolese Kabila and the Rwandan-Congolese Tutsi over rewards for services rendered. Since the former coalition partners planned to just grab their reward (the diamond mines in East Congo had caught their eye) Kabila in 1998 called for military help from 'friendly' African countries³ to start a second war against his disaffected friends. International organi-

³ The 'friendly' countries that supplied Kabila with military backing included Zimbabwe, Angola and Namibia.

sations have estimated that the two Congolese wars cost over three million people their lives.⁴

In 2003 a peace agreement was signed and an almost 17,000-strong UN peacekeeping force was stationed in the vast Congo. The peacekeepers were to see to it that all foreign troops left the country, that weapons were handed over and that preparations were made for elections. In 2006 elections were held, for the second time in 35 years. Laurent Kabila, who had been murdered by one of his bodyguards in 2001, had meanwhile been succeeded by his son Joseph. In the Kivu province of East Congo 90% of the electorate voted for Joseph Kabila, who also secured a majority in the rest of Congo. The international press regularly reported incidences of continuing cruelty, (also) in the province of Kivu, despite the presence of thousands of Blue Helmets.

1.2.1 Exploratory talks in Kivu province of Congo (2007)

In East Congo, I listened to some 25 traditional leaders who spoke about cattle theft, instances of rape, land disputes and about the *Interahamwe* militias from Rwanda who were hiding in the woods and denied the population access to their source of income (felling timber). They explained that in the past strained relations were resolved through '*ngombe*'. These were traditional meetings where sensitive subjects were discussed, where people were pardoned and reconciled. The old habits of helping one another had disappeared, even that of sharing the traditionally brewed beer. The leaders listened attentively to my explanation about sociotherapy, discussed it among themselves and agreed that the method might be a way out of their problems and conflicts.

A number of collocutors found it hard to distinguish and separate the many aid initiatives' tasks and potential. They asked if I could speed up the departure of the *Interahamwe*. I could only explain that the large international organisations had still not found a solution for this.⁵ Representatives from the Protestant churches brought up the loss of innumerable lives but also claimed that the Sunday church services were safe again. Now that the arms were silent, there was, they said, room for a next step. Other collocutors

4 The International Rescue Committee (IRC) estimated 5.4 million dead in 2008. The Human Security Report (2009) arrived at over 3 million dead, after a correction with normal mortality rates

5 Since the *Interahamwe* had withdrawn deep into the forest it was as yet logistically impossible to remove the militia from it.

talked about sexual violence, the resulting births and the exclusion of dishonoured women and babies. And they said that the local customs failed to resolve current problems. The Bukavu Panzi Hospital turned out to have admitted more than 3,000 women between July 2006 and April 2007. Over 700 of these had had a gynaecological operation. An average of 300 of these dishonoured women, who were ostracised by their families, sometimes stayed a week, sometimes one or more months in the hospital grounds. Last, the collocutors said that even the soldiers believe that having sex with a child or an old woman makes them stronger in a fight.

1.3 The situation in Liberia

Liberia was the only American colony in Africa, run by freed (ex)slaves from America. At the time, it was not the whites who called the shots. The mission of the American Colonization Society (ACS), which around 1822 consisted of freed slaves who had earlier been shipped from Africa to the United States, gave rise to a great many disparities. These led to confrontations between 'the import elite' and the indigenous, between 'import religion' and local faiths, and between advocates and opponents of a closed politico-economic system in which people from the interior could only participate on conditions laid down by the small elite. In 1944 an America-oriented policy was adopted that would be followed for decades.

Towards the late 1960s student protests broke out against the weakness of growth without development. Those in power may have 'made money' but they did not invest in Liberia. Instead, they deposited their money in their American bank accounts. The protests led to street riots, attacks and a ban on political parties. In 1980 a military coup took place. The then president Tolbert was murdered and military leader Doe, from the east of Liberia, took over power. In the years that followed (1981-1985), America reduced its support.

Towards the end of the Cold War (1989), Liberia too began to suffer from a contracting economy and increased corruption. This enabled former civil servant Charles Taylor to push his way to a position of power. Taylor incited ethnic groups against each other, which led to the assassination of President Doe in 1990. Taylor seized power following this murder. In 1997 Taylor was elected president, having garnered a majority vote. During his rule, a civil war broke out (1990-1996) in which thousands of children were deployed as soldiers. In 1999 supporters of the murdered president Doe made themselves

heard once more. This marked the start of a second civil war (1999-2003) in which Taylor's power was driven back. During these two periods of war almost a million Liberians took flight, and 300,000 inhabitants lost their lives. After the war, the country numbered 11,000 former child-soldiers.

In 2003 Taylor was charged with war crimes at the International Criminal Court in The Hague to which he was transferred in 2006. At the 2005 elections Liberia's electorate voted to have Mrs Johnson-Shirleaf as its president. By the time that the sociotherapy training started in 2013, Mrs Johnson-Shirleaf was still president. The UN security forces were then preparing to leave, as were the various NGOs that had supplied emergency relief.

1.3.1 Exploratory talks in Kakata (2013)

During her deployment, a staff member from Christian aid organisation ZOA (Zuid Oost Azië, [South-East Asia]) had found that the agricultural programmes run by ZOA did nothing to allay the distrust people felt towards each other. Her idea was to do a pilot with sociotherapy. Exploratory talks were conducted where collocutors flagged up the incidence of poverty, problems in healthcare, overcrowded classrooms, teenage pregnancies, family problems, socio-economic problems and widespread mutual distrust.

1.4 The themes that surfaced in the exploratory talks

Safety and unsafety

Central here the heavy burden of social disruption. Disruption because of the altered composition of so many families, because of the aggression of so many towards anything, whether right or wrong. Disruption as people struggle to control emotions, as school children have panic attacks. Disruption that becomes palpable during the community justice proceedings that are insufficiently supervised and actualise emotions. Disruption as people remember the ethnic discrimination in schools. Disruption due to the sexual violence used as an instrument of warfare and its consequences, and from the slow and difficult integration of ex-prisoners and (child) soldiers into the communities.

Trust and mistrust

When describing initial experiences with community justice, collocutors were open, but at the same time wary. They talked very cautiously about the disappearance of hundreds of men from Byumba: this had not been addressed in the community justice courts, while the present ruling party RPF had had a hand in their disappearance. In various talks the notion of 'double genocide' surfaced, which also implied an exploration of the authorities' credibility.

The tradition of brewing and drinking beer together was lost. The tradition had affirmed and sustained the need for people to rely on each other's help for better or worse. In times of prosperity, people collaborate to harvest their crops and organise wedding feasts together. In adversity, people together carry a sick person to a clinic and help arrange funerals. The lost beer-sharing tradition was, therefore, really about the loss of these social certainties.

Care and the absence of care

Every year, the genocide is commemorated in Rwanda; care and recognition are extended to families who have lost their nearest and dearest. Concerns were voiced about a population that had no idea how to deal with those who were seriously traumatised. There were memories of how no care was extended to those who had been driven away in 1959 and who subsequently received unequal treatment in their own country.

Respect and disrespect

The authorities were shown formal respect but people also reportedly felt the need to remain alert and be on their guard. Since the genocide, people no longer placed their trust in the other, or in other groups, nor in the present situation or in the various explanations that did the rounds about all kinds of subjects. Often, it was the female collocutors who spoke about marginalisation and loss of dignity. The widows in Rwanda said they had not felt safe since giving testimony in the pilot stage of *gacaca*.

Control and undermining control

On the subject of control, what the collocutors related agreed with the descriptions in the literature, in particular that post-colonial rulers had made no effort to incorporate elements from the centuries-old form of control into a form of government tailored to the new circumstances. Thus, the centuries-old organisation that brought order to people's communal life continued its tacit existence side by side the colonial form of government, which allowed numerous problems to continue.

Although Tutsi exiles from various periods of flight had been returning in large numbers from the neighbouring countries, Rwandan collocutors hardly ever spoke about conflicts about land. Collocutors in Congo, in contrast, talked openly about land disputes that had not been resolved satisfactorily in the past decades.

The impact of overwhelming memories

It was women more often than men who focused attention on there being too little help in the face of too much suffering. But as with the calculations about the duration of the court proceedings when carried out according to international standards, this investment too proved a mere drop in the ocean.

1.5 From exploring to designing

The exploratory talks are meant to gauge whether there is both sufficient support in the intervention location and sufficient material to start up an intervention in supervising sociotherapy groups.

There is reason to expect that the sociotherapy groups would see bursts of anger and grief: the disruptions and loss of mutual help, the poverty and the changes that people find hard to situate or relate to can evoke rage and sorrow.

It is important for a sociotherapist-to-be that s/he learns to recognise and understand the patterns and mechanisms in the immediate environment that maintain social disruption, that s/he helps find appropriate questions and activities that may lead to social change. In a training group, as in sociotherapy groups, questions are what gets the group members talking to each other. Facilitating a sociotherapy training very much depends on the measure of trust

that the sociotherapy trainees place in a trainer and in the training method. After all, the aim is for the sociotherapy trainees to learn how to facilitate participants in groups so that they become participatory.

The questions below have been distilled from the exploratory talks. These and similar questions are used in the training programmes.

Box II Questions to be used in the training

Questions to be used in the training

- How do the training participants define the concept of safety?
- Where is safety found?
- How do the training participants define the concept of trust?
- How can the participants tell that they are being trusted?
- What could be a comforting form of commemorating lost family and friends?
- What exactly is understood by the concept of respect?
- In what way is the definition of respect helpful in reducing disruption in the living environments?
- What was a land dispute like before and after the arrival of the thousands of refugees?
- Who are caught up in the consequences of the present land disputes, and how?
- How is it explained that more women than men think there is too little help for too much suffering?
- How is it explained that especially the leader, the pastor or the trauma caregiver are thought skilful at helping traumatised people?
- How can you tell that someone is traumatised?
- How often has it happened that orphaned children are adopted by families?
- What is the meaning of family now, after all the violence?
- How is a group or a community defined after the violence and the large-scale dislocations?
- How are conflicts explained?
- When is something termed a conflict and when a problem?
- What examples of mutual help in the past years deserve copying?

1.5.1 Objectives for an intervention with sociotherapy

The interventions could take place at the initiative of a number of NGOs:

- *Eglise Episcopale au Rwanda* (EER), later: *L' Eglise Anglicane au Rwanda* (EAR) in Byumba
- *Innovation et Formation pour le Developpement et la Paix* (IFDP) in Nya-Ngezi
- *Faith Victory Association* (FVA) in Nyamata
- and ZOA in Kakata

The objectives for the interventions were set in consultation.

Box III Intervention objectives of the organisations involved

Byumba. Rwanda (2005)

Enhancing feelings of safety and dignity in the social community;
Reducing psychosocial stress.

Nya-Ngezi. Democratic Republic Congo (2007)

Improving the social relations among people in the local communities to make them acceptable, relevant and of this day and age, and exclude nobody.

Nyamata. Rwanda (2008)

Restoring human dignity and social safety;
Reinforcing local communities' capacity to reduce or resolve their own conflicts.

Kakata. Liberia (2013)

Building mutual trust.

1.5.2 Chances of embedding sociotherapy in regular organisations

An intervention can only achieve the intended results if and when the trainees can in all safety take part in the training and can subsequently, but again in all safety, practise what they have learnt during the training. All this requires the support of local authorities who have been informed properly. It is their supportive attitude that creates space for the new initiative to unfold and offers the trust that is so essential.



Photo 2

Author's own collection. Exploratory talk with Nya-Ngezi Chief and his traditional leaders, Nya-Ngezi, 2007

The authorities from the Anglican church in Byumba gave the green light to a safe start.

In Kivu, a great number of traditional leaders showed an inquisitive willingness to engage in talks. This inspired confidence that they would not see the community-based initiative as a threat. The fact that the ecclesiastics spoke about the inadequacy of their own efforts to make a difference in the problems of the ostracised women fostered my belief that surely, this provided a starting

point for embedding the training.

In Nyamata, indications that the training could be embedded were poor. The argument that clinched the decision to accept their invitation after all came from the experiences gained in Byumba. After an additional visit, an agreement was reached to extend the training to a village known to be most instable. 'If it can be done there, it can be done anywhere', a former sociotherapy staff member remarked. The training and the experiences with the first sociotherapy groups did, indeed, help reduce the heavily charged disruption in this village.

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2

Community-based Sociotherapy

In the western world, sociotherapy was, and still is applied in an institutional setting: in psychiatric hospitals but also in prisons. Governmental financing structures have impeded a community-based application. But Maxwell Jones's waiting room should really be seen as an extension of the social space, and so, where sociotherapy really belongs and should take place is in and around the yard.

2.1 Community-based sociotherapy

Community-based sociotherapy involves the facilitation of organised contacts during which participants with different backgrounds and different ideas learn from and with each other because sociotherapy teaches trainees to proceed methodically. This paragraph describes the elements in the sociotherapy method.

Definition of community-based sociotherapy

In 2005 there was as yet no example of community-based sociotherapy in an African post-conflict context. Community-based sociotherapy as described in this book takes the idea that trainees possess the experience and life force that allows them, if they are willing and able to participate, to bring about change in the social fabric of their own immediate environment under their own steam.

The notion of an individual client striving to achieve individual treatment goals may be part and parcel of clinical sociotherapy, it does not fit a community-based setting, where the focus is not really on treatment. Rather, community-based sociotherapy is about learning together in an atmosphere of everyday exchanges. It is these considerations that yield the following definition of community-based sociotherapy.

Box IV Definition of community-based sociotherapy

Community-based sociotherapy is the methodical management of stimulating and hindering behaviours within a social gathering. The methodical management is a learning tool in itself. The aim of learning from and with others is to have participants experience their own responsibility for setting and achieving goals.

Methodology

Structure, perspective, methods/tools, tactic and style all go to characterise the methodology of community-based sociotherapy.

Box V Methodology

Items	Explanation
Structure	The supporting procedures that achieve results and effectiveness consist of rules and techniques that can be used in both the set and the flexible parts of the day programmes. As the rules of the group's own devising are adopted, the sociotherapy principles are applied and its different phases will emerge. The techniques involve a proper and timely application of the various methods, which trainers must therefore be fully conversant with.
Perspective	Perspective is about ways of looking at problems; War-afflicted people, socialised by their experiences of post-colonial violence and its aftermath and by beliefs rooted in tradition develop their own logic with regard to social customs. Observing these customs, trainers with a West-European cultural socialisation and (mostly) no experience of violence choose an approach tailored to what they see. As new insights gradually emerge, both perspectives are augmented and developed.

Methods/tools	Central to sociotherapy is the method that is chosen. The definition of sociotherapy implies a methodical use of organised contact opportunities (within the group): this allows participants to learn from each other's experiences and gives the sociotherapist an opportunity to elicit material for the session. Given the many different ways of learning, a variety of intercommunicating methods is used to allow all sorts of motivating or hindering triggers to surface; Variety lowers the threshold for people to join in, it encourages open communication and offers opportunities for learning from and with each other. The learning by doing principle is activated as participants engage in instructive conversation or dialogue and renew contacts as they prepare meals and wash up together. A great number of games are offered to develop participants' social skills.
Tactic	In keeping with the methodology for sociotherapy groups, a tactic is chosen that lets participants, whose positions and ideas will vary, experience receiving (and giving) recognition. An appropriate tactic may include games to promote relaxation (with a subsequent formation of groups) but, depending on the situation, these could also offer protection or present a challenge or work to regulate tension.
Style	Last, methodology is about the sociotherapist's style or way of doing things and about the form and style of the presentation. Usually, a more informal style is preferable, unless a situation requires directive action.

Principles

The sociotherapists' professional work is structured around six principles that were originally formulated by Maxwell Jones and subsequently annotated by Bierenbroodspot (1969). To these should be added a seventh principle, the principle of inter-est, established by Arendt (1958).

Box VI Principles

Principles	Explanation
1. Equality	Participants in a sociotherapy group are treated as equals.
2. Democracy	In the context of sociotherapy, democracy means: participation in open communication; group decisions are reached in a transparent way and as a rule become the decisions of the group. Instability may occur in sociotherapy groups, and this will impact the shared decision-making. If this happens, the sociotherapist temporarily halts the open communication of the democratic principle and acts directly in the interest of the group's safety. As soon as the situation allows, the group returns to its shared responsibility for decision-making.
3. Participation	Participation means involvement, joining in, taking part. Participating in verbal and/or non-verbal communication and in decision-making processes may have an active or passive character. The measure of participation is bound up with socio-political conditions and individual potential. Participation is a condition for the democratic principle as formulated here.
4. Responsibility	In the context of sociotherapy, responsibility furthers participation in open communication. Taking responsibility for participation in open communication, with the aim of creating a pleasant group atmosphere and solving problems together, is a condition for the democratic principle as formulated here.
5. Here and Now	Refers to a methodical management of the corrective influence that the members of a group can exercise.
6. Learning by Doing	Through the 'learning by doing' principle people learn in practice, in and with a sociotherapy group, how recurring problems in their own social systems – family, friends, neighbours, soulmates, colleagues – can be understood, handled differently, if necessary, and, as a result, reduced.

7. Interest	Inter-est is defined by Arendt as ‘something that lies between people and therefore can relate and bind them together’. Inter-est as I see it means determining how the space between people is used and, thus, what attitude is adopted with respect to the other(s). ‘Space’ may be the classroom where you have to adopt a certain attitude towards other training participants; But it may also be your living space, the space of the farmyard, the neighbourhood, the village, the town, the country or the world.
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Phases

A number of development phases can be identified in applied sociotherapy. Their length depends on situation and context. Within a sociotherapeutic process, a next phase presents itself when the preceding phase is sufficiently developed. Both internal and external conditions to do with individual participants and incidents during the social gathering determine if the next phase can begin. It is sometimes necessary to return to earlier phases in order to make progress together. As these development phases are gone through, the sociotherapy principles are applied to each and every one of them. It is educationally meaningful and conducive to the development process if members of sociotherapy groups familiarise themselves with the concepts that underlie the different time phases.

Box VII Phases

Phases	Explanation
	The characteristics of group development phases are commonly found, both inside and outside institutions.
1. Safety	Because of the feelings of unsafety that many war-afflicted sociotherapy participants report, sociotherapy facilitators must, first of all, create safety. They can create safety by providing structure in the form of day programmes, with a set number of social activities (starting the day together, joining in activities, socialising during breaks, rounding off the day together). It also presupposes an attitude on their part whereby the development of a functional, trust-based relationship is grounded in the principles of proper social interaction.

2. Trust	<p>With increasing safety, a second phase presents itself; As participants' control needs diminish, members of the facilitating sociotherapy teams spend less time conferring outside their regular appointments. Aim of this second development phase is for the participants to regain their ability to trust. The sociotherapists' contribution to building trust lies in their sustained provision of structure and in a consistently adopted attitude that supports the building of trust and structure.</p>
3. Care	<p>Following the phases of safety and trust comes a third development phase as it comes home to war survivors what hardships they and the others have endured and what their losses amount to. They will express this in a variety of ways. The most distinctive expressions involve reflection and increased caring behaviour in the sense of looking after each other and (occasionally) of self-care. The facilitating sociotherapeutic skills that go with this phase involve a consistent, continued professional attitude that supports structure and the functional relationship of trust. Subtly observing any changes in the behaviour of the sociotherapy group members, sociotherapists help and enable them to discern and recognise the specific meaning of changes in this phase.</p>
4. Respect	<p>An increasingly felt certainty as to safety, trust and care, in the sense of looking after each other, allows the expression of tensions that have arisen over cultural differences in expectation with regard to respect. Before the group members share fragments of their personal war experiences they test the reliability of their newly enhanced experience of safety, trust and care through the subject of 'showing respect'. In this phase the sociotherapy facilitators maintain their attitude of supporting structure and trust. By thematising the subject in the fourth phase they acknowledge the significance of the desire for specific (war-memories related) and cultural forms of respect. If the situation requires this, sociotherapists will methodically confront participants with present-day reality.</p>

5. Say in rule-making	<p>When everyone is satisfied as to the reliability with which respect is shown, there is room for future-oriented discussions. Not seldom do these include the wish to have a say in the rules of the institution(s) that govern the basic structure of group members' communal life. Step by step they say, during this fifth phase, who they are, how they view certain matters and what social roles they play(ed); Apart from the sustained provision of daily structure and a persisting attitude to support the development of trust and respect, the sociotherapy facilitators' contribution consists of the ability to function as committed and interested discussion partners with knowledge of the political, societal and social contexts. Sociotherapeutic actions will gain meaning if the views on rule-making are responded to methodically (i.e. adopting the basic principles). By emphasising, during the fifth phase, the variation in the rules (of the games) that are interwoven with the day-structuring activities, the sociotherapists enable participants to reflect on effective ways of exercising control.</p>
6. Processing emotions	<p>Processing distressing emotions features from the very first moment of clients being together in a sociotherapy session. Emotions will intrude more or less forcefully in each of the various development phases. Sociotherapists handle these emotions with the help of the notions that correspond to the phases listed here. Also, they incorporate such activities in the day programmes that make the tensions accompanying these distressing emotions manageable;</p> <p>Once the members of sociotherapy groups are clear about the reliability of their environment and the facilitating sociotherapy team, a favourable condition arises, during the sixth phase, for deciding whether or not to proceed to a more in-depth manner of processing traumatic emotions, with the help of specialists. In this phase it is important for the participants of the groups that sociotherapists function as both providers of information and as sounding boards with respect to the decision that has to be made.</p>

Methods and techniques

Community-based sociotherapy comes 'to life' as the various methods and techniques are used and applied. Using these methods and techniques helps

trainees recognise how the sociotherapy principles are applied in actual practice and how the different phases of a group process develop. In this section I briefly describe a range of methods and techniques to return to a number of these in more detail later on.

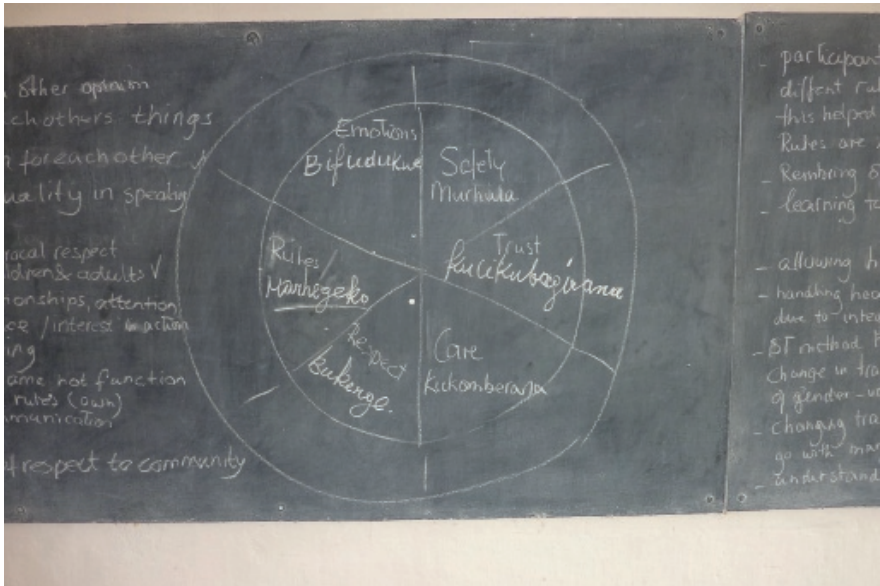


Photo 3

Author's own collection. Visualising the phases

Box VIII Method and techniques

Learning by doing	The trainees are introduced to 15 different exercises, from conducting morning and afternoon assemblies, to formulating group rules and giving their own definitions of the notions from the development phases.
Dialogue	The exercises yield subjects that lend themselves to dialectical talks. The introduction of the Johari Window, for example, gives rise an exchange of novel ideas and thoughts that were also of great significance to the sociotherapy trainees themselves, touching on ways of interacting with present and future life partners, e.g. Thematizing the development phases and the application of the principles also leads to dialectical talks.

Group assignments	Doing nine different group assignments, trainees learn how the principles and the development phases work in practice. One such group assignment has trainees discuss the differences between emotions and behaviours. Another example is making and playing a game of Happy Families about sociotherapy.
Homework assignments	To keep up the good spirit even in the training-less weeks, homework assignments help and make the trainees regard their home environment in specific ways and/or think about certain themes. Equipped with an assignment, they can visit tens of families, and thus gain actual practice, before the sociotherapy groups are formed. The homework assignments also ensure that the training remains linked up with context-derived information and provides instructive material to be used in the training.
Games	The trainees are introduced to a number of games. The chosen games preferably focus on enhancing ordering and combining skills and on increasing trainees' concentration. The games preferably vary in difficulty and can and cannot be incorporated in actual practice. It is the trainees who decide on this.
Relax & re-focus games	The trainees are daily introduced to (brief) relax & re-focus games. While it is the trainer who kicks off the games, the trainees are gradually invited to devise and organise similar short games.
Role-plays	Role-plays are meant to clarify any information that is brought up. Trainees are sometimes given the task of thinking up their own script. Other role-plays train how to coach and supervise a sociotherapy group. Through these, trainees learn to observe and give advice, and to learn from each other's observations and advice.

Positioning the methods and techniques

Where the methods and techniques are positioned is illustrated by means of this example of a day programme.

Box IX A day programme

Time	Activity	Significance
10 mins	Arrival, arranging the training room, presenting the programme, note-taking.	A well-ordered training room provides structure; A day programme structures safety.
15 mins	Informal greeting and time for prayer (local custom).	Informal greeting lowers the threshold for joining in.
45 mins	Assembly (daily); First three meetings led by the trainer (learning by example), then by one of the trainees (learning by doing).	Focus on well-being; Linking up training days; Impromptu questioning means tailoring; Source of training material.
60 mins	Educational subject arising from an assembly or otherwise.	Learning about a wide range of subjects; One's own everyday world matters.
20 mins	Comfort break.	Observing the effects of the interventions.
60 mins	Exercise/task/dialogue prompted by a (chosen) subject raised in assembly, or arising from the phases or principles.	Experiencing a wide range of subjects; Learning about experiences from and with each other.
10 mins	Physical exercise (daily).	Relaxing and refocusing attention.
50 mins	Exercise/task/dialogue arising from the phases or principles, or from an actualised topic.	Experiencing a wide range of subjects; Learning about experiences from and with each other.
10 mins	Room for extension, unplanned topics or games.	Responding to and linking up with whatever is going on.
60 mins	Afternoon break.	Observing the effects of the interventions.
60 mins	Skills practice.	Learning from and with others to apply new insights.
30 mins	Room for extension, unplanned topics or games.	Linking up informally with whatever is/is not actualised.
30 mins	Afternoon assembly (daily); First three meetings led by the trainer (learning by example), then by one of the trainees (learning by doing).	Looking back in assessment Focus on well-being; Inquiring if everyone is re-turning home relaxed.

10 mins	Tidying up together (no extension because of the need to travel back safely before sunset). Wishing each other a safe journey home.	Enhancing care and consideration for each other and one's immediate environment; Observing who 'notices' what when tidying up.
45 mins	If possible, trainer and staff members meet to review and prepare.	If possible, trainer and staff members meet to review and prepare.

2.2 Theories that community-based sociotherapy is based on and builds on

Community-based sociotherapy is based on theories and skills used in the study of group dynamics. In addition, I have also drawn on some supplementary theories.

In 2008, I chose to recommend Johnson & Johnson's *Joining Together: Group Theory and Group Skills* to the staff of the various programmes. This combined theory and practice book describes the vision presented here and provides the theoretical underpinnings for the experiences that were gained during the training and during its implementation, in the actual practice of the sociotherapy groups.

2.2.1 Group dynamics

The theory of group dynamics concerns the structure, the roles, the standards and stages of group development. It distinguishes a set of stages within group development termed forming, storming (conflict), norming, performing and (finally) adjourning. Characteristic features of these stages include duties, emotional utterances, dependence, sub-grouping, fight and/or flight reactions and, because of the development and dynamics of affection, inclusion and control. The stages repeat themselves.

Having studied a great number of groups, Johnson & Johnson (2009) draw the conclusion that positive dependence, individual accountability, positive interaction, social skills and group reflection constitute the basic elements of effective learning. Johnson & Johnson conducted research into group dynamics, that is to say, into the importance and character of groups, and their various types. In their view, the importance of groups lies in their providing opportunities for learning about certain behaviours and attitudes.

Two opposing viewpoints have developed as regards the character of a group: one focusing on group orientation, the other on individual orientation. ‘Traditional groups’ are described as organised hierarchically. The members of traditional groups assume that they will be assessed and rewarded as individuals. An ‘effective group’ (sociotherapy groups are supposed to develop into effective groups) is more than the sum of its parts. Its members dedicate themselves to maximizing their own and others’ performance. The group members are tasked with working together.

Johnson & Johnson distinguish experiential learning and cooperative learning. Experiential learning focuses on reflecting on experiences with the aim of generating and actualising an action theory that gives the action an effective character (so that the action is, for instance, tried again). Cooperative learning is a form of experiential learning whereby the learner learns at the cognitive level what an experience involves and signifies and when it should be utilised. Then, the skill is practised. When group dynamics are studied with the following aims, this could be termed cooperative learning:

- To understand the theoretical framework of a skill
- To use the skill
- To ask for feedback about performances
- To implement the skill in actual practice
- To eliminate mistakes
- To continue practising until the skill comes easily

Johnson & Johnson composed a model based on theories developed by Lewin, Piaget, Vygotsky, Skinner and Bandura. These theories are summarised below. The following box illustrates how these theories interconnect and therefore yield results.

Box X Theories summarised from Johnson & Johnson’s model

Lewin	Lewin argued that it is impossible to get a proper idea of a group if the members’ qualities and characteristics only are taken into account. He proposed that democracy is characterised by participation and integration, with all parties concerned sharing in the decision-making about significant changes in their social environment. Lewin’s theory posits that positive interaction is the result of the group members’ interdependence that stems from common goals. Joint group goals constitute an instrument for cooperation as they direct, motivate, coordinate and activate group members’ behaviour. This freely chosen interdependence may develop into a dynamic whole where a change in the state of any member or sub-group effects change in the state of all group members.
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Piaget	In Piaget's theory, problem situations encourage the development of cognitive structures. Each cognitive action presupposes the integration, and concomitant assimilation, of an event from external reality into a person's cognitive structures. Assimilation not only fits in the event into the cognitive structures, it also alters these. From the age of around twelve, when brain connections increase, children begin to discern the relations between previously stored images that had been understood yet existed in isolation. The theory on cognitive tension points towards an image of man as active.
Vygotsky	Vygotsky's theory poses that knowledge is a social phenomenon and the result of a collective effort to learn about problems and solutions in the social environment. For Vygotsky, development is the fundamental factor in learning on the basis of which all psychological phenomena can be understood. Development is distinguished into biological time (evolution of the human species), historical time (history of human culture) and life time (development of the individual, or ontogenesis). Much like Piaget and Lewin, Vygotsky also sees man as an active agent. He posits that mental processes, such as using language, communicating thoughts and developing new ideas, originate in social processes that can be understood through symbols and the development of tools.
Skinner	In his Social Learning theory (SL), Skinner also discerns operant conditioning as against respondent conditioning: the positive reinforcement of 'accidentally' discovered desired behaviour. Skinner does not subscribe to a view of mankind as an active agent. He argues that recurrently rewarded behaviour is repeated more often and is conducive to learning. In his view, recurrently rewarded, desirable behaviour plays a role in the socialisation process.
Bandura	A representative of the Social Learning Theory (SLT), Bandura emphasises that Skinner's theory is at odds with views that see socialisation as a passive process. Bandura held that the classical or operant conditioning approaches failed to explain socialisation processes. It is important to understand the mechanisms underlying the socialisation process as these form the basis of any emotional, moral and social development. In order to identify the mechanisms of the socialisation process that contribute to the development of children, Bandura studied social bonding, the process of identification with moral standards and gender identity, social competency and self-confidence. He reached the conclusion that people learn socially through observation and imitation. In situations of unequal power relations (due to age differences or because of culturally structured relations) morally good and not-so-good examples are imitated. Adults are capable of self-modifying their behaviour through self-observation, self-assessment, and meting out personal rewards and punishments for their own performances.

Box XI Theoretical model of principles (Johnson & Johnson, 2009)

Lewin	Piaget and Vygotsky	Skinner and Bandura
Social Interdependence Theory	Cognitive Development Theory	Theory of Social Behaviour
Focus on	Focus on	Focus on
Goals	Resources, environment, social roles	Rewards and imitating examples of behaviour
Leads to positive interaction		Leads to increased motivation
Positive interaction and increased motivation lead to enhanced performance and productivity		

2.2.2 Related theories

Next, theories of social organisation based on kinship and, conversely, based on citizenship should be brought to mind. The theoretical basis is further informed by theories on social change (with a focus on horizontal social mobility) and by transition theories. Those theories are outlined briefly here.

Box XII Related theories

Kinship and citizenship	<p>The notion of kinship refers to organisations of family relations. The duties and functions that families have are described differently for different societies and for different times (Brake, 2016); As part of her studies into kinship and production methods, anthropologist Raatgever (1983) examined the position of women in traditional marriages. In patrilineal groups wives are acquired by means of dowries so that the groups get to use these women's and their children's working power. Entering into such a marriage is on a par with concluding a labour contract. Raatgever therefore termed these marriages 'legitimized labour'. Often, and in accordance with traditional marriage law, any children born into traditional marriages are considered the man's property; Where the state is the organising principle, inhabitants have citizenship. What a state regards as its main task, in relation to such things as public order, safety or decisions on infrastructure, is affected by the convictions of the administrators in power.</p>
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	<p>Davidson (1992) emphasises how the adoption of colonial forms of administration during the nation-building process of African countries following their independence led to an interminable series of new problems and to distrust. The liberators and the population alike were neither familiar nor taken with the principles or the organisational consequences of the notion of citizenship. It entailed subordinating the kinship principles that organised society to the rights and duties of citizenship. In contrast to the usually unwritten codes of kinship, the rights and duties of citizens are laid down in constitutions.</p>
Social change	<p>According to Bunge (1999), the intent of a social project is to bring about change in social structure, in lifestyle and in values; The focus of a change-effecting project can be on one or more simultaneous topics, with either a top-down or bottom-up organisation. The chances of change being effected increase if a social project meets a population's needs and wants and if the change is supported by the authorities that shape and maintain a current social order. If a social change-effecting project succeeds, the values associated with that project are reinforced; The focus of the (bottom-up) sociotherapy project being on social themes, it involves change in the social fabric of the living environments;</p> <p>In order to map and study the features of the social changes brought about by the training in community-based sociotherapy, Bunge's model of horizontal social mobility presents three indicators of social progress. The first concerns the degree of emancipation from ideology. The second involves the breach in stringent standards for social relations with respect to positions of status and standing, while the third indicator comprises changes in language usage.</p>
Transition	<p>Transition can be defined as 'a process that people inwardly go through if they are confronted in their lives with major changes'; According to Lewin (in Johnson & Johnson, 2009), transition involves 'the social change from the present level of balance within an interplay of forces towards a new equilibrium'. 'Each change evokes counterforces that try to undo the effects of the change'; Davidson (1992) argues that western 'orthodox' researchers, who remained inexpert since they had scant interest in the factual realities of the colonial legacy, generally assumed that 'development' had become feasible upon the devolution of the colonial rulers' power. In their view, the colonial legacy merely needed democratising and this would solve everything. Davidson also notes that 'they' agreed that Africa could only flourish provided it rejected itself.</p>

	<p>Years later, development economist Collier (2008) would posit that aid is highly politicised and for this reason frequently dysfunctional. He substantiates his argument with politically oppositional slogans about development aid and cooperation; The sombre vision of Africa harks back to an undercurrent of discontent, which Clarke (2012) describes as ‘the interplay of persistent disparities between the traditional social structures and the simultaneous presence of modern industrialised economic nation states with a free market, whose rules and regulations remained completely alien to the majority of the population.’ For centuries, millions in Africa have been going to markets, which are also a social meeting place and a place for disseminating local news;</p> <p>The various periods in which the undercurrents of discontent developed may be regarded as unresolved transition operations from tradition to modernity. After the colonial period, the social consequences of adopting the rules and regulations of the citizenship model hardly ever became a topic of discussion in regular education programmes. Until those moments when the population was confronted with state organs due to upcoming elections and/or ‘infringements’ of rules and laws, many remained complete strangers to the formally new order of national citizenship.</p>
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2.3 The organisational lay-out

2.3.1 Recruitment criteria for the training

The recruitment criteria for the sociotherapy training came up during the exploratory talks. Basing themselves on what thoughts and ideas were voiced then, staff of the implementing organisations (cf. box III, section 1.5.1,) set the definitive criteria in consultation with the future trainer. Below, the first are given.

Recruitment criteria in Byumba

EAR staff set and formulated the definitive criteria. The training groups were to be composed of equal numbers of men and women of different ages, preferably over twenty. During their recruitment, it was ascertained that the men and women were able to cope emotionally with both the training and the

practical part. The men and women would need to have a strong character and be eager to learn. Trainees had to be upright individuals who have the trust of the local population.

I stressed the desirability of recruiting trainees from both ethnic groups. And I suggested setting trainees' minimum educational level at completion of the last year of secondary school so that they can be assumed to have a thinking and working level that enabled 'learning by doing'.

Recruitment criteria in Nya-Ngezi

IFDP staff in Nya-Ngezi put forward that the trainees-to-be must have strong characters. Further, they had won the trust of the population. The men and women should live in the intervention area. They can listen, learn, understand, reflect, analyse and deal flexibly with difficulties. Future trainees have completed secondary school and can pass on information, knowledge and experiences in a pedagogical manner. IFDP wished to recruit a certain percentage of the trainees from traditional leaders.

Recruitment criteria in Nyamata

In Nyamata FVA declared that the men and women must be upright and dependable, equipped with the capacity to love. They should hold a secondary or higher education certificate, have practical skills, be able to listen and assume responsibility. Trainees-to-be had to be available and be prepared to take part in the training on a voluntary basis.

Recruitment criteria in Kakata

In 2013 ZOA formulated its recruitment criteria on the basis of the collocutors' input and of the criteria used in earlier training programmes.

2.3.2 The trainee groups and the coordinating staff

Group size

A maximum of fifteen trainees can be allowed per training group, on the assumption that a number of trainees might drop out prematurely and in the knowledge that communication will still be clear and orderly with twelve participants per group. Transparency bolsters safety. Each location numbered two training groups whose exact size depended on the funding provided. The groups were each trained every other week in order to create time to process matters.

Training stages

The first training period takes a minimum of three months. During this period, trainees build up trust and test reliability. Trust and reliability are essential pillars in achieving a feat of sociotherapy. Aim of the first training stages (consisting of 15-16 training days per group, spread over two months) is to learn the basics of community-based sociotherapy. The second and third stage are not included in this handbook. Whether they can be implemented depends on available funding and local circumstances. The purpose of the fourth and subsequent stages of training is to gain experience.

Practice stages

Ideally, the training's practice period is divided into eight fifteen-week periods: thus, more cycles can take place per year, which means that more participants are reached, with an over-all increase in volume. Practical experience is gained in didactically justified ways in fifteen sessions per cycle. The fifteen-week rhythm was decided on more or less arbitrarily, taking into account that with a greater number than fifteen sessions, processes are set in train that require enhanced skills and experience. The ideal size of operational sociotherapy groups is set at ten participants per group.

Practice supervision

Each of the tens of sociotherapy groups is led by two sociotherapists in training. During the practice period trainee sociotherapists are supervised by staff members.

Coordinating staff members

Staff members are the coordinating intermediaries between the commissioning party and actual practice. They facilitate the conditions for the training programmes, including the recruitment of the first trainees. They enable the trainees to follow the training, supervise the sociotherapists and are responsible for the budget allotted. In order to carry out these tasks properly, they join the group during the first sixteen days of a training programme. Their learning objective is also learning by doing, aimed at thinking about the classical ways of control and management and about possibilities for replacing these with a service-oriented approach. Gradually, the content of a separate training programme for coordinating staff members was developed.

Supervising sociotherapy training

Supervising requires an integrated approach that shows and shapes phenomena in their interconnectedness. The role of a group supervisor is that of a diagnostician and designer. The group supervisor analyses a group, studies vital problems and themes and maps any cultural aspects and practical preconditions that may affect proceedings.

Three types of groups can be distinguished, each with its own discrete orientation on learning. Together, these orientations produce the material from which a profile of a trainee learning to coach sociotherapy groups can be built. Descriptions of these orientations are here listed together.

Box XIII Heart, head and hands orientations

Orientation	On the 'Heart' Perceiving and experiencing are central	On the 'Head' Cognitive learning is central	On the 'Hands' Behaviour and skills are central
Main accent on	Expressing and sharing emotions Sharing experiences Processing experiences Attributing meaning	Strengthening cognition Amassing knowledge Gaining insight	Parenting skills Social skills Behavioural approach

The role of a trainer in sociotherapy

The role that I assumed within my participatory action research was that of a challenging supervisor where possible and a helper where necessary. In this context, my task was to come up with the right questions and working methods that would give trainees the tools with which, in the upcoming sociotherapy groups, they could work towards a regained dignity. I had to be able to recognise instances of motivating or hindering factors in the trainees' gatherings, and to teach the latter to spot these for themselves so that they would be able to make a difference, independently of a trainer. In order for the trainees to methodically learn from noteworthy instances and to try out carrying responsibility, I had to refrain from lecturing. I had to phrase questions or action forms in a Socratic way. My role was to set a consistent and reliable example, to show how one can live and pass on the principles of sociotherapy. In other words, my conduct and actions in the training locations had to be such that my action was suited to the word.

Methods for assessing the level van functioning

In the course of the training, information is gathered with which the actual level of the trainees' functioning can be gauged and compared (cf. the box below). The goal is to attain a higher professional level with these training programmes, comparable to the level of professional nurses.

Box XIV Method to assess a trainee's level of functioning

- The extent of the trainee's passive comprehension of the content of training subjects may be gauged from the effort it takes to verbally reproduce the material taught and from a failure to participate actively. In such cases, functioning is assessed at mark 5 or 6
 - The trainee's active comprehension can be gauged from their active participation at different levels. If the material taught is reproduced verbally and is applied in exercises, functioning is assessed at mark 7 or 8
 - If the trainee can verbally reproduce the material taught and apply it in exercises or games and if a new insight is added to the content with some regularity, functioning is assessed as excellent, at mark 9 or 10
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- The assessment is made per person and per programme part. As a rule, I carried out the assessment independently, sometimes together with co-trainers
 - The average functioning per person is calculated by adding up the marks for the different parts, in accordance with the method outlined above
 - The average level of functioning of a group is calculated from the total of all scores

2.4 A service-oriented learning organisation

The organisation of the training is designed to serve a supportive role in the learning process. The points listed here are based on experience and translated for practical use.

1. To be able to make the correct decisions, each trainee must be well-informed. A prerequisite is that communication is two-way and takes place at all levels of the organisation.
2. Decision-making at all levels boosts team spirit and trainees' sympathy for each other.
3. Decision-making along these lines presupposes shared democratic leadership: sharing power and responsibility.
4. Aim of this approach is to enhance trainees' problem-solving skills. This requires consensus for decisions that are not enforced if members of the organisation fail to reach an agreement. The discussion continues until such consensus has been reached.
5. The entire organisation proceeds from the principle of social learning. This type of learning presents the trainees in sociotherapy groups with examples while their focus remains on their everyday world.

Now that you have been introduced to the post-conflict context and have formed an idea of the methodology of sociotherapy and of the trainees learning how to facilitate sociotherapy, let me show you what happened in actual practice, when trainees and participants put the method to the test.

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PART II

Learning to Coach and Supervise Sociotherapy Groups

3

Getting to Know Each Other

Developing a training in coaching sociotherapy groups in post-conflict contexts is a journey of discovery. I have roughly sketched the phases – safety, trust, care, respect, a say in rule-making and processing emotions – that could occur in a group process. Whether they would occur depended on the trainees: would they interpret the principles of sociotherapy (equality, democracy, participation, responsibility, here-and-now, learning by doing and inter-est) as a social threat or as a window of opportunity?

As I structured the programmes for the training days, I used the above-mentioned group development phases as my guidelines. But when the trainees were actively working together and making new discoveries, situations sometimes arose that affected the order of the phases. Even so, it was always possible to return to their proper order, and this is how:

- By paying attention to every trainee's well-being and that of the group as a whole.
- By observing and respecting locally appropriate behaviour and thinking, and trying to understand how these work out in social life.
- By having trainees focus on the social knowledge of their own living environment.
- By regulating any tension that the invitation to participate actively may create.
- By ensuring that trainees learn from and with each other.
- By being an accountable role model exemplifying how to apply and use the sociotherapy principles.

The eight training groups in the four areas had a balanced composition, with 55% men and 45% women. The coordinating staff totalled seven men and one woman, and operated in the different places. Trainees' average age was 34.7, with the youngest just over twenty and the oldest being 61 years of age. Most trainees had been approached and recruited by the various local institutions. The conversations made it clear that the groups were of an ethnically non-selective composition.

3.1 Use of interpreters

The first goal of a sociotherapy trainer (and later, a sociotherapist coaching a sociotherapy group) is to create the optimum conditions for a safe start of the group process.

A language problem was the first issue to demand attention. Kinyarwanda is the first language in Rwanda. In the colonial era, the French-speaking Belgians introduced French as the language of instruction in schools. The Rwandan exiles, who returned from Uganda after 30 years, had become English-speaking. They returned after the RPF had enabled their re-entry by force of arms. This had left deep scars of mistrust, also among the population of Byumba. The language problem and the problem of finding an interpreter was that the Byumba trainees spoke French but I did not. Someone had to be found who could translate from French into English. This laid bare a political problem as the ruling RPF had laid down that henceforth only Rwandans lived in Rwanda. This requirement implied that returned English-speaking Rwandans could be asked to translate. However, using interpreters from this group would mean that the French-speaking trainees could not speak freely. While the preparations for the training were underway, this trust dilemma was 'solved' by hiring an English-speaking interpreter who had family ties with the Byumba church authorities.

An interpreter sometimes saw it as his task to translate in a 'lecturing' fashion and so translated, initially, more than I actually said, thereby thwarting the inventory I was making of the input the trainees contributed themselves. I gave the interpreter some appreciative attention, instructive explanation and a few corrections. He learnt to refrain from lecturing in his translations. The interpreter-facilitated communication forced both trainer and trainees to use key concepts when talking about essential subjects and to keep sentences short. This procedure required some patience and habituation, and caused some uncertainty on the part of the trainees, the interpreter and the trainer. Some statements were not understood straightaway, and the nervous search for the right word in translation on occasion assumed the character of negotiation. Did the trainer mean peace when she used the word safety? How did the trainees explain the difference between safety and peace? Should safety be translated 'murula' or 'salaam'? While the trainees were looking for the correct translation, I devised an exercise that would preclude me from having to give explanations for the concepts of peace and safety. I asked the trainees to define the concept of safety themselves.

The advantage of the language problem was that the trainees and I immediately shared a similar difficulty and that we were equally dependent on everyone's patience and commitment to make the best of the situation. The delay limited as well as legitimised my asking follow-up questions for clarification purposes and this, in turn, created time to think and reflect.

3.2 The agenda for the first day

The agenda for the first day only underwent minor alterations between 2013 (Liberia) and 2005 (Byumba). I here present the agenda for the first day in Byumba.

At the start of a first day of training, a range of situations present themselves to the trainer where s/he will have to respond adequately. Below I set out how this sometimes affected the proposed agenda. The subsequent sections of this chapter address the opening ceremony, the introduction and the content of the training programme, the playing of a game and the closing of a first day, but not yet the rule-making exercise. That subject is dealt with in chapter 6.

Box XV

Byumba	Sociotherapy – Regaining dignity	Week I
Day I	09.00 Ceremony with prayer, songs and welcome words	
	10.00 Short break	
	10.10 Representatives deliver opening speeches	
	11.10 Physical stretch exercise	
	11.20 Trainer delivers introduction and content of the programme	
	12.30 Lunch break	
	13.30 Rule-making exercise	
	14.20 Short break	
	14.30 Rule-making exercise	
	15.20 Short break	
	16.30 Closing the day	
	During informal time: Playing the memory game	

3.2.1 Attention to feelings of uncertainty

In Byumba, the day officially started with songs and speeches in the presence of provincial and church authorities, the Rwandan representative of donor Cordaid and a professor from the Netherlands. In his speech, the bishop of the Anglican church encouraged trainees and coordinating staff to make this project their own: 'Do not let this project be the trainer's or mine. Be independent thinkers and take your responsibility.'

These opening words did not go unheeded. After a general introduction by the trainer about the training programme, the tense, curious trainees nodded their approval. Some rose to the occasion at once, showed their interpretation of 'responsibility'. They asked briskly if they would get help when it came to implementation in the community. I gestured to the coordinating staff member that the answer should perhaps come from him, but he let me answer the question.

Questions flew back and forth as the trainees mentioned examples of poverty and asked whether money would be available at the end of the training to help combat or alleviate it. Both answer and question confirmed my suspicion that the trainees were used to getting this kind of aid. And that they had been given instructions, in the respective training programmes, on how to distribute the material aid. I explained that the budget that had been made available for this training was solely meant for the development of community-based sociotherapy. Still, the suspicious question came: 'How can the programme be suitable if hunger and poverty are the main problems?' I explained that I had not been asked to provide a food aid or an anti-poverty programme and that the sociotherapy method is in first instance not so much about alleviating hunger and fighting poverty but will ultimately be able to bring this about at a later stage and in a different way. I had begun to realise that this message was hard to grasp and that digesting it would require repeated explanation and take time.

Sooner or later during the training, trainees in all groups sought information about the person of the trainer. The recurring quartet of questions was: 'Are you married? Do you have children? Do you believe in God? Are you a member of a church?' Sometimes, they asked their questions indirectly during the first meeting where we got to know each other. In other situations, they used the break to ask a direct question. It was not the first time that I had been asked such questions in Africa. As I made some enquiries of my own, I learnt of unwritten local codes for conduct to adopt towards people in different

positions and also, that the trainees had met other foreign guests who introduced themselves as members of a church organisation. The trainees asked these questions because while I did present myself as a sociotherapy trainer, I did not mention my social status or my beliefs in the introductory meeting.

Reflections on the process of getting acquainted

The question about material aid shed light on how the trainees saw themselves and the people they stood up for. For them, responsibility was associated with years of receiving material (emergency) aid. Working with material aid had become 'normal' and the tone of the questions reflected the side-effect of the long period of emergency aid. This reminded me of the exploratory talks where I had been told about people's resistance to take up cultivating rice along the river banks and thus generate their own livelihood again. They had found it impossible to resume working together along the banks under their own steam, without any assistance: after all, this was the place where, during the war and the genocide, many had sought safety but found death. My expectation now was that building a foundation of trust would not only help increase cohesion but would also have socio-economic relevance. And although my weakening expectations in the 'here-and-now' did not optimally relate to my intention to offer a first sense of certainty, I first radiated certainty that it was acceptable for the trainees to be uncertain at that moment.

At the start of each training programme in subsequent locations I came to place more emphasis on what may and may not be expected from a sociotherapy training. I acknowledged existing certainties and introduced a new one: 'this sociotherapy training is about to start because there is a wish for change here, and change always brings uncertainty at first'. This made it easier to limit any material expectations.

3.2.2 Attention to feelings of unsafety

The value of opening and closing the day together every day lies in the fact that attention is focused on everyone's well-being, that connections can be made between the training days and that they yield subjects and material for the training. The activities allow a trainer to weave in all sorts of questions.

During morning assembly, when the day is opened, everyday questions can be asked: 'How are you? Did you sleep well? Did you have a good journey?'

This was sometimes met with an evasive counter-question or a succinct answer: 'fine.' I would then ask a follow-up question: 'May I ask what I am meant to understand by your answer 'fine'?' This would at first be met with looks of surprise or embarrassment, with sometimes a repeat of the answer: 'fine.' In the course of the next days the trainees, in an attempt to pre-empt embarrassing moments, then gave this answer: 'I am fine. I slept well.' As I continued to weave questions into conversations, trainees dropped their reserve and their amazement disappeared over the next morning assemblies. I could ask different kinds of questions, about the duties that awaited the trainees when they returned home, for instance; some trainees who were teachers hurried to their schools, others gathered grass for their cattle, again others were choirmasters and went to the church to rehearse.

The trainees were positive about my informally joining the group before the actual start of the day programme. I too found it a positive experience: a meeting where all manner of things can informally be woven into the conversations always yields information and topics to start the day off with. In one morning assembly, for example, I asked if I had heard correctly that a trainee could stay over in the village for the duration of the training. And next, I could ask (in Nya-Ngezi and Kakata) what distances some of the trainees had to travel. Did everybody walk to the meeting? The interest I showed was accepted and appreciated; it brought about a beginning of trust and as I continued to weave in my questions and ideas into conversations, I explored possibilities for future discussion topics and for the right moment to start on the theoretical ideas which underpinned my first actions.

After a few days of training, the morning assemblies assumed the relaxed character of a talk 'as in the yard', and I had to be careful that the time limit was not exceeded too much. If, in assembly, a question was not directed at a particular person, trainees usually left the answer to the few men who were used to being the first to take the floor. Rarely were the women the first to do so. I dealt with this in such a way that my interventions served as an example for the trainees to follow as they learnt to reflect on matter-of-course behaviours.

Sometimes there was little time to prepare, and the training room would still have to be arranged at the start of the training. An appeal to the trainees' physical strength, when chairs and tables first had to be fetched from another floor, for instance, helped ease introductions and communication.

Reflections on the process of getting acquainted

Inexperienced sociotherapists might be disconcerted by trainees' reserved reactions to their show of interest in their well-being. After all, their questions were well-intentioned, weren't they? When giving a training, it is important to first acknowledge this uncertainty because it is not possible to explain the underlying theory about working methodically on the very first day. During the first days of practice, I behaved as a guest exploring her new environment. I asked the sort of questions that would also be asked 'in the yard' and served as a role model, exemplifying the 'learning by example' principle. This taught the trainees that the trainer's actions involved a careful search for space where contact could be established. In the group described here, this search called for my skill in handling avoidance behaviours. In another place, it was important in the beginning that I used my skill in offering structure in order to curb some enthusiasm.

Recurring daily, morning and afternoon assemblies become predictable events because of their similarity in structure. Organised and predictable moments bring reassurance to unpredictable situations. It is important to find the right moment at which the trainer discusses this with the trainees. By way of preparation for 'right moments' and adhering to the 'learning by doing' principle, I formulated the questions in my mind that I would later ask about the development process.

Looking back on the start of the various training groups, I find that I assumed that trainees would have no experience with my inviting manner of questioning, have no knowledge of participation as a means or a goal, and would not know the concept of effective training.

3.3 The games

In order to make the training attractive and to add some variety by alternating exertion and relaxation, I presented a range of interrelating exercises and games. The games challenge a player to look in different ways at himself and at the other, provide insight into cooperation as well as relaxation. The variety promoted trainees' well-being and their joint commitment.

The game of memory

In most groups, the memory game was played on the first day. I explained how it works: an even number of cards consists of a number of sets of two identical cards. The idea is that the players win as many sets as possible. The person with the most sets is the winner.

The first game was played with cards showing. The trainees fanatically made a grab for the cards. The next round was played by different players but, to everybody's surprise, the cards were now turned over. I challenged the players: now that you cannot see the pictures, you will have to remember where the corresponding cards are. If you concentrate, you should be able to do it. The result of this unexpected turn of events was that the players emphatically sought eye contact with me and asked wordlessly: 'What kind of trainer is this' and 'What kind of training is this?' For my part, I too reacted non-verbally and the subsequent smiles on the faces of the players and the spectators made it clear to everyone that, indeed, this challenge had been my point.

It needed some corrective remarks to make everyone obey the rules of the game, in particular the rule that players return to the same spot any cards that they have looked at but that do not make a set. After several corrections I could challenge the players without tensions mounting: I teasingly claimed that the cards were deliberately being mislaid, thus inviting the players to prove me wrong. I also challenged the spectators to either believe or doubt that a card was mislaid deliberately or innocently. They voiced their opinions with ease, speaking more or less loudly, and gradually took over my corrective actions. Some good players stood on the sidelines, excited, loud and impatient. They made a visible effort to respect the rule that they were not allowed to help the players whose turn it was. The trainees played the game in high spirits and displayed a striking zeal to win.

In one group the tension of the first hours lessened and any feelings of reserve subsided. One of the women lay down on a vacant table, without getting any remarks from the other trainees. Now she too was able to follow the game.

Reflections on the process

The memory game asks the trainees to play together and this requires focusing attention on the 'here-and-now'; the game interrupts intrusive thoughts, promotes individual concentration and group cohesion. The trainees experi-

enced the game as a surprise and this made it function as a tension-breaking factor. It brought uninhibited pleasure as well as an atmosphere of safety. The trainees and the trainer now had new, different ways of making contact. To me, it was an absolute surprise that the game was accompanied by so much exuberance.

From the players' interaction about the rules of the game I distilled information with which I could mesh subsequent topics. The trainees' desire to win, for instance, made it easier for me to devise how I could later on in the training thematise the position of victimhood.



Photo 4

Author's own collection. Memory game in Nya-Ngezi, 2016

3.4 Bringing a day of training to a close

As a day of training is brought to a close, the trainees' well-being is once more focused attention on and the day's activities and subjects are reviewed. Was the day well-spent? Was the day thought to be too easy or, instead, too difficult? Did the subjects tie in with the trainees' interest?

Groups develop each in their own fashion, depending on the members' characters and local conditions, but at the end of a first training day, a more open atmosphere had come about in every group. A number of groups had trainees who were happy to take the floor and spoke at quite some length. In one group, tension arose because of trainees' doubts if I could understand what had happened in their recent past.

In the afternoon assembly I asked questions in an upbeat, encouraging manner, using everyday words: 'Have you learnt anything new today? What did you appreciate in today's programme? How are you going home now, tense or relaxed? Are you coming back tomorrow?'

As a tool to evaluate the experiences and feelings I drew a large, symbolic thermometer with plenty of space to its left and right side where trainees each filled in their mood temperature. This method lowered the threshold to answer and promoted feelings of safety. The thermometer was received with a wink in all groups and mood temperatures were duly filled in. At subsequent day openings and closings the thermometer was produced to add 'new temperatures' and to see what differences there were with previous measurements. It elicited humour: when feverish heights were filled in someone called out that a doctor should be consulted, whereupon the trainees responded with: 'But that is us.'

The creative format brought relaxation and this was reflected in the full sentences trainees now used and in their reassuring answers. 'I'm going home relaxed because I've learnt a lot today that is going to be useful to me'. Or: 'I appreciate how we begin and end the days in an interactive way'.

Reflections on the process

The trainees did not know what it was like to participate actively or to learn from each other. Therefore, I asked encouraging and positively phrased questions in the afternoon assemblies: they showed trainees that this type of questions can have a steering function. On the other hand, steering evaluations during an afternoon assembly implies influencing its content, and I had explained in my outline of sociotherapy that sociotherapists are not supposed to set the subjects for discussion but that these should come up during the interaction with the trainees. Even so, I first had to suit myself to what possibilities there were before I could create space for change. Still, I wanted to justify my actions to the trainees, and at a later point in time did so.

My aim was to establish an effective group and I was wholly aware that this meant interfering in the coherent whole of norms and standards that support a hierarchical kinship organisation. This realisation demanded that I cautiously match the pace and the possibilities for social change that the trainees desired and could afford, and the choices they wanted to make in the process.

I had the skills and routine to intervene in groups. But in an environment where I was a stranger, and the trainees were at home, this group work definitely felt different from what I was used to. A few trainees presented themselves as spokesmen (and sometimes as guides) who were 'masters' at speaking at length. These usually were higher-educated trainees who held the better social positions and enjoyed prestige. This complicated things for me because it was not to be expected (certainly not in the first days) that my feedback would receive approval or that the 'silent' trainees would correct the 'spokesman' or call him to order. It was a challenge to myself to at the same time show respect and provide change-oriented feedback. I discovered that the afternoon assemblies were the best moments: there, my feedback was least associated with the perception of criticism.

Bringing the day to a close together seemed a 'socially normal' thing to do and this allowed the trainees to ask themselves, as part of the training, what its added value was. The significance of jointly bringing the day to a close – and this is not to be underestimated – is that every trainee is a witness to answers that today are reassuring but tomorrow will require extra attention. And thus it happened that, now that the 'normal' predictable structure was organised, commitment increased and, with it, the importance that was attached to what was discussed during the afternoon assembly.

3.5 The coordinating staff and the staff meetings

The training programmes for Byumba and Nyamata each started with a general coordinator and a financial secretary. In Nya-Ngezi, there were four staff at the start of the training. They were responsible for, respectively, general coordination and logistics, and financial, legal and monitoring activities. In Kakata, NGO ZOA carried out the task of creating the requisite conditions for the training. All eight staff members took part in the first sixteen days of training so they could experience the new methodology for themselves and discover how and why sociotherapy is effective and how it is best organised and facilitated.

Staff meetings dealt with housekeeping and logistics issues, addressed matters of content as well as the central question whether the training evolved as the staff had hoped it would.

I received both delighted and negative signs from staff members ranging from 'a training in the home environment will distract trainees' to 'I am not confident that the trainees will have the discipline to keep to the starting times' (there were three starting times per day: at the start of the day, after the morning break and after lunch) and 'a training location far from home may well increase concentration'. Grown accustomed, in other projects, to trainees expressing a wish to receive training, yet staying away from the training fairly soon, staff members thought that the trainees could not be trusted off-hand. One staff member told the trainees at the start of the first day of training that if they were absent for a certain number of days they would not be eligible for a certificate.

However, as the training programmes took place in the home environment, the trainees had no problem keeping to the starting times. As a rule, they arrived well in time. One or two people sometimes were a bit late. The latecomers (occasionally head-teachers who had to get their teams started) always had a valid excuse. Where staff members were concerned about their trainees' dependability I showed understanding for the performance pressure that had been placed on their shoulders and I pointed to the trainees' striking respect for starting times, which in my view indicated focus and commitment.

It became noticeable in the first staff meetings how both the staff members' surprise and their confidence had increased. They found the group to be committed and the training method to be analytical, methodical and didactic. The games, they said, had a surprising effect.

As it was important for me to know what the staff thought about the training, I asked the staff members to rate the training with a mark between 1-10. The ratings included their appreciation of the training in general, the trainer, the trainees' passive understanding, their active commitment, the staff members' own logistical organisation and their own commitment. The staff members reported they were most content with what they had seen.

Reflection

I knew that the staff had a different position within the hierarchy of social relations from most trainees. Responsibility for the logistics and a flawless expenditure of a substantial budget rested on their shoulders. They naturally had, and voiced, concerns about the trainees they had recruited. I neither confirmed nor denied these concerns, and could thus retain some space for myself to observe the normal state of affairs better.

The manner in which the staff members expressed their experiences with the training demonstrated they were capable of changing their minds.

3.6 First communication, the phases and principles

During the first days of training, the trainees and I gained experience with using interpreters, with introducing the training programme, the morning assemblies, the game of memory, the comfort breaks, the afternoon assemblies and the staff meetings. It was on the basis of these experiences that content and form of the training were further developed.

Central here is a methodical way of learning, a form of learning, in particular learning from experiences, where students learn at the cognitive level what an experience signifies and in what circumstances or situations this experience may (or must) be used. The form in which I applied this methodical way of learning was the same for all training programmes. Every time, I drew a circle on the flip-over and divided it into six segments. I would write in each segment the development phase of a group process in two languages (safety, trust, care, respect, say in rule-making, processing emotions). I then asked the trainees what they had observed about the development phases, about, for instance, the phases of safety and trust.

- How did they know that there was more safety in this group today than yesterday?
- Which activity contributed to the increase in safety?
- On the basis of what change did they know that the 'safety' phase can be closed?
- How did the trainees spot an increase in trust?
- Which activity contributed to the increase in mutual trust?

I wrote the answers in keywords on a flip-over sheet, which I then displayed on the wall. In this way, the information would not get lost and could be looked at again.

On the basis of the answers I continued my questioning:

- Did the trainees recognise how the seven principles were applied? (Equality, democracy, participation, responsibility, here-and-now, learning by doing, interest)
- Which instance told them that a principle had been applied?

Answering these questions always had the trainees thinking things through. Because they were quite surprised when they were introduced to the content of the training programme, I later on asked them questions about the meaning of surprise and the significance of thinking deeply.

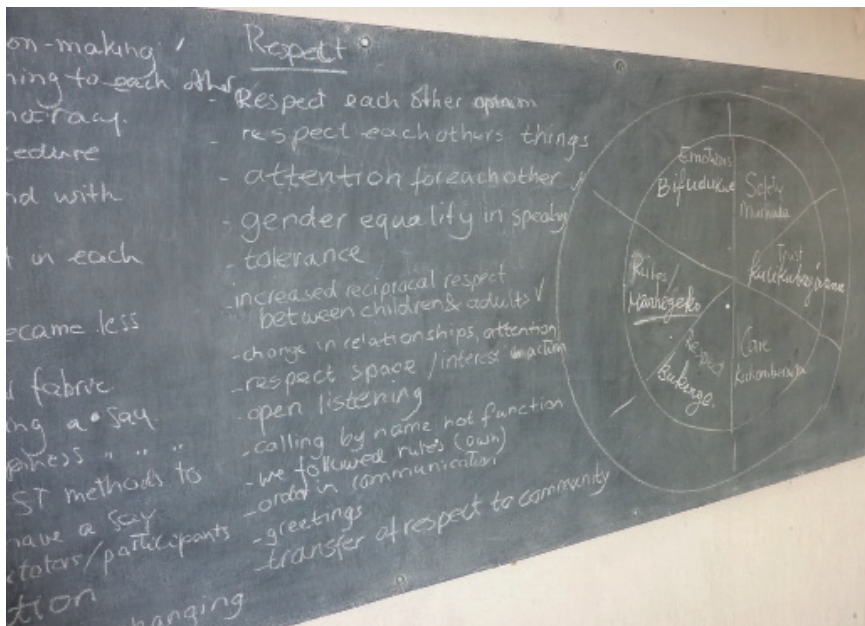


Photo 5

Author's own collection. Answers from Congolese trainees six years after their first training experience

3.7 Reflections on my role as a trainer

It is relevant that a trainer (or sociotherapist) looks back on the introductory meeting because it is important to conclude it with a satisfactory result.

Bearing in mind what I saw as my role – devising instructive questions and effective methods with which the trainees could themselves work towards a regained dignity – I asked myself the following questions:

- What exactly were the central issues in the introductory meeting; what was it about?
- What were important but as yet unarticulated issues?
- Did I pay attention to the atmosphere in the group?
- Did the interaction between the trainees and me get off to a good start?
- Which intervention got the interaction among the trainees off?
- How did the trainees respond to my method of weaving elements into the conversation?
- Did I make good use of situations that trainees could learn from?
- Did I choose the right sort of questions?
- Did I observe, understand and respect locally appropriate behaviour and thinking?
- Did reactions from the group alert me to any blind spots I might have?
- Did I offer activities that helped the trainees focus on their ready knowledge of their own world?
- Did I regulate the tension that arose at the invitation to participate actively?
- Did I ensure that the trainees learnt from and with each other?
- Did I function as an easy-to-understand example by applying the socio-therapy principles consistently?

3.8 In conclusion

The recurring morning and afternoon assemblies and the game proved adequate instruments for creating certainty and safety and new team spirit. At the end of the first training week, trainees said that their being together like this had called up a sense of security in them: 'We almost were a family.' Despite the language problem, the fundamental human need for contact had been met in this initial stage of group development. And after they had carried out a learning by doing activity, the trainees claimed that their feelings of safety had increased. Once familiar with it, the trainees appreciated my show of interest in their daily well-being at the start of the day. Some trainees recounted that they had started to experiment with this at home as well. Depending on the area, trainees in one group spoke about this with restrained pride, while in another group they showed their pride and joy more openly.

Literature consulted:

- Johnson, D.W. & Johnson, F. P. (2009). *Joining Together: Group Theory and Group Skills*. Upper Saddle River: Pearson Education.
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Recommended reading:

- Patel, V. & Saxena, S. (2014). *Transforming Lives, Enhancing Communities- Innovations in Global Mental Health*. The New England Journal of Medicine. www.nejm.org/doi/full/10.1056.
- Patel, V. (2015). *SUNDAR: mental health for all by all*. www.rcpsych.ac.uk/pdf/PUB_InverV12n1.pdf

4

Expectations, Group Targets and Programme Objectives

During my work in Dutch clinics with refugees from various conflict zones, I had found that they had difficulty responding to questions about expectations. Sometimes this was because their expectations had been shattered or because expressing expectations was something they were not familiar with. I noticed something similar when I asked after the trainees' well-being in the first groups. I bore in mind that their reserve might mean that expectations had been trampled, that silence about expectations could point to shame and that talking about expectations might spell danger.

In the theory of group dynamics, trainees' expectations constitute the building blocks for formulating group targets. However, actual practice in the post-conflict areas showed that most trainees were not used to taking on responsibility - individual and/or collective responsibility – for bringing about social change. It has, therefore, to be borne in mind here with respect to the questions about expectations that these trainees have not settled down yet in their group, that they may have very different experiences and opinions as regards the situation in the present context and that they too are exposed to the widespread mistrust in their own living environment.

During the training I taught the trainees to look at the everyday as if through a magnifying glass because facilitating community-based sociotherapy groups is very similar to the everyday meetings in the yard. I would now like to show the reader what experiences and reflections ultimately led to the most appropriate form of asking questions about expectations.

4.1 Basic assumptions

My questions about trainees' expectations had to be well-founded if I was to set a good example and elicit answers that led to participation and learning by doing.

I therefore took into account:

- The ways in which the trainees have been socialised to look at and assess situations.
- The widespread mistrust in the trainees' (later participants') living environment.

The questions had to:

- Be of service and of use to the trainees and help them establish contact with each other.
- Help the trainees formulate a viable group target.
- Facilitate the trainees to undergo a process of development.
- Be conducive to the trainees learning from and with each other.

4.2 Questions about expectations

Trainees from the first training group expressed their surprise, at the end of the first week of training, that the programme had exceeded their expectations and that their being together had felt as if they were in the company of family members. I explained what community-based sociotherapy aims to be and seized upon their statement that the training was 'beyond expectation' in an attempt to flesh out the content of the training more extensively with them. In this way I shared responsibility for the success of the training and corrected my omission. (The first week I forgot to include the question about expectations in one of the day programmes).

The trainees found it a 'disappointing' prospect that they would have a week without training. I suggested that in this training-less week they formulate their expectations for the weeks of training that were still to come, and set this for homework. I added the topic 'expectations' to the first day programmes of every subsequent training.

Interaction about expectations

On the first day, trainees in the first training group responded variously to my explanation of the training programme and, in their reactions, expressed their expectations. They asked what kind of aid they could expect once they started to implement the sociotherapy in the town districts and in the villages. They argued that people were having problems with leaking roofs, suffered from hunger, and lacked the money to pay their children's school fees. Upon my answer that sociotherapy is not in the first place about material aid, they wondered how they might provide help if they came to the villages empty-handed. The tone the trainees adopted felt peremptory: clarity was needed now.

When, at the start of the second week of training, the homework assignment about expectations was discussed, it was a notably different kind of insight that was now articulated. Trainees had noticed that people around them felt vulnerable and lonely, that there were feelings of fear and shame towards God. After some concrete examples, they formulated their expectations in terms of love. They wanted to learn about psychosocial strategies for dealing with traumatised people. About what divides people and what brings them together. They wanted to acquire the skills to handle aggression and domestic violence, and hoped to learn how to (help) reduce poverty. Trainees said they assumed that they would conduct sociotherapy with widows and groups of genocide survivors, orphaned children, childless women and with handicapped or HIV-diagnosed people. They asked to be given more games as well as a handout.

Even trainers learn by doing and so I put the topic 'expectations' on the agenda for all subsequent groups, right after the introduction of the training programme. In the next location, trainees asked with one voice to be able to speak. I called out the names of the trainees who had raised their hand and listed these on the flip-over, thus making a reminder that everyone could use. I also wrote in keywords any expectations on the flip-over sheets, and displayed these on the wall. I suggested that we together made sure that each expectation was given attention over the next coming days.

Some trainees expressed expectations in general terms, which sooner raised obstacles, at community level, than inspired thinking about personal expectations. I verbally encouraged them to formulate their expectations more concretely, but to little effect. And so, I took the flip-over and drew two figures: one bowed down with an overlaid backpack, and the other with

a thought bubble over its head. I said that the backpack can become lighter if it contains concrete expectations that are doable. As I did not see much understanding or approval of this explanation on the part of the trainees, I decided to explain even more concretely what the significance is of formulating viable expectations. I gave a sample sentence and asked the trainees to finish it: 'I hope that in three years' time, there will be ... in my home environment so that my/the feeling of unsafety in our area diminishes.' Trainees offered answers, which I then drew and wrote in the thought bubbles over the figure (without backpack). This produced a cartoon that conjured up a smile of recognition. Referring to this cartoon I explained again how interesting it is if every expectation receives attention out of a shared sense of responsibility.

When answering the questions about expectations the higher-educated men would speak up sooner, more often and more easily than the other trainees, with some making no bones about cutting dominantly in on other trainees. I intervened on this sort of behaviour in a delimiting way, stressing how important it is that every trainee express their expectations (for) themselves. Having to delimit and write down every expectation in key words slowed things down. But it did reduce some trainees' urge to clarify what others allegedly meant. Using key words also reduced variation in word choice. The trainees apparently assumed that I would get the purport of their sentences anyway.

This is what emerged from the answers: the trainees expected to learn about solidarity and peace. That people would care for (love) each other and feel a sense of collectivity to benefit the development of the community. And they hoped that everyone would complete the training course, that everyone would listen to one another and work together. They wanted to know how they might solve the many land disputes, and reunite ostracised women with their families again.

Deeming this too early at this stage, I did not as yet ask any follow-up questions about the ostracism of the women. But though I did ask clarifying question about the land disputes, answers remained general. This reinforced my impression that a number of trainees had difficulty imagining my ignorance about the subject. There again, several trainees make good use of the opportunity to sharpen up the summarised expectations: 'I want to see improvements in mutual communication' was changed in: 'I want to see a reduction in misunderstandings.' By way of explanation it was said that misunderstandings had considerably increased over the last few years.

Expressed too were general and isolated expectations that related to the nationally propagated motto of unity and reconciliation. ‘That we may all in our hearts conceive of things in the same way again,’ the trainees said, after I had prompted them several times to be more concrete. Hopes for greater solidarity were expressed and for an end to the ethnic conflict. Someone added in an agitating and contentious tone that the root of ethnic conflict had to be tackled. The decisiveness with which the ethnic problem was openly put forward was in stark contrast to the cautious tone other trainees adopted. Both the atmosphere and the content made me extra alert. Could they talk about the ethnic problem in this way here because of the overwhelming amount of loss? I proposed that the trainees first work on safety and trust before discussing the sensitive issue in the group. I stressed the high risk of failure when the root cause of the ethnic problem is discussed at too early a stage but I found little space for this suggestion. It was objected that the ethnic problems involved a great deal of difficulties and I was asked if I was going to warn trainees not to talk about the issue. I was impatiently told about children from mixed ethnic families who asked about absent fathers or mothers. I was asked peremptorily what answers these children should be given. The other trainees did not endorse this input but did not contest it either. I said that I had a method – I was thinking of Hofstede’s onion diagram here (more on this later) – with which the issue could be brought up again during the next days of training. Tensions abated somewhat, but did not disappear.

Discussing expectations showed up the difference between trainees from villages and those living in towns. The former tended to ‘live together with others who have become familiar’, while the latter ‘lived among known and anonymous others.’

Reflections on the process

Finding a format in which the trainees can express their expectations properly also lays bare how a personal working relationship (a mutual bond of trust) is created. And it shows how at the same time attention begins to be directed to a shared sense of responsibility for what is going on in the training group now (and, in a couple of months, in the sociotherapy group).

Several situations carry the risk that simple and obvious possibilities are overlooked. For instance, I did not ask the first group about their expecta-

tions straightaway, at the start. I solved this by giving the group the homework assignment that accommodated both elation and disappointment.

As trainees expressed their concerns and expectations, they also conveyed how they had grown accustomed, since the genocide, to providing and receiving material aid. But it was also clear that the aid that had come flooding in all these years had failed both to lift them from poverty and to bring them together. Even so, they thought to be helping the destitute population by asking for material aid, almost as if negotiating a deal. This issue provided me with material that I wanted to ask questions about at a later, more appropriate time.

In one group I had to repeatedly invite and prompt reserved trainees to participate, in another group it was necessary that I firmly structure trainees' exuberant participation. Using the flip-over I visualised for the trainees how a discussion is structured and how all group members can equally have their say once responsibility is shared. This improvisation 'obviously' led to a discussion of the importance of shared responsibility.

Every activity was reviewed, starting with an opening question from myself and then continued by the trainees. I asked: 'What was this activity about? What happened in this activity? What have you learnt from this activity?' The answers and the way in which they were given never failed to surprise me and so pointed the way to follow-up questions. This got a dialogue going that offered me a chance to stress the trainees' knowledge and accomplishments and to explain theoretical concepts (ever too briefly). Trainees' greatest hope for unity and reconciliation was long expressed in general and abstract terms. This made me realise that a great deal of initiative would have to be taken before this hope became a concrete reality in the core of the community.

I sometimes assumed that the trainees (who worked in education or held managerial positions in social organisations) understood that they themselves can play an active role in reducing disruption. It gradually occurred to me that this assumption did not correspond with reality. In retrospect, I could have asked other questions: 'How do you want the people in your community to be living together in two years' time? Could you yourself play a role in making the expectation you express here come true? What skills would you need for that?

Putting the topic of expectations on the agenda brought home to me what a politically charged and hierarchically organised (social) order feels like. And I realised that against this background, my interventions and the trainees' reactions could easily be seen as judgements or entrenched positions, some

of which were not without risk. My conclusion was that I would have to bear in mind for the rest of the training that the trainees might feel fettered when expressing their expectations and/or views.

4.3 Expectations and programme objectives

The programme objectives had been set by the local organisations and had been endorsed by the respective donors. Since it is easy to fall into the trap of preparing far too much when teaching supervision of group change processes, I had advised the local organisations to leave space for the trainees' contributions, and, therefore, to formulate broad objectives. These would then sooner match trainees' expectations, and bearing responsibility could be experienced as an interesting challenge.

Having earlier put the answers about the expectations on the flip-over, I now wrote the programme objectives next to them (cf. box XVI). My intention was for the trainees to get to know the programme objectives, and with these, the general objectives. It was especially important that the trainees learn to bring a general objective within their reach by their own expectation-based actions: they would thus sooner share responsibility for it.

In a plenary dialogue I asked the trainees to go through the list item by item and find similarities and differences. I crossed off those items where expectations corresponded with objectives. While crossing these off I asked the trainees to adduce arguments and this cleared the way for a discussion, later in the training, on how important it is that expectations are specific, measurable, acceptable and realistic and that they can be realised within a certain set time limit.

The question-and-answer process brought home to me again that the trainees were not used to learning from and with each other. They did not give themselves an active role to play during the first days whereas the programme objective 'regaining dignity' does, in fact, require such an active role. I could see from the proud facial expressions that there was a sense of self-esteem, especially when a similarity had been found between an expectation of their own making and a programme objective. As they compared the lists, the trainees learnt that they had a responsibility to bring specific expectations in line with the formal programme objectives.

Box XVI Comparing expectations and programme objectives

Expectations (summarised by the trainer).	Programme objectives (summarised by the trainer).
Byumba	Byumba, Rwanda (2005)
Teach us psychosocial strategies and skills that help us tackle social problems.	Reinforce feelings of safety and dignity in the social community and reduce psychosocial stress.
Nya-Ngezi	Nya-Ngezi, Democratic Republic Congo (2007)
Learn skills to reduce the social problems.	Work towards acceptable and relevant social relations between people in the local communities where nobody is excluded.
Nyamata	Nyamata, Rwanda (2008)
Tackle the issue of the orphaned children; Learn how to create the solidarity that will make the ethnic division disappear.	Strengthen people's capacity to reduce (or resolve) conflicts within local communities so that human dignity and social safety can be restored.
Kakata	Kakata, Liberia (2013)
Teach us how we can make our joint life in our community more pleasant.	Build trust.

4.4 The significance of the expectations for learning about the phases and principles of sociotherapy

Expressing their expectations increases trainees' insights while it provides the trainer with material with which to teach how group phases evolve and how the group process principles can be identified and recognised. When voicing their expectations in each other's company, the men have their say, as do the women and younger trainees.

In one group, I took the emotion-laden expectation that we 'begin with the root cause of ethnic division' and the attendant tension seriously. I emphasised that feelings of safety still had to be developed, and must then be stabilised. Emotions will (obviously) surface from the first moment that the group convenes; these should be taken as signs of generally felt feelings of unsafety, mistrust, lack of care or disrespect, particularly at that early stage. The order

in which safety and trust and care are developed is of major social importance because each minute that is gained when learning to delay gratification of urgent emotional needs lays the foundation for the ability to engage in discussions of difficult subjects at a later, safe moment. That is why in sociotherapy, the focus on processing unpleasant emotions is situated in the sixth phase of group development.

In another group I applied the principles of equality and participation as I invited the women to take the floor, and asked the men to let the women formulate their expectations for themselves. This teaches trainees in the 'here-and-now' to look out for anything in their behaviour that they do matter-of-factly. This may come to serve as an example when participants are recruited in the intervention area.

4.5 The significance that a daily ordering and sorting of experiences has for the trainer

Every day, I sorted and wrote down my experiences so I could decide how to proceed with the training and the activities: this is the only way to ensure that their content relates to trainees' starter level and their context.

The important question when sorting the various experiences is whether the trainees are actually learning anything. As regards the subject 'expectations', I found that they could learn from and with each other about the situation in their immediate vicinity, about the functioning of the family units in their own environment and about the way in which social institutions in this area work and cooperate.

Some cognitive tension arose when I responded to the trainees' expectations of material aid in a delimiting way. I understood that sociotherapy is not the appropriate instrument to continue aid dependency. In the sweeping content of the tension mentioned here I detected a subject that I wanted to return to later on in the training.

Another location witnessed a great deal of enthusiasm when I asked about expectations that was not yet induced by the training; from this natural enthusiasm I inferred that the group was a faithful reflection of normal, locally appropriate ways of behaviour. This underpinned my view that it was of great importance that the training for sociotherapists is community-based, where

ordinary behaviours are directly and fully visible. And, of course, any changes resulting from the training would similarly be immediately perceptible. I regulated trainees' enthusiasm and explained why I did so. This helped the trainees learn from and with each other.

I regularly asked to have a certain expectation clarified and then noticed that 'helpful' trainees would take it upon themselves to provide the clarification. This kind of action quickly relegated the original contributor, who was more often a woman than a man, to the background. I explained that this constituted a premature interference and hampered the whole idea of why we were here together in this training. It was not enough. Only after I had repeatedly explained this, did it dawn on some trainees that they had been prompted to think about the meaning of their 'helpful' behaviour.

None of the trainees had ever encountered a 'learning by doing' training programme. I noticed from their manner of reasoning that they automatically assumed that there would be a great (power) distance between those asking for aid and those providing it, based on the classical idea that a relief worker is there to solve the problems of the beneficiary. Attendant on this model is the expectation that there will be cognitive knowledge transfer, as in the classical role division with the knowledgeable teacher and his students. This, I thought, could well explain the fact that mutual interaction among the trainees was slow to get off the mark.

In the start-up phase of the groups I fulfilled the role of discussion leader, with the trainees only talking with each other via myself. And I noticed how the trainees maintained the (power) distance between them and me: every morning training session anew, the tables and chairs would be arranged in a hierarchical order, as if this was the normal state of affairs. Poking a bit of fun at this, I would slightly rearrange things, which the trainees and the staff observed and rated with a smile.

Behind many an expectation of material aid lay a story: the lack of money for school fees was not only a matter of poverty, it turned out: it also related to the unequal authority between spouses. Not seldom did fathers spend their money on alcohol. I found that drinking was also a form of self-medication. These insights inspired me to find engaging exercises that would help trainees handle the sensitive topic of families.

A start had been made with learning from and with each other and learning about the environment where the trainees would shortly coach and supervise

sociotherapy groups. The answers to the questions about expectations yielded as yet insufficient building blocks for a formulation of the group targets.

The daily sorting and ordering helped me to spot patterns in the gatherings, besides drawing up the agenda for the next day of training. During the training programmes in the first locations I was to find out how difficult it was to do this end-of-day sorting, and concomitant safeguarding of the training, together with the general coordinating staff member. The novelty of the method required a great deal of effort on their part. In the subsequent locations, the daily safeguarding of the training went well: in one case, it took a daily one-hour review meeting while in the other, we did the task of sorting and writing together.

4.6 Reflections on the role of the trainer

Trainees become accomplished at the sociotherapy method if they learn to 'read' and handle 'the dynamics' of groups. I used motivating and hindering triggers from the groups' gatherings to kickstart a social process, from which they learned to identify and recognise the six group development phases.

I aligned my behaviour with the principles of sociotherapy. I was equipped with methods and techniques and, like anyone else involved in the training process, I brought in my own socialisation, including my possibilities, blind spots and sensitivities.

My points for reflection include:

- Focus on an atmosphere of well-being within the training group.
- Overturn the image of the all-knowing aid worker.
- Focus on everyday details that reveal mechanisms of socialisation.
- Try to comprehend the complicated present from a historical, socio-economic and political background.
- Inspire confidence that the format of the training is practicable.
- Set the function of the social yard as a dot on the horizon.
- Find everyday words for abstract core concepts from the literature.
- Develop perspectives for a simultaneous running of great number of sociotherapy groups.

This kind of focus requires that the trainer:

- Challenges where possible and protects where necessary.
- Asks questions about 'ordinary', matter-of-fact elements in behaviours so that trainees themselves become agents of social change.
- Trains in a service-oriented manner.

4.7 In conclusion

The beginning of the sociotherapy training saw a recurrent pattern of interaction forms, which brought home to me that it was by no means obvious that the trainees would reflect and participate actively of their own accord. The information they provided laid bare a strong longing for a familiar but lost solidarity. It was the trainees' hope that everyone would be able in their hearts to conceive of things in the same way again. As far as they were expressed, trainees' expectations were formulated in terms of the familiar kinship model. Trainees showed little skill in expressing their expectations and this was a sign that they had had little practical experience of democratic control. The questions about expectations of the training constituted an invitation and encouragement to get a process going in which they would be able to learn from and with each other how to supervise sociotherapy groups. As yet unable to put this into words, the trainees discovered that they had started a training that differed from what they had been used to.

Targets that trainees formulate themselves (and, consequently, understand) contribute to the formation of participative groups, which is deemed essential if dignity is to be restored.

Every context and specific situation is relevant to the interaction content, the questions to be asked and the action forms to be supplied. It follows from this that training programmes in supervising sociotherapy groups cannot be based on a format with supply-oriented action instructions. The questions about expectations were aimed at creating participatively cooperating groups and, ultimately, communities. They originated from the orientation on social change required to independently address key issues in the immediate environment.

Literature consulted:

- Johnson, D.W. & Johnson, F. P. (2009). *Joining Together: Group Theory and Group Skills*. Upper Saddle River: Pearson Education.
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Recommended reading:

- Kagame, P. (2012) Speech by H.E. *Paul Kagame at the official closing of Gacaca Courts*.
www.paulkagame.com
- Strauss, S. (2014/04). *Twenty years after the Rwandan Genocide*. Blog Oxford University Press.
- Nussbaum, M. (2016). *Anger and Forgiveness: Resentment, Generosity, Justice*. Oxford: Oxford University Press.

5

About the Trainees' Burden and Capacity

During the first meeting of the group in Byumba I was beset by a great number of questions: Did, or didn't, the group consist of a mixture of people who during the war and genocide had ended up in opposite camps? Were they afraid that distressing memories might be actualised? What had the trainees endured? Had they been caught up in the dramatic events? Had they faced impossible dilemmas? Had they ended up in the exodus from neighbouring Congo? Had they served as child-soldiers? Had they been physically abused? Had they lost relatives, friends, people close to them? Did they have any relatives in captivity, in Congo or in the diaspora? Had they been able to achieve closure after mourning their losses? What did the trainees understand by regaining dignity?

It is important to choose the right moment to ask any follow-up questions with care and to consider carefully what the best way for asking these questions might be. If questions about sensitive issues are asked at too early a stage, this might activate an emotional process that trainees may well feel to be threatening. And that, obviously, is not what the training has in mind. And, it might discourage trainees from engaging into contact with each other if the 'expert' over-emphatically profiles herself by asking so many questions. After all, the trainees are used to following authority.

5.1 Basic assumptions

When conducting the intervention, it is of key importance that:

- Trainees' safety is not endangered.
- Experiences of dehumanisation are acknowledged, without memories being actualised.
- Mutual rapport building is stimulated.

- Intervention activities fit in with the group-oriented character of the training.

All questions should be based on these basic principles.

5.2 Inventorying questions

Playing the game of memory created the first moment of relaxation in the trainees' being together and, with it, a good moment to ask the inventorying questions. I put my questions to the trainees (cf. box XVII) and suggested that they answer them in writing, in Kinyarwanda. I asked the interpreter to write the questions in Kinyarwanda on the flip-over and explained that the interpreter was going to help me make an anonymised overview of the answers. I then wrote the answers, once they had been translated back into English, on the flip-over sheets (cf. section 5.3.4). I kept these in the training room for weeks so that each group member could look at them again and again and ask questions about them. This visualisation helped me come up with instructive questions.

I explained that I asked these questions to get an idea of the burden that the group carried on their shoulders – in terms of the whole impact of the war and violence – and of the capacity, or possibilities, the present company had. I said that the answers could help me find suitable questions and exercises and assignments for the training. It was also agreed that the completed questionnaires were returned to the trainees because of reasons of privacy and sensitive information.

Box XVII Questions

	Please answer the questions anonymously
1	Are you a man or a woman?
2	How old are you?
3	Are you married?
4	Do you have any children? If yes, how many?
5	Where do you live?
6	How long have you been living in this place?
7	Have you lost any relatives in the war/genocide?
8	How many?
9	Have you lost any neighbours, friends, colleagues, class mates in the war/genocide?

10	How many?
11	Do you have a job? What kind of work do you do?
12	What is the highest level of education that you have attained?
13	What other training programmes have you taken part in?
14	Do you have any special knowledge? What kind of knowledge?
15	Do you have any special skills? What skills?
16	Do you as a rule sleep well?
17	How many trainees did you already know at the start of this group?

Justification by the trainer

Question 1, and a summary of the answers to it, ensures that the trainees know whether attention has been paid to a balanced group composition as to age and gender. This topic may also come up when the subject ‘facilitating a sociotherapy group’ is discussed. Information about trainees’ marital status may provide leads for a discussion about social roles in families, communes or church communities. Information about problems arising from murdered, missing, adopted and/or extra-marital children – whether or not born from rape – affects the way in which one can (has to) show an interest in children and ask after them. Much the same goes for the responses to questions 7, 8, 9 and 10, about loss of relatives, loved ones, neighbours, friends, colleagues and fellow students. Any interest shown as a part of the training approach should be consistently cautious and convey personal ‘nearness’. For this is about the exact opposite of the indifference of mass violence.

Answers to answers 5 and 6 may indicate whether questions and interventions should or should not be situated in the training area. Do the trainees live in the area where the training is given? Have they fled a place of evil? Have they been forced to move house? Have they been engaged to help rebuild the structure of the disrupted society as civil servants, primary school teachers or nurses?

Responses to question 11 give insight into trainees’ skills, which is useful when fleshing out the follow-up training in sociotherapy. Is someone capable of coaching a small team, for instance? Responses to question 12 reveal educational level: have (some) trainees already attained the level of a UAS (University of Applied Sciences) or is this still to be achieved? Answers to question 13 show what trainees have already learnt and how this could be

shared during the training. Question 14 provides insight into special knowledge that could become meaningful in a range of fields in the organisation to be set up. Answers to question 15 give insight into any accomplishments trainees bring to the training. Responses to question 16 indicate whether the trainees can cope with a three-month period of training, followed by a thirty-three-month practice period. Answers to question 17 may create openings for a group discussion about the significance of training groups having a mixed composition.

5.3 Review

In all groups trainees worked intensely to complete the questionnaires. As a rule, they needed about one hour for this. In Kakata the questionnaires were handed out and completed at home.

I suspected that the review meeting would be better facilitated if the group were seated in a circle. In Byumba this circle was made in a corner of the training room using the available garden chairs there. Without explaining this action as yet, I invited the trainees to sit down.

Before I had asked any evaluation question, they were keen to tell me that since the genocide they had never been questioned in such a way in the company of others. And, that during the annual national genocide commemorations, the suffering of one group (no ethnicity was mentioned) is given recognition while another group's is not. Again unasked, they added that they saw answering the questions as an activity that made them feel recognised.

I also used the circular setting for that day's afternoon assembly and I asked how the trainees liked this arrangement. Some noticed the difference with sitting behind tables but were unable to articulate this properly on the spot. I only explained that I wished to create a different atmosphere by arranging the chairs in a different corner of the room. One of the youngest trainees was applauded by the others when she remarked that the day had been very interesting for her because of the experience of equality.

Occasional trainees requested a private talk after the review and evaluation of the questions. Pastors, local authorities or laypersons trained to recognise psychotrauma usually grant such a request. They view this as normal, especially in the light of the post-genocide situation. I always ascertained first if a

crisis had been actualised. If not, I would not grant the request. Whichever, I always explained my decision.

I said to the trainee in question that I was sure there would be much to talk about in private, and, by way of a compliment, that he had apparently not lost his ability to trust another person. Then I explained that trainers and sociotherapists prefer not to enter into private conversations unless there is a valid reason for doing so. In fact, I pointed out, the sociotherapy training teaches that *'the community should work as a doctor'*. If trainers and sociotherapists allowed private conversations, they would prevent the trainees from experimenting with restoring mutual trust.

The request for a private talk was the reason why I included the above explanation in one of the educational hours of the subsequent day programmes.

5.4 Overview of the answers

Table 5.1

The answers from 99 trainees and 8 staff members

Basic data: (99 trainees and 8 staff members)

The male/female ratio across 99 trainees: 55.1% and 43.9%

The male/female ratio across staff: 87.5% and 12.5%

Average age: 34.7

Married: 63.6%

Widowed: 5.5%

Unmarried: 27.2%

Not answered: 3.7%

Children: 2.8 per trainee

Adopted orphans: 0.6 per trainee

Place of residence: (99 trainees)

90.7% of the 32 trainees in Byumba had always lived there

99.1% of the 24 trainees had always lived in Nya-Ngezi

27.3% of the 22 trainees had always lived in Nyamata

66% of the 21 trainees had always lived in Kakata

Lost to war and violence: (99 trainees)

862 relatives

1230 ('and so many') acquaintances and dear ones

Work: (the 78 trainees in Byumba, Nya-Ngezi and Nyamata)

65.3% had a paid job

14.2% did unpaid work

20.5% did not have a job

<p>Where the trainees worked: (99 trainees)</p> <p>20% worked in the social sector 17% worked the land and cattle 3% were entrepreneurs 4% worked in sales 14% were pastors 12.8% worked in education Remaining % did not have work Of those working in education in Nyamata, 60% had a managerial position</p>
<p>The recruitment criteria: (99 trainees)</p> <p>51.4% met the recruitment criteria that had been set 27.1% had received higher education 17.8% had a university degree</p>
<p>Impact of poverty on education: (99 trainees and 8 staff)</p> <p>0.9% had to break off their academic studies 0.9% had come as far as the seventh form (primary school)² 1.8% did not respond</p>
<p>Participation in previous training programmes: (99 trainees)</p> <p>85 trainees had earlier taken part in a total of 16 different kinds of post-conflict training.</p> <p>24.2% had taken part in psychosocial training 11.1% had taken part in HIV/AIDS preventative training and in healthcare programmes 13.1% had earlier trained in conflict management</p>
<p>Present knowledge: (completed by 78 trainees)</p> <p>Knowledge gained without education or training was work-related</p>
<p>Mental condition: (completed by 78 trainees)</p> <p>74.7% reported to have no sleeping problems 5.7% were often, or too often, awake during the night</p>
<p>Broad recruitment:</p> <p>On average, everyone knew 4.6 other trainees at the start of the training</p>

Reflection on the process and the significance of the answers

As I considered the matter in advance, I feared that asking a lot of additional questions might harm the intended development of trust among the trainees. My fear proved groundless, though: the questions actually had an encouraging effect as they made the trainees feel recognised. This came as a surprise to me: we had not yet had so much as a full day to get acquainted. Since acknowledging trainees’ burden and any explanations on the subject might be politically sensitive, I left my follow-up questions about this until a more suitable moment. I did express sympathy, however.

Trainees' age was between twenty and just over sixty, with an average age of 34.7. This meant that many of the Byumba trainees had been of marriageable age when the war and genocide erupted and that the older people had had to carry responsibility for their families and existent social contacts while under threat. Those currently in their twenties were, in those days, children aged seven, eight or nine. Something similar was true in 2008 for the trainees in Nyamata and in 2007 for those in Nya-Ngezi. In the Liberia of 2013 the trainees had come of age between their thirteenth and twenty-seventh year in a constant atmosphere of poverty, chaos and life-threatening violence. With this information in mind, I looked in my sociotherapy toolbox for pertinent training material that related to trainees' circumstance. I assumed that there would be a time for further questions and answers at a later stage of the training. Questions about the status of marital relations, for instance, or changes in social position due to a partner's absence (through death or years of exile or captivity).

The trainees' answers about children gave me a clear picture of what I would have to reckon with. With exercises and, especially, games, I could teach the trainees ways of talking about how children contribute to the quality of life. Topics could be the daily worries on the part of (adoptive) parents, guardians, primary-school teachers and officials in functions with responsibility for orphans. What is it like, in everyday practice, to teach groups of children many of whom live with their parents and so many do not? Are there any examples worth following? My idea was that such organised contact opportunities as were part of the training and later of the sociotherapy groups would be useful to both the trainees themselves and to the process of learning to supervise sociotherapy groups.

Within the scope of the brief training, answers about loss referred to questions that could not be asked. The responses confirmed me in my assumption that caution would have to be exercised and that skilfully formulated questions contribute to a growth of mutual trust. 'Skilful' here denotes the art and expertise of making the trainees' background shape the format and content of the training: the acts of violence and present worries, fear, suspicion, silence, shame and feelings of guilt and/or survivor guilt can and must not be ignored. Any interventions should be experienced by the trainees as material from which they can learn.

The responses concerning place of residence confirmed me in my expectation that the training area did not constitute the trainees' entire world and that my questions, arguments and answers must not be restricted to just that

area. With this information I could make efficient use of the available training time and avoid possible misunderstandings. On the subject of moving house, I could now ask questions about the function of the current place of residence in processing events from the past. Did the trainees attend the community justice courts in their current place of residence, as was mandatory? Or did they, as the exploratory talks made clear, travel to the place where their case was discussed? And if so, did they have the bus fare? In this way I could already turn my thoughts to artistic-educational exercises whose theme was integration.

What I could ask was how people had acted, sought, comforted, cared and encouraged each other in the past years. Using their responses I could work out how these efforts were appreciated, what had gone well and what should not be repeated. I could ask how the current patterns of social relationship had come about and whether there was room for pushing social frontiers, and what people drew hope from for the next day.

That 65.3% of the 78 trainees from Byumba, Nya-Ngezi and Nyamata had paid jobs meant that the recruitment criteria had been applied. And I now knew that there were trainees without paid work and that this could carry the risk of them pulling out as soon as they found work. That is why I found it very important to create a motivating perspective. A carefully developed and motivating long-term perspective is of the essence in a wounded society where trust takes years to build, seconds to break and forever to fix. I was considering having the trainees themselves organise a presentation for the local population about their experiences with sociotherapy in use.

The advantage that the trainees with an academic or a higher-educational level had gave the training a broad, across-the-board orientation. What raised questions with me was that a considerable number of trainees had participated in quite a few training programmes organised by a range of NGOs (in trauma counselling, HIV prevention, conflict management, human rights and good governance, prevention of sexual violence against women, gender, care to child-soldiers). Did broad social impact fail to occur because the content of this array of training programmes was not complementary and thus brought about a veritable tower of Babel? And yet, the Byumba Anglican church authorities hoped to see renewed cohesion in the social fabric.

Working in multidisciplinary teams had taught me that assembling a number of thinking models in itself has no added value. Those for whom these models and interventions are intended can only integrate the various interventions

when they match theoretically as well as methodically, are inter-referring and are internally aligned. When a trainer (or sociotherapist) starts a game of memory, for instance, this will bring up leads or starting points for discussion with which the trainer can demonstrate to the trainees and participants the structuring facilitating role by doing.

The answers to the question about sleep and sleeping problems were reassuring, I thought. The trainees seemed equal to the tasks that awaited them during and after the training. Later on in the training I could once more ask whether they still, on the whole, enjoyed a good night's sleep.

Besides gender-balanced group composition, answers to question 17 also indicated that the teams were diverse in composition. Recruitment had been carried out as agreed, and this was reassuring.

The more groups were trained, the more insight I gained into the differences and similarities as to the groups' burden and capacity. This reduced my need to ask the additional questions at a very early stage. Generally speaking, the questions were dealt with during the first or second day of training. In one of the Nyamata groups tension had developed over the method of training, and I therefore asked the questions in the second week of training, when the tension had abated. In Liberia I made the moment of asking these questions dependent on the absorptive capacity of the co-trainer who I was supervising.

Reflections on the role of the trainer

The trainees' self-efficacy was not restricted by the process of answering questions about burden and capacity. They developed insight into the sort of subjects that could be raised. And although this had by no means been expected at this early stage of the training process, the questions and answers helped to make the trainees feel recognised in their suffering.

The answers gave me the material on which I could base situation- and context relevant follow-up questions that would prompt the trainees to think about changes that had already occurred and changes that were hoped for. I could thus make optimum use of the available training time while the trainees learnt that they have their own role and responsibility in creating safety and trust within the group.

Responses with respect to children, moving house, work activities, educational levels, other training programmes, skills, sleeping patterns and familiarity with each other gave me insight into the losses suffered as well as into present opportunities, and they laid bare what kind of inarticulate tensions I would have to reckon with.

5.5 In conclusion

Back to the phases and principles. The answers summarised on the flip-overs visualised for the trainees what was and was not important in their group. This made them see that their own answers were meaningful to the others. They learnt from the answers to the additional questions, for instance, how many orphaned children had been adopted by the group and how many losses they mourned together. Having a share in all this information also became meaningful as trainees worked together to create an atmosphere of safety and trust within which they could learn from the training. The strength of sociotherapy's learning from and with each other by doing lies in the fact that a trainer then consistently enables the trainees to learn at the cognitive level what such experiences mean to them. Apart from the affective experience, this increases insight into the accomplishment of having created this safety and trust themselves.

The phases: The aim of consistently returning to the group development phases once the activities had been evaluated and checking what these activities meant for the desired increase in safety, trust, care, respect, having a say in rule-making, processing emotions, was to enable trainees to learn how they might discover the common thread, in the multitude of subjects under discussion, that would lead to their regaining dignity in togetherness (cf. photo 5 in chapter 3).

The principles: I involved all trainees equally in the intervention so that all were equally enabled to participate and assume responsibility. During the evaluative reviews the trainees said what they had learnt from the collective discussion, in the group, of the answers to the questions. As my questions kept returning them time and again to the principles of sociotherapy (equality, democracy, participation, responsibility, here-and-now, learning by doing, inter-est), trainees learnt to recognise these in their own input and to attribute meaning to these themselves within their context.

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6

Activities to Promote Participation

This chapter describes two activities: making rules of behaviour for one's own group, and reaching a joint definition of the concept of safety. As they take part in the training, trainees learn about participation and quickly develop new skills and associated insights. Learning to participate increases the likelihood that new experiences are linked to notions already stored in the memory and this transforms abstract ideas into something concrete and experienceable. And this, in turn, gives ideas and/or hopes for social change a better chance of being realised.

In hierarchically structured environments, participation meets social rules in a free and easy way. Social rules let trainees almost unconsciously determine the social bandwidth within which they feel they can participate safely. As long as the focus and the conclusions from the review meetings are aimed at safety, trust, care, respect, having a say in rule-making and emotions, participation will retain its problem-solving function.

6.1 Basic assumptions

Participation-promoting activities are fitting if they:

- Relate to familiar patterns in the context.
- Invite to think and reflect.
- Are attractive.
- Are varied.
- Fit in with the specific development phase of a group.
- Facilitate the regaining of dignity.

6.2 Rules of behaviour for and by the group of trainees

For an account of how the trainees learnt to formulate their own rules of behaviour, I would like to take the reader on a journey that includes the occa-

sion, the introduction, the execution, the review, the reflection and the questions that may or may not be asked later in the training.

Occasion

The coordinating staff member of one of the groups wished to appoint one of the trainees to keep order in the group as regards starting times and leaving the training room nice and tidy. This was common practice but it is an essential part of sociotherapy that trainees after a short while arrive on time of their own accord. I therefore asked the coordinator if I could flesh out this responsibility in sociotherapeutic manner. As I asked this question, I was thinking of an exercise in my toolbox about making rules for and by the group.

Introduction

I positioned myself as a guest who had been invited to a damaged country and asked the trainees to tell me what social rules would be usual in training groups. This was an unusual question, and the trainees met it with a look of surprise.

I showed curiosity about everything each trainee brought up but did not remark on the four male trainees who were the first to speak up. My approach caused some hesitation in the group. I made a point of noting this diffidence and suggested a method that would invite every participant to have their say. This too was an unusual suggestion. Even so, the trainees were prepared to participate, and I told them how this method works, and what ten steps it consists of.

Box XVIII Steps for making rules for and by the group

Step 1	Every trainees writes down for him/herself 10 rules that s/he thinks are important for this group; Find a quiet spot.
Step 2	Return to the group and give your rules to the person sitting next to you.
Step 3	Read the rules slowly; Remove one of the ten rules that you don't think is very important for this group.
Step 4	Return the rules to the person who made them.
Step 5	One person in the group collects all remaining rules; These remaining rules are then written on a flip-over; If any rules are rather similar, these are marked.
Step 6	Select those rules that have the most marks behind them, and make a top ten of rules; The other rules will remain part of the next steps.
Step 7	Which of the remaining rules can be combined and put together as one? Before any rules are combined, ask questions about what a rule means, and explain this; Every act of combining rules into one has to be reasoned out, giving arguments.
Step 8	Giving his/her arguments, every trainee now proposes which of the remaining rules qualifies for a place in the top 10 rules for this group.
Step 9	Independently of the other trainees, everyone decides on his/her order for the 10 rules for this group from the remaining rules; The rankings are written down.
Step 10	A group of 3 trainees is chosen who count and then announce the outcome of the ranking; After the presentation of this ranking, the group proceeds to make a decision on the basis of the result.

Source: Mulder, Voors and Hagen. (1989)

Execution

In step 1, I noticed at once that I had not left sufficient time to explain matters. After my explanation about the first step, some trainees showed no sign of getting started; they apparently thought this an unusual question. In the

groups where they did not make a first move, I made the idea behind the activity more concrete by taking a few trainees by the hand and placing them, with their chairs, in different places in the room.

Various trainees tried to wriggle out of working on their own by walking over to other trainees. I agreed that this was a demanding exercise and encouraged the trainees to nevertheless carry out the first step on their own. When, finally, everyone had made a start, writing down ten rules without consulting the others similarly proved a strange and strenuous task. The minimum of ten rules forced them to look beyond the most obvious answers.

The trainees somewhat stalled at the third step, showing surprise here and there. The question arose in one or two groups whether they really had to cross out one of the ten rules. In these situations I encouraged the trainees to simply follow the procedure. I promised that I would later explain the why and wherefore.

In step 4, the trainees showed great interest in the collection they had put together. The coordinator and the interpreter translated and wrote down the rules so that I would be able to follow the inventorying and the result was visible to all. A pattern emerged after five presentations. Even so, I gave every trainee in every group an opportunity to present his/her nine remaining rules. This was an educational opportunity as well as an in-depth investment. I had to accept, though, that the scheduled programme time was overrun.

During the fifth step one group was so alert as to spot that a formulation had been mentioned before, whereupon they checked if the earlier formulation had indeed been marked with a little line. In another group the reactions were very inquisitive, delighted and committed. Every group produced an average of 43 different rules.

Sometimes the trainees' behaviour revealed a mechanism that was 'locally normal'. For instance, a higher-educated male trainee crossed out a rule that a fellow trainee had just written down without anybody correcting him. When questioned, the trainee concerned answered that he had not deleted a rule but a wish. Upon my question how the owner was to understand, without this explanation, why his rule was not good, he put back the deleted rule. In another group the trainee whose task it was to write all the rules on a flip-over slightly altered the wording every time. When I had intervened a few times, the other trainees started to rectify the alterations he made in the formulations. Some trainees argued that collecting the rules could be

done more quickly. I acknowledged that there were, indeed, quicker ways but that the point of the exercise was that now everybody would be able to learn something, especially because they could follow the whole process.

The trainees agreed with my argument that respecting as many as forty rules was a recipe for failure. Priorities would have to be set. Establishing these priorities was done with a great deal of attention and caution. The trainees were serious, with very little laughing going on. The men and women spoke softly. One trainee holding a high position in a church organisation wished to know, at this stage of the process, how they could be sure that God would come up in the first rule. I said that the highest rule in religious institutions is to serve God, Yahweh or Allah and then sketched the difference with socio-therapy groups where rules of behaviour are less definitive and strict, and can be reconsidered and adjusted as and when new insights develop.

In the seventh step, the trainees showed interest in one place, enthusiasm in another. Their task was to discuss together whether the remaining rules could be combined. The first suggestions came from trainees who for various reasons (higher-educated, work experience, social status, being a man, and sometimes a woman) spoke out easily. I invited the other 'owners' of rules that were to be taken together to react. Would their rule still have the same purport if merged with another, or would it lose its meaning?

Many women behaved in line with traditional social patterns: if they were not asked to say something, they would barely speak out. But if they did, they often suggested relevant ways of combining rules. In a few groups, women joined in the discussion with ease and armed with knowledge. Various male trainees cut in on answers begun by others, completing them with what they had in mind. Enthusiasm did not in itself bring clarity. The process of combining rules resulted in an average of twenty combined rules for every group. In step 8, I invited the trainees to once more ask each other and answer questions. This time, to select ten rules from the remaining ones, and give good arguments for their choice.

As they carried out step nine, the trainees demonstrated how they were learning from their new experience. They no longer stalled but thought for themselves about the top ten rules to choose.

In step 10, three trainees were asked to do the last priority-ranking at home and to announce the outcome the next morning. In the first group I made this decision because I was running out of time, in subsequent groups I made

it a time-saving homework assignment. It also happened that a trainee (with a social status commanding respect) seized the opportunity to express his doubts: he asked what might come of the task if it were done without the others checking on it. His lack of confidence was not shared by the group, whereupon I said I had faith in the three people selected for the task.

By way of rounding off, I asked the trainees to summarise their efforts in one word. What they said was: 'We all contributed some input. Every answer was fine. We had to think carefully. We worked together. It brought out the best in us and we didn't quarrel'. After some ten minutes I asked if the activity could be called democracy. I noticed in all groups how the trainees responded to this with surprise. This clearly showed that they had never before thought about 'democracy' in this way.

Review

In the review meeting trainees of all groups said that they had appreciated the equality with which everyone could have their say. They recounted how they had very seldom been asked to use their head like this. One of the coordinators found it almost incredible that he had just partaken in democracy without realising it. After they had slept on it, some trainees saw the exercise as a way to resolve land conflicts. They believed they could even draw up a constitution using this method.

Trainees in all groups unwittingly disclosed the prevailing rules of conduct in how they behaved. This made the two to three-hour process of drawing up rules just as informative and important for me as the guidance that the final set of rules provided.

Reflection

The exercise had brought out the best in the trainees, in their togetherness, and without quarrelling. After years of mistrust, suspicion and unease, this proved an unexpectedly pleasurable experience. One of the coordinators showed surprise at the prospects he saw dawning. He realised that many more shoulders would be able to bear and lighten the burden that the genocide was. The exercise made the trainees and myself think about what had happened, also to return to the matter later on in the training. Questions that could be visited again were, for instance:

- How do the trainees look back on their diffidence when starting to work on their own?
- What makes it so difficult for many trainees to cross out a rule that the person sitting next to them has made?
- Can the trainees mention some pros and cons of taking part in choice-making?
- Men – traditional and otherwise – and women – whether or not with a respect-commanding status – and youths talked and acted together during the exercise. For many, this was a new experience. Are the trainees able and willing to say what in their world goes for ‘normal’ with respect to the place of men, women and youths in social relations?
- How does the present situation differ from the new experience?

The definition of sociotherapy anticipates group dynamics while sociotherapists assess whether they will let an unusual situation pass or whether they will focus on it. Before the sociotherapist-to-be can apply this skill, he needs the learning by examples where he is presented with material about ‘unusual situations’ and how and when to discuss these.

In the question if the procedure would make God come up in the highest-placed rule I detected some doubt about the freedom of choice that I was giving the group. I realised that both the author of the question and myself had prompted the trainees to think about the normalcy of hierarchical and church rules and about the space in which they made their rules together for their group. In theory, it was quite possible to postpone answering the question until the ten steps of the rule-making exercise had been completed. But I decided to use the opportunity to let the trainees feel that my open question about usual social rules for training groups included the possibility of God being in the highest-placed rule. The person asking the question and other trainees could also understand from my explanation that I saw the outcome of the exercise as the group’s responsibility. The appreciation expressed by the trainees afterwards implies that the procedure for establishing rules increased trainees’ participation in open communication and introduced them to the game of democracy in social relations. In the next few days I could question the trainees about their understanding of democracy.

It will further the development of group targets if rules are formulated jointly. The exercise also yielded numerous leads that would help kick off the educational dialogue about safety, trust, learning about stress and developing a group target. Using the sociotherapy principles, I could weave questions

about people's behaviour towards each other into a similar dialogue. This procedure would show the trainees how a group process develops.

6.3 Drawing up a definition of safety

For my account of how a definition of safety was drawn up I will follow my earlier course of action, and elaborate on: the occasion, the introduction, the execution (in three parts) and the reflection.

Occasion

'Yes, safety, that is what this is all about,' trainees in Byumba sighed while I gave them a succinct explanation of the phases model of sociotherapy. At my follow-up question about everyday examples of unsafety the trainees pointed to the impact of poverty: children for whom school fees sometimes were available, sometimes not, and/or leaky roofs. They pointed to the existence of hunger and to the tensions between people. Their sigh was, for me, the occasion to formulate an exercise that could turn everyday frustrations into a subject for discussion.

Introduction

I introduced six questions (1-6, cf. Box XIX), explaining that I was curious to hear how the trainees described safety. While the trainees were working away at their answers, I created these tasks (7-14) to process their answers. I introduced these tasks over the next two days.

Box XIX Supporting steps for learning to define safety

Part I: 45 minutes: Individually, trainees write an answer for the following 6 questions.

How does your community define safety?

How does your family define safety?

How do you define safety yourself?

How does your community contribute to a safer environment?

How does your family contribute to a safer environment?

How do you contribute to a safer environment?

Part II: 45 minutes

In pairs, trainees discuss the answers (do not divide trainees into pairs until part II is ready to begin).

Explain your answers to your partner.

Do not interrupt your partner.

After you've heard the explanations, ask each other questions and answer them.

Try to draw up one joint definition on the basis of your and your partner's answer to the third question.

This joint definition is presented to the other group members.

Part III: 120 minutes

The pairs' definitions are clarified further in the plenary group without the others interrupting.

When all definitions have been explained, questions can be asked and answered group by group.

Finally, the whole training group is given the task of formulating one joint definition of safety from all the pairs' definitions.

Execution

Part One. Now that the trainees were used to working individually on part of an assignment and had positively experienced that this may well produce an interesting result, they no longer hesitated about participating. Trainees in all groups worked intensively, focused and serious.

It emerged in Liberia that, when a text had to be copied, some (women more than men) had difficulty memorising more than two words at a time. And, occasional trainees (women, more often) had no idea how to answer the first three questions. Repeating my explanation had little effect. Fellow group members who had already finished their tasks helped the women who had reading and writing problems, without any mediation from myself. And so, these women, too had the minimum material with which to participate. This practical difficulty offered me insight into the impact of the long years when people had no access to primary education.

Part Two. As the randomly chosen pairs worked, the atmosphere of safety and mutual trust was noticeably improving. Most trainees observed the rule not to interrupt each other and listened without cutting in. They had meanwhile experienced that this brought out the best in them all, and that every input deserved to be listened to; this experience had made an impression.

The pairs in the first six groups succeeded in assembling and formulating a joint definition. During this process I encountered occasional searching looks, but seldom any signs of resistance. Things were different in Liberia, however. The trainees with reading and writing problems did not understand what the task of discussing the definitions and then assembling one joint definition asked them to do. This had to be explained to them a number of times.

Part Three. The joint definitions were presented in a plenary meeting and again, the outcome surprised trainees. During the presentations it was the men in the pairs who 'naturally' spoke out. If I did not ask if this role division had been agreed upon, this was how things continued. If I did ask, the women and youths were given/took the floor as well.

At the same time that the definitions gave the trainees an opportunity to engage in a lively discussion, a traditional expectation about the role of the trainer was overturned. I presented myself as someone who listens and asks questions about the trainees' knowledge and accomplishments.

During the 13th step, the trainees asked each other tens of questions about the definitions given by the various pairs. Just as many answers followed, amply justified. The trainees now had experience with combining texts and they thus once again set about their task, with the assignment of the 14th step. One or two individuals, usually men, but occasionally a woman with a social position commanding respect, tended to hog the discussion. As this 'normal' behaviour kept recurring, it prompted me to look for a good moment to question it. Because of the normalcy of the matter, this question had to arouse as little opposition as possible in the people concerned and in the other group members.

Following the debate, a staff member – who had trained to be a lawyer – was given the honour of choosing the words with which to formulate one group definition. When he had succeeded, he shared a newly-gained insight. 'My colleagues and I did not act so wisely, after we had finished our academic studies. We thought we had been trained to formulate solutions for land conflicts, for instance, and we made the parties involved agree with our solutions. I now see that things should be the other way around.' The other group members also expressed their surprise at the outcome because just as with the rules of behaviour, this group definition had come about without a cross word being spoken, and with everyone contributing.

In one or two groups, of the six definitions not one was left, but two. Trainees there were inquisitively searching for clarity about the meaning of, and the differences and connections between 'peace' and 'safety'. For me, this was an opportunity to ask by means of what activities people in this living environment seek peace and with what activities do they seek safety? This no longer rekindled any misgivings or reserve in this group so my conclusion was that feelings of safety were on the increase. The groups in Liberia similarly reached a joint definition, albeit that they needed a little more assistance and structuring.

In answer to many trainees' question how they had managed to achieve this result, I gave a smile, lifted my shoulders and held my palms open. Instead of lecturing about definitions of safety from literature, I used two words: 'like this'.



Photo 6

Author's own collection. Working together. Byumba 2005

Process reflection

A trainer trains the trainees in groups how to supervise and coach groups. This is, in effect, a recipe for the formulation of many more questions than can actually be asked within the limited time of the training. The (as yet unpolished) questions will then have to 'wait' in the group process until the right situation presents itself. Now, the trick is for the trainers (and later, the sociotherapists) to be able to recognise suitable situations and use them as a link to instructive questions. Most questions are doomed to remain in the trainer's thoughts. This happened, for example, with the question that I thought up during the exercise on defining safety: 'What did the trainees make of their diffidence about beginning on their own?' One answer lay in the form of the positive experience this exercise had brought. But now that all diffidence had gone, I let the moment pass. In retrospect, I recognise the temptation of coming up with an answer myself. The training does not primarily state that the trainer has the answers but, rather, that s/he enables the trainees to find the answers for themselves. With hindsight, it would have been particularly relevant to ask why there was this reluctance to act and why it disappeared again. This melting reluctance illustrated an important moment of change.

It required more participation-boosting exercises for the trainees to discover that these are, time and again, about applying the sociotherapy principles in the development process of the phases.

Although I did not lecture about these phases and their key concepts, trainees listened and spoke attentively and in a spirit of openness. The strength of the task of formulating a definition of safety lies in its relationship with the context and in the fact that trainees learn to observe what happens in the group as they do the task.

The prompt to look and think from different perspectives helped the trainees in their efforts to define safety. This process yielded matter for an entertaining and instructive dialogue, which again made the trainees feel that time was indeed flying when they were together. When I had facilitated subsequent training programmes I began to wonder if it is really this sensation that time flies that motivates the trainees to return the next day and continue the dialogues.

Hesitation to make contact with colleagues decreased, and this was clearly visible during the comfort breaks. Trainees' body language betrayed the in-

tentness with which thoughts were exchanged. Interest in and attention for each other similarly remained, also in the subsequent training programmes. In some groups, the trainees reasoned loudly, laughing and gesturing broadly. After these two exercises the insight dawned that many everyday problems could well be reduced or solved by the trainees under their own steam. The exercise about safety helped the trainees discover that their own living environment and their colleagues were sources they could learn from. During the first exercises the trainees may still have failed to notice that they had started to learn a method that did not aim at quick fixes for a problem or a one-off performance. But they gradually found that the method meant to create a reliable foundation for cooperation and self-efficacy.

The tasks taught me that the trainees were capable of protracted concentration, which was another sign that they had been recruited in line with the agreed recruitment criteria. People severely suffering from memories of life-threatening experiences of violence are, according to the DSM criteria for a PTSS diagnosis, incapable of protracted concentration.

My conclusion was that support is gained when the trainees discover the effectiveness of the method for themselves. And that assessing the meaning of safety belongs with those directly involved, at grass roots level, where support for social change starts.

6.4 The exercises and their significance for learning about the phases and principles

The phases. The first phase of group development, safety, further developed as the rules of behaviour were jointly formulated and as the concept of safety was methodically defined. The trainees learnt about this phase as I invited them to name any changes they observed.

The language problem inspired me to use symbols with which the trainees could commit a self-discovered answer or a complete exercise to memory. The circle, divided into six segments, represented the phases of sociotherapy. When the answers were given, I drew, as a reminder, the thermometer, the head and the thought bubble with a question mark in it, and a classic certificate once the rules of behaviour were discussed. I put these symbols besides the phase of safety.

The principles. Procedures for the two exercises were in line with the second principle of sociotherapy, equality. The trainees gained experience in tak-

ing responsibility for control over how things were done in the training: the third, fourth and fifth principle of sociotherapy. The joint assumption of responsibility already occurred before I thematised this principle. This enabled trainees, through learning by doing; the sixth principle, to make discoveries, both alone and together, about the meaning of these principles. My request to be informed about social rules was, in fact, an instance of the 'here-and-now' principle applied.

6.5 Reflections on the role of the trainer

Without the immediate occasion, in Byumba, for asking about social rules, I might have started the training in a different way. I discovered there that the step-by-step plan to arrive at rules of behaviour played a structuring role for subsequent tasks and activities. And that is how I decided to start all other groups off with this exercise.

When I introduced the theme, I chose not to lecture. The trainees were used to following authorities, this was their socialisation. Lecturing would almost certainly lead to an acceptance of the rules of behaviour that I set, from habit, or out of respect for 'a white woman from Europe.' But I had not come to be followed docilely, but because the various organisations wanted social change.

Adding a decision-making procedure to my request to be told the usual social rules for groups gave every trainee an equal opportunity to participate in answering the question. At the same time, I found I had introduced a method that could later be used with the sociotherapy groups.

It was important that I led the exercise in such a way that we would be left with a manageable number of rules while I regulated its pace when necessary. In this way I established an acceptable level of safety, enabling trainees to continue their task and to gain some purchase in the group.

Through my exercises about rules and safety, I organised an experience about the meaning of values in social change. In one group I myself made this subject an agenda item to be addressed the following day. In another group I set the agenda for the next day together with the coordinator.

At the beginning of the training I had argued in favour of starting with mixed groups so that the trainees would gradually learn to argue any wishes for

differentiated groups. The mixed groups addressed subjects that gave me an opportunity to focus attention on the traditional position of men, women and youths. Being and working together in mixed groups facilitated in an informal and relaxed way experiences that could become the subject of intervention, discussion and reflection.

6.6 In conclusion

All trainees were involved in the methodological way in which they informed me about the usual rules of social engagement in their world. They learnt to make joint decisions on the basis of a number of rules and principles and they discovered that jointly formulated rules of behaviour get a desired course of development going. Quite a few trainees made contact with each other again, after years of sorrow and mistrust and isolation.

The task of defining safety, again methodically and in groups, had the trainees acknowledge the existence of the different viewpoints that led to the joint definition. And they learnt about a process that facilitates reaching agreement. Safety worked because it had been understood.

Literature consulted:

- Johnson, D.W. & Johnson, F. P. (2009). *Joining Together: Group Theory and Group Skills*. Upper Saddle River: Pearson Education.
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Recommended reading:

- Clarke, D. (2012). *Africa's Future, Darkness to Destiny: How the past is shaping Africa's economic evolution*. London: Profile books. Ltd.
- Kweifo-Okai, C. and Holder, J. (2016). *Democracy in African countries: five myths explored*.
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7

Working with Values

War and genocide trample existing values and install other values. After periods of receiving emergency aid, local authorities took the initiative and looked for an intervention that could restore dignity and thus make a social difference. Their request to this end implied a shift from authorities carrying out the usual relief operations to lay persons, which created a different perspective on the approach to be adopted.

We have already seen how the trainees were introduced to the strenuous but attractive content of sociotherapy, which counterbalanced the burden of disruption. After only the first training-less week they arrived well before the starting time, clearly glad to see their colleagues again, and curious to learn what the next days would bring. During the morning assemblies they stated how they had started to look differently at things in their environment. On my question, they confirmed that the family feeling they felt implied safety and trust and that, as far as they were concerned, the moment had come to start on the phase of 'care' (in the sense of looking out for each other). During the dialogue about the meaning of 'care', the trainees again recognised that their reasonings could be linked to the concepts of the sociotherapy phases. This meant that I could further delegate responsibility for what happened in the training to the trainees. Openly welcoming this shift I seized the opportunity it offered to give the trainees the experience that values are at the core of social change. And that values can meet with approval, but also with opposition.

This chapter describes my introduction of Hofstede's onion diagram as a way to make 'values' the theme of the subsequent discussion and it elaborates on the function of the knotting game in this respect.

7.1 Basic assumptions

Learning by doing is a teaching method that can have a mediating function when the topic of values is addressed. The method enables the trainees to

discover the meaning of values at both the affective and cognitive level and to formulate their own values. The exercises should encourage thinking and enable trainees to discover that they do not always facilitate the internalised habit of 'following' authority. For this reason I explain very little before a learning by doing exercise, but I will afterwards ask what the exercise was all about and what it meant to the trainees.

When facilitating the exercises, I bear in mind that:

- The trainees should experience the training group as safe, trustworthy and caring.
- The trainees learn to take responsibility for their interventions if they realise that social change implies communicating about values.
- The trainees (as a team and later also in pairs) will take responsibility for the intervention if they discover shared values in the target set by their own group.

7.2 Working with values I: the onion diagram

My account of the experiences as they happened in actual practice follows this format: occasion, introduction, implementation, review meeting and reflection.

Occasion

In the dialogue about the meaning of 'care, looking out for each other', the trainees' reasonings were linked to the concepts of the sociotherapy phases. I argued that I could follow on from there and begin delegating more responsibility for the training content to the trainees.

Introduction

After the morning assembly, I drew on a flip-over a magnified version of the onion diagram as developed by organisational psychologist Hofstede (2010). I explained that the drawing had been used by companies planning to expand internationally. Keen to make a success of their enterprises, they were interested in local values and customs. I invited the trainees to join in and learn as they worked with the diagram.

Box XX The onion diagram (Hofstede, 2010)

The onion diagram consists of three layers and the heart. Hofstede's question, referring to the outer layer, is via what symbols people communicate. The second layer asks about heroes while the third asks what collective activities (rituals) within the culture are regarded as socially of great importance. In the heart of onion Hofstede asks about the values in a specific culture.

The first layer: the symbols

I asked about the use of symbols. It was not in all groups that the trainees could straightaway come up with examples of symbols in their own environment. They asked to have the term 'symbol' explained. I had difficulty understanding that the trainees did not know the term 'symbol' and I therefore took into account that the question might express rising opposition. The trainees had already let me know on occasion that while they quite enjoyed this kind of training, they were also not used to such a programme. They had asked me when the training would really start. I did not want to give examples too soon, or start lecturing, and asked the trainees to take the floor. The tense atmosphere continued and as persistent tension may lead to the very opposite of the intended aim, i.e. stimulation of the brain, I came to the trainees' rescue after all, after they had thought for a while. I said that some trainees were wearing a symbol that I was not. Their response was surprise: could some of them really be wearing a symbol that the trainer was not? To help them on their way I focused my attention on the trainees' hands and said that the symbol was worn here, but not there. This elicited the symbol of marital fidelity. I gave a hint to elicit a second example and said that I had seen this symbol when I arrived at the airport, and again later in the area of the training. The trainees then mentioned the flag. In answer to my question, it was said that the wedding rings and the flag symbolised agreements about loyalty and connectedness.

Step-by-step, trainees began to list more symbols: the mobile phone (in 2005, this was a status symbol as well as means of communication), a cross, a crescent-moon sign, a billboard, a dollar sign. For every symbol I put a drawing in the outer layer of the diagram. The thermometer with which the trainees could rate a day of training or the certificate to remind them of their self-made rules of behaviour were not mentioned as symbols.

Reflections on the process

During this exercise, feelings of uncertainty were avoided, unconsciously or consciously. In the literature, uncertainty avoidance is seen as a way to maintain distance, which allows inequalities in social relationships to continue to exist. As soon as uncertainty is allowed in, this will alter the existing equilibrium, and social relationships will change.

I tried to find an explanation for why the trainees did not easily grasp what symbols are. It could be that they were not used to new and, to them, over-abstract ideas, or there could be a blind spot on everyday matters which makes it difficult to mention symbols. I could have helped the trainees more by listing some other church symbols than just the cross, like the different colours of the pastors' vestments during the church service. It also occurred to me that there might be a taboo on symbols that in the era of Rwanda's colonisation meant victory to one ethnic group but humiliation to another. And it was possible that 'attributing meaning' had itself been lost due to the experiences with mass violence. I read about this in the literature and experienced now, in practice, that many normal, neutral words such as 'majority' or 'minority' had come to carry connotations of catastrophe (death). They could no longer be used in a question without causing tension. The unimaginable magnitude of the violence had exerted immense pressure on existing traditional, religious, legal and educational values. For instance, many an adult in Rwanda grappled with the fact that the beliefs (the rules) of their institutions had not been able to prevent the genocide. Both within and outside the training groups, people talked about shame alongside the pain of having lost so many loved ones. Everybody always knew a relative, a neighbour, a fellow believer, a fellow student or a colleague who had been in prison for years. Viewing matters in this light, I realised that the gap between the question about symbols and reality was immeasurable.

The trainees showed increasing discomfort at my appeals to the knowledge already available among them. Piaget's theory suggests that creating cognitive tension is valuable as a way to new learning. The trainees, however, labelled every kind of tension as negative.

The second layer: heroes (sources of inspiration)

In the first instance the trainees only mentioned Biblical figures as their heroes, but Mother Theresa got a mention as well. I decided to challenge them

a bit and asked about present-day heroes and sources of inspiration. One after the other said: 'my mother'. When I probed further, mothers were said to be heroes because they made sacrifices. They made sure there was money and/or denied themselves some 'luxury' so the trainees might get an education. As a modern source of inspiration the trainees mentioned President Kagame. He was a hero because he had brought the genocide to a stop. Since the president was not known to be every Rwandan's hero I observed all trainees' reactions closely but did not find any signs of nervousness.

As I expanded my question about sources of inspiration, I took into account the characteristics of an oral tradition, and I remembered that there were no bookshops in the vicinity. I asked about sources of inspiration from traditions and music, and from education. The trainees' answers featured hardly any favourite teachers or music idols. But they did mention historical figures who were mostly only known to themselves. In one of the groups the oldest trainee did not hesitate to talk about his hero, Prime Minister Lumumba, who had been assassinated in 1960. He had seen Lumumba as a ten-year-old boy, when he was touring Kivu province during his election campaign. Without quite knowing if Lumumba was also a hero for the other trainees, I asked the man if he could tell us about his hero, and a lively conversation was the result. The elderly man described his hero's striking hairstyle, and recalled the heavy frame of his glasses. The man also said that his participation in this training was still inspired by hope of a better life, as his hero had voiced it then. The younger generation knew Lumumba from their history lessons. They, too saw him as a remarkable figure in their history.

In Liberia, the trainees mentioned various examples of local heroes, without any noticeable tension arising, and one or two suggested, when prompted, a music idol as their source of inspiration.

Reflections on the process

I found that in all groups, the trainees mentioned Biblical figures as their heroes. In this atmosphere I was repeatedly asked which church I belonged to, and sometimes: 'You are a Christian, I should hope?' The answers and the questions confirmed my suspicion that here was a one-sided orientation on values. I also listened to information about values that referred to 'belonging to something', 'not deviating' and 'blending into a whole'. The similarity of the answers not only brought to light the prevailing standard but also what

appeared to be the proper way to speak or act within hierarchically organised relationships.

That not so many music idols were mentioned could be to do with the fact that although people were interested in music, there was little and/or insufficient electricity and sound equipment around. Or, perhaps they did have the equipment, but trainees preferred to sing themselves or listen to religious music. During the drives from one place of training to another, staff members, for example, would time and again play the same cassette with recorded songs from a Sunday church service.

Questions about heroes pose a certain risk because one person's hero may be the next person's villain. For that reason I expanded the question to include sources of inspiration. A number of trainees were surprised that they had never before questioned each other about the subject. They felt they had been tipped off about a new idea. During the reflection on the interaction that ensued upon my questions about heroes and sources of inspiration I looked out for possible leads on the topic of values.

The third layer: collective activities and rituals

In all groups, the atmosphere changed when talk centred on birth, marriage and mourning rituals. The trainees could talk well about this subject and were involved and lively. In Rwanda, I used follow-up questions to turn the conversation into the direction of marriage rather than mourning. I thus tried to steer clear of any (oblique) discussions of overwhelming grief and disturbed mourning. The caution I showed here was prompted by the many confessions that were made during the pilot meetings of the gacaca courts that were taking place at the same time as the start of the training. Many re-burials took place after genocide suspects revealed, for the first time in ten years, the places where murder victims had been buried. Against that background, the trainees told that many women had been widowed during the genocide. In an indignant voice, they explained that 'the normal' way of doing things had been lost and that widows saw themselves compelled, nowadays, to carry buckets of cement to masons on building sites for a pittance.

I steered the conversation round to customs surrounding the birth of children and listened to stories about the practice of consulting loved ones and neighbours on names for new-born babies. Proud, and smiling, trainees elaborated on the customs and rituals relating to marriage. I was able to ask many

follow-up questions here because most trainees felt at ease with this subject and were happy to take the floor. My questions were: How do people know about others' plans to get married in the near future? How did they prepare for a wedding in the old times, and how in these days?

It was recounted in one group how the genocide had caused much to change and that the country's new administration had changed the marriage laws. In comparison with traditional marriages, the legal equality between husband and wife had now been introduced and sons and daughters now held equal inheritance rights. Following on from this, I asked if the wedding ritual itself had likewise changed and if the ritual could be changed at all. Did the trainees see any other practices than the ritual ones being carried out at weddings? In answer to this question they said that youths more and more often choose their own partners and that men still pay a dowry: a wedding gift to the bride's family. Because the young men had earlier, during a previous activity in the training, 'confessed' that as a rule, women are not informed about their husband's income, I asked why this practice still endured. The men argued that the mutual trust to do otherwise was lacking. The women supported this statement, adding that money is a source of mistrust between spouses.

The trainees talked about the orphaned young girls who carried on affairs with men while they were still single. And they talked about widows who started new relationships while their husbands remained in prison. They regularly used the word 'prostitute' when talking about the young girls.

Older trainees recounted how mutual help had disappeared: people did not even help each other working the land and gathering in the harvest. And it was no longer certain that a sick person, or a pregnant woman with complications would in a united effort be carried to a nearby health centre. A discussion about the lost spirit of solidarity ensued. Occasionally, the brakes were put on an argument that expressed some future prospect: 'We are jealous. That is the way we are.' Or they supported a new viewpoint with a saying from the oral tradition: 'Food is tasty when shared and eaten together.'

Reflections on the process

The topic here was a familiar one, and brought relaxation. The trainees became communicative and mentioned prescriptive sayings that in the oral tradition serve a guiding function. In the oral tradition, views, doctrines and

codes of conduct are transmitted from generation to generation via sayings, proverbs, stories, mythology and religion.

None of the trainees remarked that the modern marriage laws might well spell the end of the centuries-old traditions related to weddings with all the attendant, deeply ingrained rules of conduct. I saw these rules reflected in the trainees' answers and in their behaviours. I perceived great embarrassment when the trainees described the (orphaned) girls and women who had to get on with their lives without the 'protective certainty' of an honourable place in the traditional family organisation. How did one 'have to' relate to the women who struck up new relationships while their husbands spent years in prison? And how to relate to the unprotected and unmarried girls who fell pregnant? The use of the word 'prostitute' confirmed my impression that the prescriptive compass did not really point to clemency, despite the extraordinary circumstances and distress, and I thought about exercises that could make the centuries-old views on honour a subject of discussion.

The three layers revisited from the angle of the trainer's world

The trainees wanted to fill in the second diagram once more, but now from the angle of the trainer's world. They asked the questions now; many were remarkably good at that.

For the first layer, I gave examples that related to water and refer to trust: an anchor, a bridge. I also mentioned the clock and the watch and this enabled me to have a later conversation about the existence and the meaning of different perceptions of time.

On the topic of heroes, I chose people who the trainees might also know. Until 2008 I mentioned Mandela, then I added Obama, and I mentioned Bob Marley. This brought a smile to some trainees' face: apparently, they and the trainer shared a similar source of inspiration in music.

When it came to listing rituals, however, we found there were more differences between us. I related how Dutch traditions are changing rapidly, and that these changes are noticeable in the streets of big cities. Young people show their preference for a different lifestyle by dying their hair, wearing out-ré clothes or symbolic necklaces and bracelets. It stretched trainees' imagination to hear about different ways of preparing for a wedding and other wedding rituals. I said that most Dutch youths first, and publicly, form ex-

ploratory friendships and that these can be ended when the friend turns out not to be Mr or Miss Right after all. That a young man and a young woman can live together without being married, can split up again after a while and still retain their friends and families' respect. The questions that the trainees asked me about this arrangement reflected their values and standards. They wanted to know if someone could really choose a partner without their family interfering. And they asked, surprised, if young couples could live together without being married. Trainees found it hard to imagine that in the trainer's world, fathers were really present at the birth of their child. After I had, in return, asked Socratic questions in one of the groups about it being a normal practice that fathers did not attend births, a cacophony of explanations erupted that the interpreter could not keep up with. The trainees came up with various reasons, and differed about these, all in great fun. They laughed heartily when by way of rounding off, I teasingly suggested that the presence of African fathers at births would probably reduce the number of children per woman.



Photo 7

Author's own collection. The cacophony moves to the garden. Nya-Ngezi, 2008

The heart of the two diagrams: values

Having now arrived at the heart of the diagrams, I did not need to ask any questions about the meaning of values. Trainees suddenly grasped the structure, cohesion and the meaning of filling in the onion diagram together and of the exercises done earlier in the training. In other words, the attractive, albeit strange way of training had led them towards this 'golden moment'.

Surprised and delighted, trainees without exception reached the conclusion that values are apparently deeply rooted in the web of practices and customs. They noted that someone will naturally defend himself when strangers attack the values that he has grown up with. In the groups in Rwanda, trainees and trainer alike 'knew' without their having to spell it out that everyone was here thinking of 'the root cause' of the violence, and of the numerous statements going around, partly in the public space of the gacaca court (where ethnicity had to be named) and partly, so enforced by the commemoration politics, in people's homes (ethnicity could not be mentioned any more in the public space outside the gacaca courts).

The discovery of what values could mean sometimes led effortlessly to an open conversation about themes addressed earlier on in the training. The trainees found that getting acquainted socially should precede any discussions about differences in values.

Trainees in one group recounted how parents prefer a baby-boy to a baby-girl because boys carry on the family name. The trainees now asked themselves critical questions about this, induced by their enthusiasm about the equality they had earlier experienced when discussing the principle of equality in the training.

I was asked if I could draw their leaders' attention to the training. My answer was that the best advertisement for the training would be to give well-conducted supervision to future sociotherapy groups. My prediction was that turning the method to a reliable and consistent use would make everybody an ambassador of the method.

Reflections on the process

What the trainees especially discovered was that values may be interpreted differently but that they are driven by the same mechanism everywhere. I explained that in the literature, this mechanism is called socialisation and that studies about oral traditions have proven the wisdom of the saying: 'What your childhood gives you will come back to you as a white beard'. The ability to identify and recognise this mechanism makes it easier to choose to treat each other as equals and engage in conversation.

The trainees and I could now look back together on the previous reactions to the approach and procedures of the training. At the beginning of the training some trainees had said that they consulted the Bible to find out if they could put their faith in the training. They now understood the training activities from the new perspective. Again, they found similarities – the good Samaritan, the blind man who could see again – and saw their decision to trust the training reconfirmed.

The trainees discovered, together in their group, all kinds of new insights, and I could sense an atmosphere of increased decisiveness. Quite a few said that they would love to start supervising sociotherapy groups the very next day.

I also noticed that the trainees had internalised the diagrams: the next days, simply drawing the two onions with three layers each was enough. They could remember an entire exercise if a certain situation warranted this. The repeated drawing of ideas helped broaden their horizon: no words were needed. And a side effect was also that this relieved the interpreter of some work.

7.3 Working with values II: the knotting game

Occasion

The atmosphere in one of the groups was characterised by a sense of safety and trust, and this made me risk doing the knotting game with them in the second week of training. I had no experience with the game but thought that it would refresh trainees' attention and concentration, just as short games had done earlier.

Introduction

Box XXI The knotting game

Two trainees (the problem solvers) leave the room so that the other trainees can be instructed. This is the instruction: Stand in a circle, holding hands, and knot yourselves in as complicated a way as you can. Keep holding each other's hands firmly but make sure nobody feels any pain. You cannot talk and must, on no condition, let go of each other's hands. Follow the orders the problem solvers will give you provided nobody experiences any pain or inconvenience.

The problem solvers are called back in again and now have the task of releasing the tangled-up group from their plight. Keeping their hands on their back (making sure they don't touch anybody), their task is to let the group form a circle. They can only give verbal instructions. The problem solvers are allowed to confer together.

Margolis in: Pretty, Guijt, Thompson & Scoones. (1995)

Doing the game: knotting

I asked the players to form a circle and hold arms, and then asked someone to walk under, or over, two held hands. One person turned to their left, another turned inside, to their right or outside. The trainees executed their knotting with attention as well as curiosity. When they had made themselves into a knot, I told them the rules for 'the group in trouble'. I noticed no opposition to their having to touch physically and I 'read' from the smiles in their faces that the players trusted the knotting.

Reflections on the process

While they were getting tied up in knots I noticed that the players saw the rule of secrecy as a challenge that they enjoyed.

Unknotting

I explained the rules of the game to the problem solvers, and said they had to stick to these. They started their task cheerfully. They observed the problem by walking in circles round the knotted group. They stopped, and tried to peer inside. They gave instructions to the whole group, but not to specific individuals. The players did not follow these instructions because they were unclear, hurt or proved undoable. The problem solvers were decidedly less cheerful when a solution did not immediately present itself. Ten minutes into the game, and their morale began to sag. Some problem solvers tried to wriggle themselves, somewhat impatiently, into the knot. Others believed they were faced with an impossible task and felt like giving up. As the knotted group 'was not allowed to talk' I pointed out to the problem solvers that entering the group might hurt people. At the same time I urged the problem solvers not to give up on their attempt to free the group. After some twenty minutes, on average, they hit upon concrete and therefore practicable instructions after all: 'Can you lift your right arm? Can you bow your head? Can you walk under your neighbour's arm?' The players could now execute the instructions, and the group was soon completely unknotted, to everyone's relief and pride.

Reflections on the process

Trainers in sociotherapy also learn a lot themselves when they teach trainees how to supervise and mentor sociotherapy groups. I asked myself, for instance, how difficult it was for the 'problem solvers' to find an adequate solution. Would it have been better not to encourage the problem solvers? Was their 'feel like giving up' to do with the fact that the trainees only knew the one-sidedly cognitive-oriented method of whole-group teaching? Was there a connection between the effort it took to find the crux of this game and the existing hierarchical order where the problem-solving skills of 'subordinates' are rarely called upon? And how did the power that the knotted group of silent trainees had affect the problem solvers' self-image?

Getting unknotted

In all groups, the unknottling took an average of twenty minutes. That came as a bit of a surprise because I had only allowed a time slot of the usual five to ten minutes for it in the day programme.

Despite the inconvenience of being knotted the trainees managed very nicely to keep to the rule of holding hands. I only had to remind them once or twice of the rules of 'no talking' and 'keep holding hands.' The knotted group continued to radiate pleasure at the challenge that their conspiracy posed.

Review

The trainees found the average twenty minutes it took to find the solution a matter of interest rather than a problem. They said that the knotting and unknottling had been an exciting experience. The trainees responded to the knotting game with a radiant smile as they gained one insight after another. Again, I did not have to ask a single question.

What the trainees found instructive:

- We found ourselves in serious trouble in the game and even so, we stayed united.
- We become closer to one another in the knotted situation and remained united.
- We lost the space to move and speak in the knotted situation.
- We regained our space to move when we were freed.

- We behaved like a family while we were knotted.
- We did not know how we could free ourselves from the knot that others had put us in.
- We were freed without our values being infringed on.
- We saw a metaphor in this game for the situation in our own living environment.
- We noticed that strangers may have taken away our space to move but not our sense of connection.
- We did not know that we could at the same time relax and learn, and we did not know that this was at all possible.
- A younger trainee concluded that in the game, everybody played with everybody else because they could not use words.
- A young woman thought it was all very safe because no-one in the group grumbled.

In some groups, the problem solvers asked how the knot could have possibly ended up like this, and so the 'secret' knotting was done once more.

The trainees also discovered that thoughtlessness when lending assistance may do unintended damage instead of offer a solution. Others said that the game had taught them to first look carefully at people's problems instead of coming up with a rash solution. One of the trainees believed that fragmentation was the big problem for the people living in this area. But the knotting game had shown him that the underlying connectedness had nevertheless survived, and this was what made the sociotherapy intervention useful. The assessment was widely supported.

The trainees showed that playing the game had made them think differently about the meaning of games in general. They no longer found games 'childish' but valuable educational instruments that could well be used with future sociotherapy groups. The notable non-verbal reactions (the bright smile on trainees' faces and the self-confidence in their body language) made it likely that valuable discoveries had been made by experimental means.

I now discussed what the meaning of games is in sociotherapy, and this inspired the trainees. I stated that from the first day onwards everybody receives a great many new impressions that he needs to process and that this is the reason why I set aside time for relaxation. I confirmed that the trainees get to discover unknown aspects of themselves and their colleagues by means of the games and that a trainer, too can learn a lot from the trainees' experiences and insights. I complimented the trainees on the insights they had

gained as these accorded with what the literature says about group dynamics and I took the opportunity to elaborate on the way I worked. I said that I set the training programme on a day-per-day basis so as to align it with trainees' input and contributions and with anything educational that arose.

As I had their full attention, I also explained that social scientists had studied how people learn better, or more easily, in a safe environment where there is trust.⁶ And I used this 'golden' moment to point out how valuable it is that people can learn from what they have discovered themselves. I illustrated this by drawing an opened head into which knowledge is poured from a jar, and an unopened head around which I drew question marks. I drew a few symbols of connectedness next to the question marks. The trainees now detected in the learning by doing method an instrument that could bring about change.

Reflections on the review meetings

The review meetings took place after an average of six or seven days in which trainees had been offered a variety of activities. I had used the knotting game with the intention of refreshing attention. It became an experimental activity where the trainees learnt that there were other ways of dealing with and thinking about their (living) situation than the ones they were used to.

The trainees articulated their experience of how they had learnt with all their senses how working together in a very concrete way gave meaning to the phases of safety, trust and respect. And that this way of learning also applied to the principles of equality and responsibility. They accepted, for instance, that while they clearly enjoyed much less physical space during the game, they gained and widened the mental space to temporarily push social boundaries.

Sometimes an optimal order of activities sprang up in the programme, as, for instance, when the knotting game was preceded by an exercise about lost connectedness. The accidental rule of holding hands stirred the trainees' idea that the social fabric of their world was still connected in its deeper layers, notwithstanding the apparent fragmentation. Feelings about their living en-

⁶ The opposite was also true, however. Life-threatening experiences are imprinted deep in the brain and remembered for life. The result of this deep imprint is that both previous and new experiences and memories leave an impression less easily.

vironment falling apart had been expressed with irritation and bitterness until the moment of this discovery. One group had long discussed the issue of the dishonoured women and, impatiently, the increase in misunderstandings. I recognised these stories: they agreed with what I had heard in the exploratory talks. In that same group, the twenty-five traditional leaders also spoke about the loss of the old, familiar ways of life and social behaviour. They mentioned cattle theft, rape, land disputes and militia obstructing access to residents' sources of livelihood. What the traditional leaders meant by 'loss' was that the habit of drinking the traditional beer together had vanished, and with it, the once usual meetings where sensitive subjects were discussed, mercy was shown and reconciliation achieved.

The way in which the knotting game was played helped the trainees identify the meaning of the social value of 'being united' and talk about the newly discovered perspective from which they could regain the space in which to move and speak freely.



Photo 8

Collection Yolanda van den Broek. Knotting game in Kakata, 2013

7.4 The trainees recognise and acknowledge the meaning of values

The onion diagram

The onion diagram prompted discussion of local standards and values. The trainees described themselves as Christians and as a member of a church and a family. They recognised that when filling in the first two layers, they tried not to feel uncertain and that they were more relaxed and communicative when filling in the third layer and the heart of the onion. These related to the social relations in the area characterised by great (power) distance between people and to the position usually adopted vis-à-vis authorities.

I cautiously asked follow-up questions which made the trainees recognise that people who found themselves outside the 'normal' social patterns imposed by kinship and religious precepts, ran a considerable risk of marginalisation and stigmatisation. The answers to my follow-up questions kept me looking at the situation from the trainees' perspective, and this helped me decide which exercises to offer next.

With the help of the onion diagram the trainees learnt to recognise their own social values, which, they discovered, are deeply rooted in relationships networks.

The knotting game

Playing the knotting game helped the trainees discover how their self-formulated definitions of safety and trust assumed a deeper meaning. The game brought together word and deed: the problem solvers experienced first-hand how different things were if finding a solution was bound to certain rules. This challenge taught them and the knotted group to look at problems more playfully. This also persuaded the trainees that they themselves had the talent to define the situation in their own world differently than their socialisation had taught them to. They realised that they could in a dignified manner contribute to alleviating the burden of disruption. They understood that they could play a role in retrieving the value of connectedness which they believed to be lost but which was also the keyword that bound the trainees together in each review meeting. Trainees argued that this value would help reduce problems if they acted in the way they had during the knotting game. The

trainees' conclusion was that they were capable of applying sociotherapy in actual practice.

The trainees realised:

- That a change in values brings about social change and that this also holds true in the training in coaching and supervising sociotherapy groups.
- That coaching community-based sociotherapy (in the participants' living environment) may have unforeseen positive and/or problematical consequences and thus requires a cautious approach (since everyone is used to a hierarchical order).
- How they might anticipate the dynamics of sociotherapy groups by first experiencing for themselves how the various games and group activities work out.
- That the activities (may) implicitly and/or explicitly touch on prevalent values and associated norms.
- That they learnt skills with which they could bring about golden moments of discovery.
- That it is not the trainer but the trainees (and the future participants in sociotherapy groups) who have the first, and last, word on values.

7.5 The exercises and their significance for learning about the phases and principles

The phases

When the trainees felt more certain about the safety, trust and their care for each other, which had increased through their own achievement, I could introduce exercises that might create tension. Importantly, the onion diagram and the knotting game offered everyone an opportunity to show respect. As they show each other respect, trainees gain positive experiences that make it easier for them to join in dialogue and take their thinking further.

The principles

The exercises focused on the principles of equality, participation and responsibility. The trainees all participated in filling in the onion diagram and playing the knotting game and practised equality.

When they played ‘the knotting game, the trainees had to manage, temporarily, without the usual order established by tradition, age and social and ethnic status. Social boundaries could be pushed back, there was sufficient safety, trust and care for each other. The principle of equality received more than just words: during the game it became visible as a social form of action. The trainees applied the rules of their own free will as they practised and addressed the wider concept of democracy. The various rules facilitated the trainees to participate and assume responsibility on a basis of equality. Moreover, they also succeeded in formulating together the beginning of a group target because they were highly focussed and agreed about values.

7.6 Reflections on the role of the trainer

On the onion diagram exercise

The review of the onion diagram exercise showed that the trainees experienced the training group as safe, trustworthy and caring as they took responsibility. They articulated their understanding of the fact that social change is accompanied by communication about values. I noticed that completing the onion diagram also helped to move the tension to the background that had been created at the kick-off of one of the training groups, when a trainee wanted to start discussing the root cause of the genocide and I matched this with a different idea.

Naming heroes may create tension in a post-conflict environment. That is why I added the question about sources of inspiration to the second layer of the onion diagram.

I convincingly demonstrated that the onion diagram is not only a method for learning about local contexts but also lowers thresholds if the sociotherapy groups are from the very start coached in a questioning manner. The method helps the beginning sociotherapists devise starter and follow-up questions, even before they introduce the onion diagram in their sociotherapy groups. As an example of learning by example I always formulated my follow-up questions in such a way that the trainees could not only learn from their own answers but could also learn how they might later ask the participants in their sociotherapy groups similar questions themselves.

When I explained and elaborated on the method of sociotherapy, I (automatically) switched between asking questions, listening and visualising any answers. I brought regulative structure with the following skills or techniques⁷ of:

- Decelerating: continuing to listen to the same answers.
- Accelerating: adding a question to the onion diagram, like the one about sources of inspiration.
- Protecting: by, for instance, leaving out the theme of ‘mourning’.
- Challenging: teasing, for instance, about the absence of fathers at births.
- Attenuating: inserting a game and/or asking a lot of questions about a subject with which the trainees feel at ease.
- Intensifying: drawing attention to a new concept of time. Trainees themselves become agents of change.
- Delimiting: keeping an eye on the aim of the exercise while remembering interesting side-tracks to be used later as training subjects.
- Expanding: asking follow-up questions that may lead to the discovery of a connection between ‘normal’ social behaviours according to kinship traditions and religious precepts and the increased chance of marginalisation and stigmatisation if ‘normalcy’ has fallen apart.

On the knotting game exercise

My urging the problem solvers not to give up requires some critical reflection. Because of it, the trainees worked towards a successful action. On the other hand, though, the result of (slightly over-)encouraging people can also be that they are not successful after all and then, encouragement becomes an experience of failure. This consideration made me decide to henceforth let the trainees choose for themselves whether or not to give up.

It is and will remain of the essence that a trainer, together with the trainees, seeks possible explanations when trainees find it difficult to come up with symbols and/or solutions. I was often beset by more questions than I wished to discuss. Frequently, these questions were my own, and the training was hardly meant to answer these. In this stage of the training it was important that the trainees’ attention remained focussed on letting their recent discov-

⁷ While I was preparing my PhD thesis, I discovered, through a remark and a question from one of the co-supervisors, that I never trained this skill explicitly. I did, for the first time, discuss the skill during a training in East Congo – in 2017

eries sink in. The more discoveries they made, the more intensive the dialogue could be.

The questions that I asked myself (and that trainers and coaches of future training and sociotherapy groups should ask themselves) included:

- Is the trainer at 'work' or is the group working and learning?
- Do I deepen what I hear from the trainees? Or are they simply witnessing something they already knew?
- Do I know and acknowledge my own peculiarities and specific affection for a field of interest?
- Do I nevertheless make sure of a balanced and varied programme development?
- Do I offer trainees sufficient opportunity to reflect on their own interpretation of their choice of a theme and an appropriate method?
- Am I teaching the trainees how to discover their own blind spots?
- Am I teaching the trainees how to get to know and acknowledge their own limitations?
- Am I teaching the trainees how to reflect on their own functioning with colleagues ?
- Am I challenging the trainees where possible and do I protect them where necessary?

7.7 In conclusion

Using the onion diagram enabled the trainees to reflect on the values in their lives and in their world. They were given tools with which to invite aspiring participants in sociotherapy groups to formulate their values and to engage in dialogue on the subject.

The trainees experienced that there were various ways of learning how to define values, and that made them want to start with the sociotherapy groups straightaway, as it were. The questions and conversations about their own customs and traditions caused all trainees to overcome their shyness at this manner of training – whose content was not in any way steering. The movement from the various layers towards the heart of the onion helped them understand that values matter to everyone and taught them how to participate in open communication about social change.

The trainees discovered that as they played the knotting game, they were enabled, in a physical and playful way, to view the damaged relations between

the people in their own environment differently. They stressed this meaning of the game in the review meetings.

The complaint about confusion remained while the complaint about the damaged relations disappeared after the value of connectedness had been discovered. The new insight that there was still connectedness among them was implemented in a perspective for joint action, likewise discovered by the trainees themselves.

The processes of the onion diagram and the knotting game legitimised me to go one step further than an invitation to participate. I could now focus on the trainees learning to take actual responsibility for fleshing out the content of the training. This meant that I could offer more complex tasks and that I myself could take up a position on the sidelines. This is the subject of the next chapter.

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8

Working with the Responsibility for Fleshing out the Training

The trainees were highly motivated to start implementing the training as soon as possible. I therefore decided to devote the remaining training days to joint decision-making. In my opinion, being adept at making decisions is an important asset in ensuring the quality of sociotherapy.

Trainees' self-confidence is boosted if they see how one activity follows on from another. And if they have cognitively learnt from their affective experiences what are, and are not, 'suitable, fitting' discussion leads for bringing up a subject.

This chapter recounts how this approach prompted a discussion among the trainees about family organisations and, by extension, land disputes.

8.1 Basic assumptions

Social change can only occur if the trainer has an open manner when inviting the trainees (the aspiring sociotherapists) to participate. This 'open manner' is important because participation in sociotherapy implies social change, which may meet with approval on the part of the future sociotherapy participants but also with opposition. Implementation in actual practice may have consequences for the trainees' present social position. More complex exercises will make trainees experience and understand more deeply what taking responsibility entails. Chances of success are best when the trainees understand the impact of their own socialisation process, which, after all, shapes everyone's emotional, moral and social development.

The guiding principle for more complex assignments is that:

- The trainees acknowledge that they themselves play a role in the increase in safety, trust and caring, in the sense of looking out for each other.

8.2 Using bottle caps to clarify stories that speak for themselves

Practical experiences

My unfamiliarity with local ways of thinking, feeling, speaking and acting proved to be an advantage. As I did not exactly know how all the suffering was processed socially, at all levels of society, in the areas where the training programmes were run, it could only be the trainees themselves who were able to flesh out and colour in the training.

Occasion

For the content of the educational hour (cf. box IX, section 2.1), where trainees learn verbally from and with each other about subjects from a morning assembly, they chose the theme 'land disputes'.

Introduction

During the educational hour I positioned myself as a student (I had to learn from the trainees) while I also supported communications. I opted for these two roles because it had remained unclear to me, despite trainees' explanations, what the land disputes were about, exactly. Since I had been collecting bottles caps for some days, together with the trainees, their curiosity for the new activity was piqued. I asked the trainees to clear the table so that the scene of action, the lay of the land in question and any land boundaries or demarcation lines, the yards and living spaces, crops and cattle could be chalked on it. I then explained that the caps could help explicate a story, make telling it easier, as the real names (and positions) of the persons involved in the conflict were transformed into nameless characters. They now were 'this blue cap, that beer bottle cap, this upturned cap'. The persons-become-caps were easy to move about on the flat surface of the table, and this made it possible to 'see' how a so far implicit story of a problem could become a kind of cartoon strip. An account of the activity follows here.

A story about a land dispute told by means of bottle caps

Question from the trainer in the role of student and supporter: 'You had a land conflict with your neighbour, didn't you?'

The trainee bringing up the subject: 'No, friends further down, who I know, they had a conflict and I tried to mediate.'

The trainer drew two houses and placed two blue caps near them: 'Your neighbours. Can you tell us more?'

The trainee: 'It was about a land conflict, my friend's neighbour had moved a post without permission and thus extended his yard.' The trainer drew a fence around the two houses. She wiped off the gate on the boundary and drew it further down, in the other yard.

The trainer: 'What was your role in this conflict?'

The trainee: 'I tried to help the men resolve this conflict and to prevent us having to go to the chief.'

The trainer: 'How did that go?'

The trainee: 'I walked over, with my friend, to his neighbour.'

The trainer moved the cap for one of the men to the yard of the neighbour, and asked: 'What happened there?'

The trainee: 'The neighbour refused to put back the post, which he had moved one metre.'

The trainer: 'Did these neighbours have families?'

The trainee: 'The men had wives and children.'

The trainer: 'How many children did they have?'

The trainee: 'My friend had one son and four daughters, his neighbour had three sons.' The trainer placed a row of caps behind those representing the quarrelling fathers: open caps for the women and daughters, and down-turned caps for the sons.

The trainer: 'Did the children that lived next to each other still play together, despite the quarrel?'

The trainee: 'That was difficult for them, what with the quarrelling fathers.'

The trainer: 'What happened after the refusal to put the post back?'

The trainee: 'We had to go and see the chiefs for a solution.'

The trainer: 'Where were those?'

The trainee: 'They were at home.'

The trainer: 'Where were their houses in relation to the quarrelling neighbours?'

The trainee: 'On the other side of the village.'

The trainer: 'About here?' The trainer drew a yard further away and put down caps to represent the chiefs.

The trainer: 'Where was your house?'

The trainee: 'In the northern part of the area.'

The trainer drew a yard in the north and put down a cap from a beer bottle. 'That is you.'

A smile appeared.

The trainee: 'It is against my principles to drink beer.' The trainer replaced the cap.

The trainer: 'And then what happened?'

The trainee: 'The three of us left for the traditional court of the three chiefs.'

The trainer moved three caps to that yard.

The trainer: 'How does a traditional court with chiefs work? What happened?'

The trainee: 'The quarrelling men were questioned by the chiefs. They ruled in favour of one of the quarrelling men. At the authority of the chiefs the post had to be put back. The two men were also ordered to bring locally brewed beer and food.'

The trainer: 'What did that order signify?'

The trainee: 'If beer and food are consumed together, the land conflict is regarded as over.'

Called to rise to the challenge, a female trainee then also did the exercise with the chalk drawings and the bottle caps. All trainees again paid attention to how this story was explicated and how their colleague applied the method. The trainees talked together about the tradition where mothers receive their elder sons and their children when they visit the parental home in different rooms and give them better food and drink than they do the younger sons or daughters.

Trainees in another group pointed out that land disputes come in a wide variety. The example they mentioned involved two men who had got into a dispute over cattle. The six-year-old son of one of them had herded the cattle and led it through the other man's cassava field to graze it there. The land conflict turned on the fact that cattle was not allowed to graze there. The trainee, who had mediated at the time, had invited the two men to her house. The woman decided to keep silent when it turned out that the two men saw the opportunity of talking together as the solution to their dispute. When I asked more questions about this incident, the woman and the other trainees supplied alternative endings: 'The father of that six-year-old son could have apologised and could have reimbursed the other for the lost harvest.' Other trainees chimed in that there were countless stories like these they could tell. Upon my question how things stood with the problems in these countless stories, they said that the church often helps out.

Review

During the review meeting the trainees expanded on the various land disputes. Far from defending the tradition of the right of primogeniture, they pronounced the old custom unfair. And they said that what they learnt from the exercise with the bottle caps could also be used with what they discovered earlier on in the training, about resisting the temptation to broadcast stories based on 'hearsay'.

Reflections on the process

With the use of bottle caps, situations could be clarified, and this motivated all trainees to supply as much information about the land disputes as possible. This approach lowered thresholds: a knotty problem from their own environment was now explained in a relaxed atmosphere and with great patience. Information was disclosed about the local structure (there are chiefs who act as judges), local customs (having right of way does not imply that one can graze cattle) and about social relations (when fathers quarrel, their children can't play together). The trainees began to understand how important it is to provide or receive precise and detailed information on a situation. They also realised again that they themselves, and therefore the future participants, are connected by many threads to the local sources of livelihood and the time-honoured ways of social interaction.

The visualised story grew and 'moved', so that no trainee could fail to conclude that problems simply cannot be 'just' cleared up. Visualising the story helped trainees remember where an answer to a question led and where a next question came from. Every trainee had the opportunity to check if the explanations that were given agreed with their own version of the situation (when explanations are given, the assumptions behind them often remain hidden in the heads of the people involved).

The bottle caps helped to de-problematise the land conflicts. The trainees learnt from describing the situations and remained keen to set to work themselves. With their full attention and commitment they showed themselves increasingly motivated to take on responsibility for fleshing out the training programmes. They learnt that using creative activities helps create the pre-conditions required for cultivating an open mind that can experience critical questions and remarks as constructive.

During the review of the case of the trespassing cattle it transpired that the trainees were of the opinion that the conversation itself should not be regarded as the end to the conflict. They would have more faith in an ending that offered the prospect that the same would not happen again. This view demonstrated that they were also thinking in terms of forms of legal rules. Their conclusion was that farmers and livestock farmers would be free from constantly mounting emotions if they knew they could put their trust in agreed legal rules.

The trainees had received education and were not only the inheritors of the thought and behaviour patterns prevalent in their world but also the representatives of insights that conflicted with these patterns. That was the reason that a number of the trainees wanted to resolve the land conflicts. Their motivation was now strengthened through playful activities that gave them more tools with which to work towards their goal.

In stories based on hearsay, fellow men and women are easily reduced to one-dimensional characters. Learning to get as complete a view of a difficult situation as possible made the trainees see the possible effects of such one-dimensional labelling, when people are assigned certain identities in a crisis context. And they realised it is important not to label someone all too rashly as the victim, the prostitute, the rebel or the traumatised man or woman. Another interesting effect of the bottle caps exercise was that the trainees who brought up the situation were honoured to see the whole group's attention focused on the well-being of people in their own living environment.

The impact of the visualising effect of the bottle caps struck me, too. Irrespective of the volume of the instances of the land conflicts, the partitioning of a yard, the privileged position of the eldest son, or improper usage of traditional rights of way, I began to look differently at how the concept 'conflict' was used.

8.3 Types of family organisations

Occasion

Perceptions of safety, trust and care were increasing, and this told me that it should be possible to carefully start a discussion on the subject of families. Trainees and staff had already told me, in different wordings, that 'families'

would be a sensitive subject. And I knew from the information the follow-up questions had provided (cf. section 5.3) that the trainees had lost, in total, 862 relatives to violence. 'I lost two brothers. I lost my father. I lost both my parents. I lost ten relatives'

Now that the trainees talked about the position of oldest sons, about problems when herding cattle and about children's play areas being out of bounds if their fathers did not reach an agreement about a land dispute, I spotted a low-threshold opportunity for raising the subject of families.

Introduction

By way of introduction, I started off with some questions about families in general. What is the situation as regards families? What are families like? What meaning does a family hold for the trainees? How are decisions on important matters made in families? Without saying this out loud, I was thinking here of choices about the right school for children, about selling cattle, seeking help from a traditional healer or a modern clinic, using contraception as being important decisions.

Execution: a discussion about families and their forms of organisation

The trainees described nuclear families (parents and children), extended families (grandparents, aunts and uncles, parents and children) and incomplete families (decimated in the violence of war). Most frequently mentioned were the nuclear families. Some trainees said that families consisted of members of the same cultural group. Others stated that families had land and shared harvests. A few trainees referred to the onion diagram as they explained that family is a place where you grow up, where generations succeed each other, where there is togetherness and where food is shared, where you can say what you want, where you find your place, where there is respect, where there are rules and where morals are shared.

The trainees did not volunteer information on how decisions were taken in their families. I created an opportunity to discuss the topic by introducing three types of family organisations (cf. Box XXII below).

Box XXII Characteristics of the three types of family organisation

- In pyramidal families, fathers decide on all important matters. Women and children are obedient to these decisions. Internal problems are not brought out into the open
- In closed families, fathers and mothers together decide on important matters. They may include advice from the children in their decisions. Internal problems remain within the family
- In open families, fathers and mothers together decide on important matters and may include advice from the children in their decisions. Internal problems can be discussed with relatives, good friends and others close to the family, without any repercussions. Advice from relatives, friends and others close to the family is welcome

Source: De Swaan (1999)

I explained that three types of family organisation can be distinguished: a hierarchical, a closed and an open type of family. I drew a symbol with each type: a pyramid, a closed circle, and an open circle (a dotted line). Adopting a cognitive approach I listed a few characteristics of the pyramidal type after which the trainees and myself engaged in dialogue and found some characteristics for the closed and open circles. In this way I could start off the conversation about decision-making in families calmly and quietly, leaving it up to the trainees if and when they wanted to bring up the joys and sorrows of their own families.

The trainees listened and participated with interest: they were not familiar with the three types of family organisation. Trainees situated the pyramidal families faraway in the rural areas, and characterised the type by its polygamous lifestyle. Upon my question, they said they believed to be living in closed families. As I subsequently described the open family organisation, trainees expressed surprise, which gradually turned into opposition. This was articulated in the question whether an open family can still be said to be a family. Trainees who were reluctant to talk about the open family model explained themselves. Some of them had made the assumption that 'open families' implied discussing marital intimacies with friends and acquaintances. Elsewhere, the open model called up memories of the civil war, when there was no form of privacy whatsoever in the refugee camps. This dialogue showed me that different contexts will yield different views. But there were also places where the trainees mentioned advantages of an open family, such as the fact that family members are not left helpless if a father or mother is absent because of work or illness, or because they have died. These trainees reached the conclusion that relations between adults and children from an-

other open family ensure greater protection for all. The closed model was defended here and there.

The trainees asked questions: was there a model for incomplete families? And, critically, which model did I recommend? The latter question reflected the ways in which the trainees habitually learnt and acted. I explained why trainers and sociotherapists refrain from recommending any type of family organisation and this presented trainees with uncertainty, disappointment as well as food for thought.

One trainee from the first training group later recounted how after the discussion about families he had taken the initiative and begun to look more closely at which form was the most prevalent in his living environment. In a subsequent training location, I seized upon this initiative to broaden and deepen the discussions even more by means of questions about the most prevalent family model in the trainees' world. This resulted in an exchange of estimates. The trainees now spoke without my mediation. They called to mind the characteristics of the family organisations, discussed these and asked each other and the trainer all sorts of questions about the three examples.

Reflections on the process

This approach revealed that there was now sufficient safety and trust to ask the trainer critical questions. This sheds light on an interesting phenomenon. Often, western aid-workers tell war victims from non-western contexts that they see themselves as their equals. Yet the adoption of a methodical approach to creating a safe space demonstrates that practising equality is the result of a process.

In principle, the subject 'family organisations' gives trainees a chance to talk about (traumatic) memories of lost dear ones at the same time that it protects them against discussing this prematurely. This was exactly my intention in choosing this method. In a group it is easy for a trainer (and later for a sociotherapist) to ask about memories of traumas when dealing with the phases of trust and caring, but it is much more difficult to shepherd the ensuing action and interaction. This involves a structuring kind of coaching that requires structuring skills. To be able to do this, the trainee (the future sociotherapist) needs to know how to temporise, delimit and attenuate the action and interaction methodically. Only then can discussions about families be held in an atmosphere of safety and can those participating in the sociotherapy groups

continue to attend the subsequent meetings without fear or loss of face. Drawing the symbols enabled every trainee to take part in the discussion.

Around the seventh day of training, all eight groups began to experience more and more feelings of uncertainty. The trainees discovered the flipside of the surprising manner of learning, i.e. that the trainer time and again left it to them to make a decision. One trainee put it thus: 'You teach us a lot, but you don't tell us what is best.' In the discussion about family organisations, the trainees expected me to point to one of the three types as being the best. This expectation was based on rule-following behaviour: on the natural assumption that fathers and cultural fathers (elders, teachers, managers, authorities) make decisions and that these decisions will not be contradicted. Rule-following behaviour mostly assumes the character of a virtue and is hard-wired into people. I could hear as much in the trainees' statements and see it in their behaviours. It surfaced, for instance, in the activities with the onion diagram. The habit of following others becomes an obstacle as soon as trainees start making their own discoveries.

That the extremely sensitive subject of families could be discussed at all underlines how fully the trainees had taken on their responsibilities of listening carefully to each other, of being wary of any interpretations and how much they understood the meaning of 'sitting on your hands'. They learnt step by step that adopting a different attitude towards familiar things might mean that they could no longer base themselves upon long-practised behaviours.

The timing and planning of the training programmes did not really allow any comprehensive excursions into theoretical underpinnings. Even so, the succinct explanations of the theories on socialisation, social systems, social identity and group dynamics helped trainees take on the responsibilities required for shepherding and managing the sociotherapeutic approach. The theories explained here are included in Johnson & Johnson's model of principles mentioned earlier (cf. Box X, in section 2.2).

8.4 The homework assignment on family organisations

Occasion

The existence of family organisations was a completely new topic for the trainees that they could not stop talking about. This prompted me to continue the conversation through a homework assignment. I set the homework assignment (see below) because I expected the trainees to carry it out with gusto and because I expected it to yield interesting material for the rest of the training.

Execution

The trainees responded with enthusiasm and asked if they could make the visits in pairs, how many visits they had to make, and how many questions they had to ask. They believed it would be important to have a badge of the organisation as this would help them win the villagers' trust. For good measure, I again impressed on the trainees that families are autonomous in how they choose to live together and that for that reason the questions must not be judgemental or convey advice of any kind.

Box XXIII The homework assignment on types of family organisations in one's own environment

Step 1:	Every trainee visits ten families
Step 2:	Say, at the start of your visit, that you are with the sociotherapy training and explain in clear terms that you are carrying out a homework assignment
Step 3:	In advance, think up a number of questions that you think will give you a clear picture of the type of family organisation. Also use your questions to spot any connections between the type of family organisation and an atmosphere of trust
Step 4:	Ask your questions in an atmosphere of safety To this end, apply what you have learnt about the principles of approaching people
Step 5:	Afterwards, see if the answers given by the families you have visited give you a clear picture of whether they have a pyramidal, closed or open family organisation

Reflections on the process

If the momentum of enthusiasm is used well, the trainees may perceive the development of their own process and discover the meaning of binding and connecting solidarity. As the trainees were given the task of drawing up the questions for the home visits themselves, they could not hide behind the responsibility of 'a superior'. Confident that the trainees would be able to carry out this task, I actually added an extra dimension to the cognitive tension (practise in your own environment what you have learnt this week). The result was that the trainees anticipated the positive tension. They accepted the complex assignment without hesitation and anticipated the shaping and execution of the task. They thus showed their (possibly newly gained) open-mindedness.

The combination of cognitive and affective learning has the function of balancing, on the one hand, trainees' enthusiasm and, on the other, their uncertainties about the freedom of choice. All these had also featured in the trainees' work with the bottle caps, with the symbols for family models and recurred now with the assignment to visit families.

With my decision to let the trainees choose for themselves with whom they would carry out the task, I anticipated that:

- The trainees would find connecting factors for forthcoming discussions and exercises.
- They would work in partnership to align and structure their future cooperation further. (More on this in the next chapters).

8.5 Review of the homework assignment

Occasion

I scheduled the review of the homework assignment on the next day of training, directly after the morning assembly.

I noticed a remarkable change in the trainees' behaviour after every training-less week. They were happy to see each other again and the women had certainly given more attention to their looks, sporting a different hairdo and wearing different clothes. During the morning assembly, the trainees talked eagerly about their home visits. Pointing to the programme schedule, I asked

them to summarise their findings. I noticed that the trainees regretted this restriction and this took me back to previous experiences where people caught up in war conflict and trainees treated me as a ‘mother’ in the cultural sense of the word. I accepted the role, which in the literature is referred to as ‘transference and countertransference’ and turned it to good educational use.

Introducing the review

In response to the disappointment that the home visits could not be discussed directly with me, I expressed my appreciation for the enthusiasm with which they had tackled their homework assignment, adding that I was sure that the trainees had much to say that was of great interest. But I stuck to my decentralised teaching format, which I accounted for by stressing that the information collected gets optimum attention and educational meaning if the trainees discuss their experiences together first. The trainees set to work on the assignment (see below).

Box XXIV Organising the review of the homework assignment

Step 6	<ul style="list-style-type: none"> • 50 minutes • Sit in groups of four • Explain to each other how you introduced yourself to the ten families • Explain what questions you asked • Do not interrupt the other person during his/her account • Ask questions and explain to each other how you arrived at your conclusions • Choose someone to write the most important findings from this discussion on a flip-over • Choose someone to present your results to the full group
Step 7	<ul style="list-style-type: none"> • 50 minutes • Take part in the full-group discussion about the visits • Justify the findings from your own group (Every group has 12 minutes for this)

The first part of the execution

Various trainees needed to have explained to them a few times how I wanted them to work, which was a manner of working they were not familiar with. There were groups where the trainees did not sit in sub-groups. And where

some trainees did sit apart, they did so rather carelessly. I there adopted a directive approach, re-arranged chairs and pointed out to the trainees that it is easier to see and listen to each other when the chairs are arranged in a cross.

The trainees set to work, read each other's lists of questions, exchanged findings and discussed summaries, which they then wrote on a sheet of paper. They did their best to keep to the discussion procedure and not to interrupt one another. Some trainees found this difficult because they were so very enthusiastic. From the moment they could ask and answer questions I saw the surprise and light tenseness on the part of quite a few trainees turn to joy. The trainees told each other how the visits had gone and how they introduced themselves to the families. They said that they applied the lessons in greeting people that they had learnt in other training programmes.

The second part of the execution

After the work in sub-groups, I moved the tables and chairs to one side, and much to the surprise of the trainees, chalked on the floor of the training room a circle one and a half metres in diameter that was to represent a community. Having arranged the chairs around the circle, I invited the trainees to take a seat.

As in the exercise on rule-making, I gave every trainee the opportunity to call out the number of pyramidal, closed and/or open family organisations they had found and then explain their conclusions. To allow the memory of this moment to linger a bit longer I drew the results of 'the investigation' (see Table 8.1 below) one by one, as a pyramid, a closed circle or an open circle in the living environment. I thus enabled all trainees to tell their results to 'the mother' after all and experience appreciation.

Again, the method was met with a great deal of attentive interest as well as some surprise. The trainees closely followed the results, what they entailed and how the discussion continued: if I lost count, the trainees were very quick to correct me. They were well able to explain why of the total of 402 families visited, 30.6% were pyramidal, 36.06% were closed and 33.4% were open families.

Table 8.1
Results of the homework assignment

	Nya-Ngezi A 5th day	Nyamata A 5th day	Nyamata B 5th day	Kakata A 5th day	Kakata B 5th day	Total
Visited	120 families	40 families	36 families	109 families	97 families	402 families
Pyramidal	48	12	9	36	18	123
Closed	46	24	18	32	25	145
Open	26	4	9	41	54	134

Reflections on the process

The trainees longed to tell their stories to the trainer, and thus cast her in the role of mother. I believed I could account for this in two ways. Assigning someone the mother role springs from the tradition of respect for the wisdom older women are supposed to have. Older women who are part of this tradition know the tasks attendant upon this position of respect. Or, trainees' own perception was perhaps accountable: they saw/experienced the intervention in relation to the prayer that had been heard ('God has brought you here') and thus as an assignment imposed from above. Seen from the perspective of religion, their enthusiasm to talk about the results of the homework assignment could be understood as an offering, a gift, a sign of worship addressed to a god. By viewing the tradition- inspired situation in these terms, I showed respect and I protected myself against the belief that the show of honour and respect were meant personally (for me).

The trainees only really understood that they were first going to discuss their experiences with the home visits with one another when I arranged the chairs in such a way that sub-groups were formed. The reserve in their words and behaviours indicated that they needed to have the explanation and information repeated so that working in sub-groups would become acceptable to them. Their reserve might be accounted for by their unfamiliarity with this way of working.

The arrangement of the chairs can have a positive or a negative impact on how a conversation proceeds. In all situations I made sure that every trainee in each activity was seated in a 'first-rate' place. Meanwhile, the trainees had come to understand the intervention of arranging the seats for the morning and afternoon assemblies. But they did not as yet grasp the procedure of

working together in sub-groups. And since repetition yields results, it usually was eventually the trainer(s) who 'organised', with a wink and a little comment, the most functional and therefore motivating arrangements. It was impossible for the trainees to discover and apply all the details all by themselves in just sixteen days of training.

Now that the quantitative part of the homework assignment had been drawn on the floor, trainees evinced surprise at having gained a new insight in this way. For they did not so much give a summary of the trainer's knowledge in their presentations as knowledge that they did not possess earlier but had now acquired themselves. This experience yielded material for discussions about trainees' own living environment as well as material to increase the training groups' cohesion. This again had a positive effect on trainees' motivation to take on responsibility for fleshing out the training programmes.

Any training in coaching and supervising sociotherapy groups in post-conflict contexts requires examples from the local area. The presentations of the sub-groups' results more than met this requirement. For instance, the trainees learnt that tensions tended to increase in families when both spouses worked outside the home. During the home visits they heard stories of men hectoring their wives if they did not keep house properly, in their view. But if both spouses worked outside the home, there was less excuse for lecturing the women. The trainees noted that pyramidal families tended to much less engage in dialogue. They found that children in this type of family were not taught by their parents, that they were shown less love and that there was hardly any mutual trust. The trainees described the open families in opposite terms, using the words 'free' and 'democratic' to make clear what they meant. It had struck the trainees that the children from closed families were sometimes asked for their opinion, sometimes not. And they noticed that in closed families, children as a rule do not take part in conversations. They proudly recounted how the families had appreciated their visits.

The trainees' 'simple investigation' did not make clear whether they mentioned the specific tensions in families because these were frequent or because the training had given them the mental space (courage) to note the tensions between spouses. Whichever, the trainees had an important point. It is tempting to offer knowledge on this subject that has been gained in very different places in the world. The point of the sociotherapy training is that the trainer leads the trainees to learning by doing situations where they first learn for themselves how to attribute meaning to the situations they observe as well as any changes in them.

The floor drawing and the ensuing discussion showed me that the trainees had little difficulty in linking up their knowledge of the principles and phases of a group process and the games to the new information. The homework assignment had, as it were, provided them with material that helped them discern a 'basic pattern' or template. And this brought home to various trainees in a number of places how they could take on responsibility.

The review of the homework experiment showed how proud the trainees were. They had practised what they had learnt and had 'just like that' proved to themselves that they had been able to carry responsibility and discharge it well.



Photo 9

Author's own collection. Results of the homework assignment. Kakata, 2013

8.6 The exercises and their significance for learning about the phases and principles

The power of repetition enabled the trainees to predict what questions I was going to ask when I drew the circle and the phases. They had also learnt what

there was to say about the characteristics of the development phases of a group.

The questions I asked about the phases:

- Did the explanations, the discussion of the family organisations, the homework assignment and the review meeting help foster feelings of safety and mutual trust and care, and did these bring forth new insights about respect and control?
- What examples could the trainees mention in this respect?

Questions about the principles:

- What did the trainees say about the space they took up in relation to each other as they learnt to explain and state matters clearly, learnt to conduct a conversation about families, carried out the homework assignment and took part in the review meeting in sub-groups?
- What did the trainees' answers say about learning to take on responsibility for further fleshing out and detailing the training programme?
- In what ways did the giving of explanations, thinking about family organisations, the visiting of families and the discussion in sub-groups strengthen trainees' motivation to take on responsibility for further fleshing out and detailing the training programme?
- In what ways did the activities increase trainees' responsibility for their own actions and their own decisions?

What is interesting about each reflection was that it kept providing the trainees with ever more insight into how they themselves could structure a sizable number of thought-provoking themes.

8.7 Reflections on the role of the trainer

The practicable and repeatable activities enabled me to help the trainees retain their motivation to start coaching and supervising sociotherapy groups, preferably the next day. The realisation grew that they could implement and use the method themselves if they continued to give and ask for each other's feedback while they worked in practice. As a result, my role increasingly was to encourage rather than regulate tension.

I enabled the trainees to attribute new meaning to existing phenomena without interfering with content. I visualised this in how I acted when land disputes were explained, when family organisations were discussed, when set-

ting the homework assignment and conducting the review. My actions were comparable to the role of the problem solvers in the knotting game.

I noticed that when the conflicts about land were explained at length, I found the term 'conflict' to be alarming. Until that moment I had assumed that I would have to bear in mind that every conflict about land might be a highly charged issue involving large pieces of agrarian land (sources of livelihood) that over time had been seized and were now reclaimed. My new understanding meant that I would be able to zoom in on the term 'conflict' using different questions in the remainder of the training; could what is termed a conflict also be defined as an everyday problem, a dilemma or a controversy?

8.8 In conclusion

The moment that trainees could define the meaning of describing and explaining situations using the exercises marked the beginning of a reduction of the disruption in their world. They found that they were now better able to maintain distance from hearsay stories. The trainees were encouraged to think about forms of family organisations that affect the development of (self)confidence. The families they visited had appreciated their visits and the trainees were surprised to see how many answers they could come up with. The trainees learnt from each other as they shared and presented their findings. Pleased, they realised how this training stimulated their brain.

When explaining the land disputes and talking about the family organisations, the trainees discovered that new insights may be at odds with what is familiar to them from their own socialisation. And, that the new understandings of the different types of family organisation offered prospects for the protection that was desired. This provided insight into the difference between the tradition, where in all areas of life leaders decide what is best for people, and the sociotherapy trainer, who would not point out the 'best' type of family organisation.

Their visits to over 400 families taught the trainees that there is a connection between land disputes, family organisations and decision-making and control. They saw that the tradition of primogeniture, including the elders' customary right to make decisions, maintains the hierarchical forms of family organisations. And they understood that this was a pattern that was about to burst its seams, eventually leading to smaller and larger-scale conflicts.

This chapter has demonstrated how the homework assignment about family organisations and the review meetings makes the sociotherapy method both special and ordinary. It is special because the trainees developed sufficient confidence in the method, in themselves and in each other to dare meet the challenge with all its unsettling aspects; it is ordinary because the experience was gained in their own environment.

Step by step and proceeding methodologically, trainees found that the unwritten values and standards from their own socialisation may be important but must never be normative in their actual practice with sociotherapy groups. And that delegating responsibility increases certainty as to the direction that social change should take. The use of symbols with the family organisations visualised trainees' own perceptions, and thus a foundation was laid for a discussion, later on in the training, about the sorrow and distress felt by families and for change-oriented questions.

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Recommended reading:

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9

Making and Playing a Game of Happy Families

Up to this moment in the training process I was still keeping a fairly close eye on how decisions were made. But when I set the trainees the task of making and playing a game of Happy families, I situated myself at a greater distance.

9.1 Basic assumptions

- Trainees perceive and understand pleasant social relationships as both instructive and as a counterbalance to the burdens of a disrupted social environment.
- Cooperation features an integrated application of what has been learnt (cf. Box XIII in section 2.3.2).
- The trainees work at the task as an effective group (cf. section 2.2.1).

9.2 Making a game of Happy Families

1. As they make and then play a game of Happy Families about sociotherapy, trainees take on three roles:
2. The 'architect' of the game who works in cooperation with the others, the designer, the maker, the team member who asks to have the game explained, the team member who explains the game, the team member who disagrees.
3. The player, supporter, opponent, winner, loser.
4. The reflecting observer.

The occasion for asking the trainees to make a game of Happy Families

I first of all chose this task because of the multifaceted and creative way in which the trainees can revise course material. Secondly, the game of Happy Families boosts (independent) integrated application of what has been learnt and provides trainees with more practice in discerning all kinds of interrelationships. Thirdly, the game can be used with the first sociotherapy groups.

Introducing making the game

I introduced the making of a Happy Families game as a way to revise course material. As I was saying this, I noticed that the trainees in the first training group did not know this game. The same happened in each subsequent group. As a result, I first had to explain the game before I could set the assignment (cf. Box XXV below). I explained that a game of Happy Families consists of about 16 sets (families) of 4 cards each and that each set of 4 cards has features (illustrations, or words) for one and the same subject. In summary, a game has 16 times 4 cards with sociotherapy subjects, like, for example, 'family organisation'. Every card for the same subject (from the same family, or set) thus shows 4 features of family organisations. I told the trainees that they could find these features in their notes and in the flip-over sheets hanging on the wall.

Box XXV Assignment to make a game of Happy Families about the subjects dealt with so far

- | |
|---|
| <ul style="list-style-type: none">• 1st part of the assignment (150 minutes, divided over several morning or afternoon sessions) |
| <ul style="list-style-type: none">• The group members together find the subjects for at least sixteen sets, or families• They then pair off and sit at their own table• The trainer explains the game and provides all the material• Each pair chooses a few subjects that they want to make a Happy Families game with• For each subject, each pair designs and draws a fitting symbol on a paper, cuts this out and glues it onto the game cards• Each pair thinks up four features (illustrations, words) for each family (subject)• The features are written in a different order on each of the four cards that make up one family |

Execution

Some trainees suggested doing the assignment at home. I explained that they would then lose out on the opportunity to learn in groups and to get a good, clear idea of what talents they as a group possessed. This last was also useful because in due course decisions would have to be made as to the best composition of the teams that were to work together.

I suggested that trainees first use their memory to find subjects for the sets of families before they looked in their notebooks. The nervous reactions made clear that the task was interpreted as a (mock) test for their final certificate. I cleared up this misunderstanding but it then turned out that not all trainees had understood my introduction. I therefore drew an example of a Happy Family card with, at the top, the name of the subject (the family), together with a fitting symbol and, under it, the four features in four separate lines. I explained that the separate lines on each card had to be in different orders. Even after this clarification, it took more time than I had envisaged before the trainees could make with their hands what their eyes had seen. They found it difficult to understand that the number of features had to be limited to four and that they then had to write the features in a different order on each card. I encouraged the pairs to try to get going because they would notice they would get the idea as they went along. Notebooks were produced and compared as trainees began to bring some coordination to their efforts. Not everyone had been able to keep up with the pace with which a subject had been dealt with, and for this reason, trainees' notes were not always complete. And where notes had been made, comparisons sometimes showed that they had been understood differently. Trainees thus decided to first rectify any errors or omissions.

I was occasionally asked by a pair to once more repeat the steps they had to go through. When compared to the start of the training, women now asked questions sooner and more easily than men. They received the approval and appreciation of the other trainees. Working together cooperatively, with an intensive exchange of ideas and memories, each pair took, on average, forty minutes to find fitting features. Some pairs struggled a bit more than others to create a family (set), while older trainees often had less trouble finding four features.

A high-energy atmosphere had come about: trainees looked at each other's work, explained things to each other. Some strove for perfection in finding and drawing the right symbol, others took a more free-and-easy approach. I

noticed that not everyone was good at using scissors. And, that some (those, for instance, who were quick to make a decision) had great difficulty keeping track of their various activities and keeping an overview. Their work table, and the floor around them, was strewn with successful and not-so-successful drawings and scraps of paper. Some pairs had cut out their cards in different sizes. I concluded from this that they had not grasped that this game of Happy Families resembled a card game they were familiar with. After my feedback they cut out their cards in the same size. The older trainees noticed, with flashes of humour, that some youths had caught on sooner what they were meant to do with the cards and that they were better at keeping the overview.

Trainees' working together revealed the differences in their cooperation. Here, 'colleagues' encouraged each other, with both taking part in the making of the cards. There, one of the two appropriated all of the activity while the other let this happen. My feedback was to tell them what I saw and to ask them if they had indeed divided the tasks thus. The trainees might accept my feedback with a smile but also became slightly insecure. How to proceed now? I suggested that they think back on the beginning and then figure out how the unequal division of tasks had come about and how it could be rectified. Feelings of insecurity diminished and a broad smile appeared. All trainees evinced great concentration as well as a great deal of enthusiasm and fun while making the cards. Not wanting to waste any time over breaks, they asked if the refreshments could be brought to the 'work tables.' Their eagerness made me grant the request and give them mostly encouraging compliments.

On average, the process of making the Happy Families game took two hours. When it was on occasion impossible to round things off on one and the same day, the trainees came back the next day well before the official starting time.

9.3 Playing Happy Families

Also when playing Happy Families, trainees internalise the subjects and they practise working together in a fun way. Trainees take on the roles of player, supporter, opponent, winner and loser.

Introducing playing the game

I had planned one hour in which to explain the rules of the game and to play it (cf. Box XXVI), assuming that the rules would become clearer as trainees went along.

Box XXVI The rules

2nd part of the assignment (90 minutes)

- The cards are shuffled and dealt among the pairs.
- A family consists of four cards from the same subject.
- A pair that has a family makes this known and puts the family aside.
- It is not allowed to look in other players' cards.
- A pair starts by asking another pair if they have a card with a feature of a certain family.
- If the asked pair has the card they give it to the requesters.
- If the asked pair does not have the card, it is their turn to request a card.
- Players cannot ask for a card if they do not have a single card from the family.
- The pair with the most families wins.
- The game is reviewed.

Execution: the rules and playing the game

The questions about the rules that arose made me see that I had made a 'mistake'. Where I had assumed, when explaining the rules, that playing the game according to the rules would be instructive fun, the trainees wanted to thoroughly understand the rules in order to win. I also had to clarify the rules because the trainees had difficulty imagining what playing the game would be like. To support my explanation, I wrote the subjects (families) on flip-over sheets and pinned these up on the wall. Then, play could start. With other groups I put the sheets with the subjects on the wall without first being asked to do so. The co-trainer spread the cards out on the tables. Was that what gave the pairs in the subsequent groups confidence that the rules would become clear as they played? The trainees evinced pride at seeing their Happy Families game completed.

Having learnt from these first experiences, I stressed in subsequent groups that players could not ask for cards if they did not have a single card from that family. Play took two hours, on average.

Playing in the role of player, supporter and opponent, winner and loser

The playing pairs requested the first cards effortlessly and, following several attempts, managed to trace the pair that had the desired card. Quite a few players handled the cards clumsily, and finding a requested card was awkward and slow. It did not occur to them to hold the cards like a fan, and they used hands, arms as well as upper legs to keep the cards close to them. Even so, there were always some players who tried to sneak a look at other people's cards.

As the game got going, players became fanatical and tension mounted. To a great deal of laughter, all players kept a close eye on the rules. In the first group some players requested cards from a family that they did not have any cards from. When their opponents found out about this, they believed the others had done so deliberately and they very loudly stated they would not accept the excuse that they did not know the rules. Asking each other's understanding for an 'incorrectly' understood rule usually was in vain. Players about to lose, or win, a suit appealed to the trainer for mediation. I explained that I would not intervene because I wanted to avoid all suspicion of bias. Players resumed their game after they had cleared up 'the misunderstanding' loud and clear together, and the rule was accepted by all.

It sometimes happened that the players automatically pointed to each other in reproach when there was a 'misunderstanding' of the rules: the misunderstanding had obviously been caused by the other party. And some players blamed each other when a disagreement arose over a request for a card. The other players tried to step in, and a cacophony was the result. Play resumed even though officially the training day was over. After a second emotional incident, the game, and the day were wound up. A delegation from donor Cordaid visited one of the groups and took part in (a part of) the training. The Cordaid workers thus received information about the content of the training via the players. The presence of the delegation did not influence the players as they challenged the boundaries of the rules. The players responded spontaneously and clearly to any transgressions.

When preparing the logistics of the game with the first group, I had rather thoughtlessly handed out differently coloured sheets of paper, with the result that some cards became easily recognisable. Some pairs managed to make good strategic use of this.

The players of all eight groups greatly enjoyed the game and without exception were very highly committed to winning the game. They yelled out excitedly from the first to the last win of a family. The youngest trainee, who played together with the financial representative from the donor, was able to remember the route of the cards and won the most families. She beamed with pride.

9.4 Trainees' reflections

Reviewing making and playing the game

The trainees now spoke from the perspective of experienced observers. They said that they had detected new talents. One woman recounted how she now knew that she could also draw. Another woman said: 'I used to work the land and now I'm doing this.' It came as a surprise to her that she could also be a teacher. One man concluded with delight that the game of Happy Families could be about a range of subjects, including the neglected children that he worked with. A discussion ensued where the trainees asked themselves and each other all sorts of questions, as, for instance, about their behaviour in relation to fiancé(e)s, marriage partners and other friends and relatives. It was recalled how the trainees encouraged each other, how full their days were, and how the trainees had worked much more than the trainer.

Staff members remarked during the review meeting that the group struck them as purposeful. They had developed cooperation. One member reckoned he had learnt more about war victims in the training than he had during his psychology studies at university. I acknowledged and downplayed his statement: this is about the learning by doing method, which takes shape when the game of Happy Families is made and played. What is learnt cognitively over the years at university is turned to practical use during the training.

The trainees were able to answer the follow-up questions from the donor's delegation members accurately. They explained where the significance of the

sociotherapy method lay. At the Cordaid delegation's request, they elaborated on how the exercises can be used in their own socio-economic units, in education and pastoral work, with psychosocial aid and in their own families.

Closing the day after the game of Happy Families

The trainees recounted with humour that the mood temperature had risen beyond 100 degrees and with pride that the training method was proving an enriching experience. One woman said that people close to her had noticed that she had started to behave differently. She had allegedly become more open, grumbled less at home and she was more caring towards others. 'Because of this method I can again think more about things. I'm learning a lot about myself.'

I used these delighted reactions to show that there was more than one way of leading the morning and afternoon assemblies. I asked a trainee what she had learnt that day from the colleague sitting next to her. The trainee's defensive response was that it was not for her to say something about another person. Another trainee, who had more often shown his willingness to speak up, did give an answer. He used the opportunity to call the group member next to him 'inspiring': 'I've learnt that my neighbour is an inspirational man'. One of the trainees confessed that she had thought that the trainer was prejudiced against her. She said that she had meanwhile noticed that this was not so.

On occasion, it so happened that there was no time left for a proper afternoon assembly. I would then ask the trainees to sum up that day's experience in one word. The words used included: 'good, excellent, pleasurable, emotional.'

The morning assemblies following the game of Happy Families

The trainee leading the morning assembly spent some time looking back on the previous afternoon and as she asked a variety of questions she demonstrated that she had internalised the way to learn methodically from experiences. The trainees answered her that making the game had proved difficult. Some had had to think long and hard to find a fourth feature for the set 'families'; others had had less or no difficulty. It was admitted that naming symbols was not something they did every day, and someone had found it hard to draw a weeping woman. Looking back on how the game was played, one

trainee recounted how somebody's body language can be 'read' to deduce if s/he has the requested card. Another trainee wanted to know if a player had wanted to look in his neighbour's cards (and cheat). The player accused of cheating answered that there is an 80% chance of winning if you establish eye contact. A question from yet another trainee was of a different nature: 'Is it difficult to devise games for the group?' The question was for me. I said that I didn't find it so hard, firstly because games from my childhood kept coming back to me and secondly, because I was always alert to new games if they presented themselves.

The trainees who had clashed with each other on several occasions apologised for the tumultuous ending of the game. They now related respectfully that it had been hard to accept advice that they had not asked for. It was democratically decided to play the game again, in the same pairs, and I accordingly scheduled it for the day programme. Trainees realised that this kind of offloading emotions might well occur in the sociotherapy groups too. And that the way in which the tension was now being handled was, in fact, a good example.

The trainees integrated aspects of the training into their reflections on how the game was played a second time. They related how, the day before, they had stopped listening and had thrown all rules out of the window. Someone remarked that everyone in this training could freely give full rein to their emotions without being excluded from the action. As they made and played the game of Happy Families, trainees had learnt to brainstorm, to draw, design and make a game.

9.5 The trainer's reflections

In the next section, I elaborate on my reflections, using the models outlined earlier in this handbook.

- During the training practice I kept a daily record of the individual development of each trainee's level of functioning. This also gave me insight into how a group on average functioned as a whole (cf. Box XIV in section 2.3.2.). It further allowed me to assess any differences and similarities in how the various groups functioned.
- I based this instrument on the 'heart, head and hands' evaluation model (cf. Box XIII in 2.3.2.).
- In this section I have structured my reflections according to the model below. My earlier description of the model is here elaborated on further.

The columns under the headings 'heart, head and hands' in the first row explain what the various parts of the exercise focus on.

Table 9.1

Evaluation model for the process of making and playing a game of Happy Familie

Orientation on the 'Heart' Perception and experience	Orientation on the 'Head' Cognition	Orientation on the 'Hands' Behaviour and skills
Making the game <ul style="list-style-type: none"> • Designing • Constructing • Sharing emotions 	Making the game <ul style="list-style-type: none"> • Sharing memories • Aligning • Filling gaps • Ordering • Designing symbols • Adding detail • Making combinations 	Making the game <ul style="list-style-type: none"> • Learning through appreciation • Adopting others' ideas • Making the cards (handicraft)
Playing the game <ul style="list-style-type: none"> • Respecting rules • Controlling emotions 	Playing the game <ul style="list-style-type: none"> • Tracking • Remembering • Making combinations 	Playing the game <ul style="list-style-type: none"> • Showing sportsmanlike behaviour • Showing sportsmanlike behaviour with respect to rules
Sufficiently mastered skills: <ul style="list-style-type: none"> • Articulating the experience of making and playing the game • Attributing meaning to the experience of making and playing the game • Cooperation in encouragement • Creating a sense of self-confidence • Belief in one's abilities 	Sufficiently mastered skills <ul style="list-style-type: none"> • Articulating what is happening or what a situation is like • Putting a complex concept into words • Recognising knowledge gaps 	Sufficiently mastered skills <ul style="list-style-type: none"> • Giving positive attention to team members • Learning from examples and behaviour • Recognising and identifying changes in one's own and in others' behaviour and accomplishments • Showing tact when dealing with problems

*The trainer's reflections on the process of **making the game** with an orientation on the 'heart'*

Trainees have learnt from the activities and have sufficiently mastered the method if they:

Can express their perception

With their explanation of what they meant by 'revision' the trainees clarified their wish to complete the training with a certificate. If a perception can be expressed, this is a sign of trust. On the other hand, increased trust shows how easily misunderstandings may arise if the need to formulate statements very precisely is felt less urgently. Increased trust also makes it easier to rectify any misunderstandings about notions assumed to be common knowledge. Giving expression to perception is relevant since it offers starting points for cooperation. It could now, for instance, be pointed out again that when people cooperate, misunderstandings may easily arise if the colleagues involved adopt different frames of reference.

The trainees reported that people close to them had observed positive changes in their behaviour, which attests to a degree of confidence in their fellow trainees as well as in how the home environment appreciates their activities; the trainees had anticipated that this statement would earn them respect and understanding. The trainees and sociotherapy thrive if the home environment signals it is deriving benefits from their efforts.

Where trainees had not quite finished making the Happy Families game on the same day, they returned the following morning well before the official starting time as they were eager to get the job done. Earlier I had already scrapped a programme part because another discussion subject presented itself. I noticed that the trainees were very curious to know what this programmer part was about and that they kept asking if it could not be dealt with after all. And then arguments would fly back and forth. But now, they solved the issue: they came in early and to me, that meant they were eager to learn and appreciated the content of the training.

Can attribute meaning to experience

The trainee who observed that she had always worked the land but was now learning to be a 'teacher' shared with us what impact the many new impressions exercised on her self-perception. This observation was meaningful in two ways: a) the trainee does herself a favour and allows in any reactions from colleagues, and b) this example is a source of course material as it provides everyone with an insight into how a process of meaning attribution develops.

Discipline as a concept was hardly brought up directly during the training. Yet the trainees showed great discipline in making the game of Happy Families. And they experienced pleasure and joy carrying out the complex assignment. If trainees can attribute meaning to their experience in word and deed, word and deed coincide. And then, the sociotherapy method inspires confidence.

The trainees gave expression to their perception that they worked much harder than the trainer. Here, they demonstrated their willingness to experiment with the principle of equality.

Cooperate

The trainees demonstrated the degree to which they had mastered the art of cooperation in that I no longer had to find appropriate moments for giving feedback on 'natural' behaviours that stand in the way of effective cooperation. Feedback could now be given at any moment.

Develop belief in their own abilities

The trainees told each other proudly why they were very content with the training. This imparts confidence and certainty to the insights that have been developed in the safe (training) space. This, in turn, increases the chances that these new insights are disseminated in a balanced way.

*The trainer's reflections on the process of **making the game** with orientation on the 'head'*

Trainees can define a symbol and its features

Most trainees had few problems coming up with a symbol and explaining a topic from sociotherapy. If trainees can work with symbols in the training space, then they can also use these outside the training. Using symbols helps memorise new ideas and notions.

The trainees had learnt to identify subjects; working energetically and cooperatively, they managed to reach agreements within the time scheduled for this. Their manner of cooperation showed that the trainees could explain to each other what they did, or did not, consider a subject while they were devising, aligning and designing the game. They had grasped what the subjects of the sixteen families were to be about.

Put a complex concept into words

Many trainees were unfamiliar with handicrafts, and did not know how to handle scissors. The cluttered tables with successful and less successful drawings lying about higgledy-piggledy attested to this. Some trainees had trouble keeping an overview of the symbols and the features that had to be stuck to the cards in the right place. The elders (who were teachers and had attained higher education) noted that younger trainees were quicker to catch on to what they were supposed to do with the cards, and that they were more skilful at keeping an overview. They showed that they could discern differences, without considering these a problem. To facilitate sociotherapy it is not necessary that one can handle a pair of scissors. But it is important to understand that a low level of eye-hand coordination may mean that a player needs more time to find a requested card during the game.

Can identify knowledge gaps

In order to work together making the Happy Families cards, the trainees compared notes and noticed that there were big differences in what everyone had written down. They needed to fill in the gaps together first before they could continue. This situation appeared to reflect differences in educational level as well as in vocabulary. Making the Happy Families cards evoked some cognitive tension but it taught trainees that pooling ideas may help achieve a certain measure of agreement.

*The trainer's reflections on the process of **making the game** with orientation on the 'hands'*

The trainees can give positive attention

When female trainees now asked for help, the other trainees responded with positive attention. The equality principle was not only appreciated, it was practised as well, both audibly and visibly. This example shows that the trainees approached the relations between men and women differently now, in other words, had internalised the principle of equality. Such changes endure if role definitions, group members' expectations and values change simultaneously.

They can learn from examples and exemplifying behaviour

The knowledge and accomplishments that some (but not, as yet, all) trainees possessed were shared as they watched each other and followed each other's example. Doing a complex task in groups bestows meaning on everybody's input and, in particular, promotes a broadly based development. This implies an atmosphere of trust and care, of people looking out for each other, that facilitates their efforts to regain dignity in post-conflict conditions.

They can show tact with problems

The trainee who had earlier used his well-educated position to 'go it alone' and had removed another team member's rule on the flip-over because he did not find it a useful contribution now shared his insights in tactful and educational fashion. This demonstrated that increased insight and skills leads to different choices and that everyone's efforts deserve equal respect.

*The trainer's reflections on **playing the game** with orientation on the 'heart'*

The trainees can give expression to their experiences

The trainees indulged in the fun of playing and the pairs that had found a family believed without scruple that they were the 'best'. Such is the effect of providing opportunities for gaining new experiences.

The game saw a mix-up between the classical interpretation of revising and testing (showing off ready knowledge and receiving a certificate in reward) and the idea of revision through learning by doing with a view to discovering interrelationships in the course material, which caused some misunderstanding.

They can give meaning to what has been experienced.

During the game, the trainees manifested themselves as either advocates of a flexible use of the rules or supporters of a more rigid application. This gave their play a boisterous, fanatical character. Obedient questions about what is 'best' disappeared into the background; every trainee knew that s/he wanted to be 'the best'.

Neither the winning nor the losing trainees were amenable: they went to the trainer for arbitration. Their behaviour reminded me of my experiences in the Netherlands, where war survivors also showed another, surprising, side of themselves when playing a game and coming 'to life' as they enthusiastically and with humour challenged the rules of play.

Games with different rules counterbalance the burden of living in a disrupted world. They also provide metaphors that help trainees view things in a different light. I added a question to my baggage: What makes trainees enquire from the trainer which family organisation is 'the best' while in the game they know exactly that they want to be 'the best'?

They can play games together

In the group where the game had ended tumultuously and the players played it again the next day, the trainees afterwards showed understanding for the emotions that had cropped up as they behaved differently from usual.

Develop faith in their abilities

In the game, all trainees wanted to be the best. This came as a surprise to me because in other training situations I had constantly been asked to say what the best thing to do was.

The trainer's reflections on the process of playing the game with orientation on the 'head'

Trainees can identify and define what something is

The educational meaning of the assignment was identified by the trainee who understood that a similar game of Happy Families could also be made for the topic 'care for orphaned children.'

They can identify knowledge gaps

Education aimed at amassing knowledge pays less attention to developing eye-hand coordination. The learning by doing method, however, inevitably highlights this development. Trainees failed to see a connection, in the game, between their poor handicrafts and the way they handled, found and gave the requested cards. It is perfectly innocuous not to be able to find and give a requested card. However, lesser developed gross and fine motor skills become less innocuous in the harsh reality of surviving in the wake of mass violence. If what has been learnt cognitively is not applied and used in actual practice, disarray and chaos born from ignorance and inability continue to exist (too long, often). This insight is important for two reasons. Firstly, it explains that there are limits to what trainees can use or apply after short, cognition-oriented training programmes. And secondly, it indicates that many who live in a more comfortably organised and fashioned world all too often view disorder born from inability too easily and unjustly as bad faith and corruption. Development aid may well be more effective if children's handicrafts and creativity are developed in primary schools with the provision of craft toys and materials. Once adults have experienced and got to know the learning by doing method, this will be a catalyst for starting conversations about this type of insights.

They can identify what sort of behaviour goes with which development phase

After the game that ended tumultuously the trainees were able to identify emotions and behaviour. The tension that had arisen was deflated without the trainer's mediation and it was noticeable how insights gained in previous exercises were now applied. The trainees gave words to the turbulence and articulated for themselves and the other trainees that internalising new insights is both an instructive and an emotional process that is enriching.

At the start of the training, trainees had no clear perception of the difference between emotions and behaviour (they could not describe the emotions and behaviours that went with the development phases of children and adults). By means of role-plays that focused on their doubts, the trainees learnt that sorrow and anger are emotions while isolating yourself and acting destructively are types of behaviour.

*The trainer's reflections on the process of **playing the game** with orientation on the 'hands'*

The trainees can show sportsmanlike behaviour

The trainees showed moderately sportsmanlike behaviour that they compensated by proudly disclosing, during the review session, the secret of finding the right card.

They learn from role model behaviour

The trainees supported each other's flexible or strict attitudes according to their position in the game. Those intent on winning considered this strategy sportsmanlike. This behaviour was not identified in the review discussion.

They can identify changes as to behaviour and accomplishments

Trainees allowed themselves great liberty, in the game, to challenge their opponents. They did not identify their challenging and provocative manner of playing as a change in behaviour or accomplishments. For me, the new 'bold'

atmosphere meant a challenge to move on from what had until now been a protective way of rounding off the day.

I was pleasantly surprised when the trainee sitting next to me seized the opportunity to convey in word and deed that her mistrust of me had been replaced with trust in both the training method and the trainer.

And show tact with problems

In one of the groups the trainees assured the trainer that they would be able to resolve any tension that arose during the game together. They demonstrated how they dealt with problems tactfully by proposing that they play again and this time keep to the lessons they had learnt in the training.

9.6 The significance of the Happy Families game for learning about the phases and principles

Making and then playing the game of Happy Families was a complex task. Trainees demonstrated their ability to apply the sociotherapy principles and recognise and use the development phases. They had learnt all this in twelve days of training, spread over eight weeks. The trainees had experienced and consolidated feelings of safety, trust, care and respect. Equally, they respected each other's say, which increased their faith in reciprocity. Carrying out the complex assignment spurred the trainees to contemplate together the nature of such pyramidal organisations as families, church communities, associations and local authorities. And they thought about the sociotherapy method and its development-oriented character. The trainees were enabled to weigh all kinds of factors and elements they considered useful in their work as sociotherapists.

9.7 Reflections on the role of the trainer

Reflecting means learning from and about one's actions. When I was looking for (discussion) leads and useful, instructive exercises I took into account the development phase that a group had reached. I used exercises to teach the trainees to define the skills that careful supervision of sociotherapy groups requires. A tool I frequently turned to was the circle representing the development phases but writing down summaries of trainees' answers likewise

proved useful. I also drew symbols to summarise answers with. The end result was a poster that showed the method at a glance.

It takes service-oriented skills to teach trainees to coach and supervise groups with care and concern. The strength of my service-oriented training lies in my curiosity about the steps trainees take in internalising new skills and behaviour. But it is also in my ability to arouse trainees' curiosity about my way of working and exercises.

The Happy Families game task served both as a way to acknowledge the painful past and to structure the complexity of the present. My curiosity-arousing approach helped trainees increase their skills and knowledge through play and become an effective group. This approach also helps to avoid that trainees carry 'the burden of the context's past' themselves. The interactive process also fed my motivation.

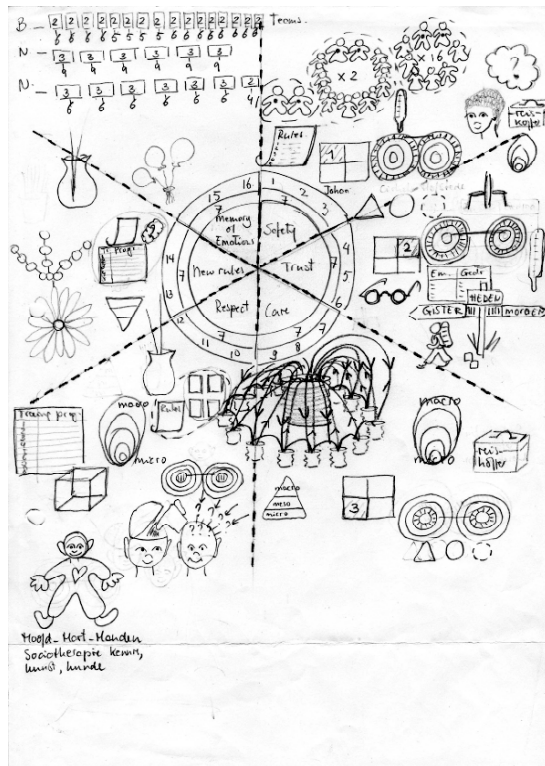


Photo 10

Author's own collection. Collecting symbols.

9.8 In conclusion

Making the game of Happy Families gave the trainees a chance to experience what they had learnt. Working in cooperation, they made a game that they had not been familiar with but into which they managed to integrate the subjects they had covered in the training. This shed light on what each trainee could handle and would venture on, where the knowledge gaps were, what someone was good at and where trainees were important to each other. A creative activity had taught the trainees how to practise open communication in cooperation.

The fanatically played game disclosed other sides to the trainees; the women and youths showed that they too had strategic skills and negotiating tactics. The winner of the game could not be predicted on the basis of status or social position. Motivation to win was high everywhere, paralleled by a sharp focus on the rules that were followed flexibly or strictly (depending on one's chances of winning or losing). I noted a change at this point: trainees' uncertainty as to what was 'best' was replaced by their wish to be 'best'. The question remains how to explain the players' fanaticism: is it part of who the trainees are? Part of their tradition? Should it be seen as a response to the tension brought on by the new freedom of choice? Or did their fanaticism to win function as an outlet for the prevailing lack of control? These questions are proof that the sociotherapy training arouses curiosity and keeps raising new questions on the part of both the trainees and the trainer(s). Making and playing the game and reflecting on the activity helped the trainees internalise ways of smoothing social relations.

This chapter showed how participation, if accompanied by safety, trust, care (in the sense of looking out for each other) and respect, leads to communication and cooperation. The trainees radiated joy, were increasingly motivated (witness their disciplined use of the remaining time) and were able to deal with skill problems and misunderstandings together. The trainees now knew that they could meet the challenge of supervising groups with sufficient self-confidence as well as with plenty of exercises and activities. The next chapter describes the last preparations before the trainees set to work in practice.

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10

Getting Ready to Practice

The moment had arrived for the trainees to carry out two assignments and learn about functioning outside the training room. In the first assignment, trainees work in pairs to decide on the recruitment criteria that their new colleagues will have to meet (and where they themselves will learn to recruit and select colleagues). The second task requires the pairs to design an eight-day training programme for the new colleagues and then facilitate it. Both assignments are completed in the training room during the last four days of the sixteen-day stage of the training.

In both assignments, the pairs prepare to coach and supervise a group that is not familiar with sociotherapy. And they also practise having a say in the public space. This marks the moment when trainees cross a cultural border. They move from the role of a trainee learning about sociotherapy to the role of a beginning sociotherapist who will stay in training for another 33 months. From now on, I refer to the trainees as ‘sociotherapists in training’.

Facilitating programmes of their own making marks the start of a next stage of training, for which twelve days (eight days of facilitating, and four days of reflecting on the facilitating) are reserved, out of the 120 days of trainees’ own training days (for this, see the Preface). Facilitation to the new colleagues is beyond the scope of this handbook. This chapter describes how the two tasks were completed.

10.1 Basic assumptions

When I shifted the focus from the safe training room to trainees’ home world, I supposed that crossing a cultural border would increase tension. Still, I assumed, when giving the two assignments, that:

- The sociotherapists are sufficiently capable of taking an activating role in their future practice.
- The sociotherapists have learnt that asking questions is key to the sociotherapy method, and these questions give the new colleagues (and later,

participants in sociotherapy groups) an opportunity to establish contact and to find answers of their own, 'as if in the yard'

- The bandwidth (spectrum) of what the sociotherapists can and want to and 'are allowed to' do in the local context will be determined by themselves.
- The trainer will continue to regulate and shepherd the tension that arises in the public space as a result of the introduction of the phases of having a say and handling emotions.

10.2 The recruitment criteria

Occasion

What first of all occasioned the assignment of formulating recruitment criteria was the meeting with pastor Ngendahayo in 2004. As the pastor of the Anglican diocese in Byumba, it fell to him to listen to people's stories about their lives after the genocide and to comfort and encourage them. He gave them advice based on his own common sense and on Bible quotes. Tired out, Ngendahayo recounted how people kept coming back to him. And seeing no improvement despite his ten-year-long efforts, he was at times forced to lock the door to his office. My reply to his question about care provisions for refugees in Dutch clinics was, in essence, about a shift in tasks.

A question from one of the trainees provided the second occasion for the assignment: how would the sociotherapy following the training be organised, what would its structure be? Now that my understanding of what the trainees were capable of had grown, I realised that coordinating staff member Ngendahayo need not be overloaded again if the trainees were prepared to recruit the (originally envisaged large number of) new colleagues themselves. I submitted my idea to the coordinating staff member, who approved of implementing it.

Introducing the assignment to formulate recruitment criteria

I started giving the task of formulating recruitment criteria in Byumba (cf. Box XXVII). Because I feared we might run out of time (again), I set the assignment for homework.

Reactions to the assignment varied. Sociotherapists in the first two groups expressed disbelief that they could set the criteria, and they were fearful of passing by the local authorities. Groups in subsequent locations saw the assignment as following on logically from the training programme. When I had reflected on my experiences in the first groups, I realised that it was better to change the order of the tasks, with the recruitment criteria now coming after designing the training programmes.

Box XXVII Assignment to formulate recruitment criteria for new colleagues

Time: 90 minutes	
Step 1	Each pair (the future team of two) formulates recruitment criteria for new colleagues
Step 2.	Each pair presents the criteria in a plenary meeting.
Step 3	Follow the procedure that you used when making rules for your own group and step by step discuss, evaluate and decide on the recruitment criteria
Step 4	Once the recruitment criteria have been set, each partner in a pair recruits as many new colleagues as agreed

Execution

Once the sociotherapists' fears had been addressed, the pairs in the first groups took the assignment home. I noticed how other groups had no trouble carrying out the procedure.

Formulating recruitment criteria for new colleagues felt different from formulating rules of behaviour for one's own group, the sociotherapists claimed. As I checked on each pair I could link up their enthusiasm to make an immediate start with the ambivalent tension that comes with taking on this new responsibility.

The sociotherapists wrote down their agreed criteria in their notebooks within the set time.

The plenary discussion and decision-making

Discussing and reaching decisions on the recruitment criteria marked a crucial moment in the training. Precisely because this moment was so important, I was unhappy about the fact that in one of the groups the coordinating staff member did not come back after the morning break. This had already happened a few times. My unhappiness translated itself into questions I put to myself: had the decision to involve the sociotherapists in the recruitment given rise to doubts? Had I skipped over any steps? Had I missed any signs? Did this crucial moment put the coordinating staff member into an awkward position? What status would the discussion and the decisions have if I carried on? Did the assignment to delegate tasks reduce sociotherapists' feeling of safety? Was I being suspicious or did I threaten to become part of the suspicion? Would I start the discussion unperturbed or should I apply the definition of sociotherapy?

I decided to share my unhappiness about the staff member's absence in the form of a question. I asked if anyone knew anything about the absentee. My question was met with some awkwardness, possibly because it betrayed my tension? One of the sociotherapists went away to look for the coordinator. On his return the coordinator explained he had been away for good reason: from far and wide people could call in unannounced on the diocese office and these could not possibly be ignored. This explanation showed that the coordinating staff member had not yet handed over his duties from his previous job. He apologised for being absent and asked if I could take into account the cross-cultural character of this problem. I answered it would be a good idea if sociotherapists told each other if they were going to be absent so that this could be anticipated and responded to.

The sociotherapists wrote their recruitment criteria in the local language and that is why it was not me but a staff member that took them in. Procedures were the same as when the (then) trainees established rules of behaviour. To show how they might next proceed with the collected criteria, I then led the subsequent discussion myself, and followed the 7th, 8th, 9th and 10th steps from the earlier procedure. I invited the sociotherapists to ask each other questions in clarification and explanation. And I asked for arguments if they approved or did not approve of a criterion. In one of the eight groups I delegated conducting the discussion to the coordinator, for whom the sociotherapy method was a way of working that he had been looking for in his previous job (with World Vision) for years. He claimed to have been trained

in promoting participation but its implementation and application had, in practice, constantly lost out to the classical manner of providing aid.

The groups came up with recruitment criteria that had more in common than that they differed. Similar criteria included: 'A new colleague has the trust of the population, is honest, will not disclose secrets, is available, is flexible in his contacts, can dominate situations, is prepared to lend assistance, is patient with change, has attained three or four years of secondary education, lives in the intervention area and is not younger than twenty-one.

Criteria that differed: 'A new colleague is a Christian, but could be a Muslim, has a capacity to love, can accept that sacrifices may have to be made and is preferably a member of a local organisation or association. New colleagues should not be recruited from one and the same family or the same cell⁸. A maximum of eight of new colleagues to be recruited (56, in one of the areas) will be recruited from the traditional authorities.

An exchange of thoughts and viewpoints developed that took, on average, 45 minutes. One of the topics of discussion was the widespread opposition to the proposal to also recruit Muslims. The proposer of the criterion defended himself by pointing to the diversity of their society, with Christians and Muslims living side by side and argued that sociotherapy should be accessible to all people. Others were of the opinion that Christians were better at making sacrifices and loving, and therefore better at applying sociotherapy than Muslims. The proposer said, in his defence, that one could do this work without being a Christian. Others then came up with the argument of polygamy in the Muslim community. Someone else contended that the recruitment of Muslims should be opposed because sociotherapy corresponded with the Bible. The sociotherapist argued that this might lead to problems and that new colleagues should therefore be Christians. In the end, various sociotherapists sought the trainer's support to come to a decision. I seized this opportunity to say that I understood the tension very well and that in my view the discussion was consequently very useful. And referring to my earlier attitude, when choices had to be settled on, I explained that I had to stay out of the process of decision-making.

8 A cell is the smallest administrative unit in Rwanda and consists of about ten families.

Deciding on the recruitment criteria

I suggested limiting the number of criteria to the most relevant; it was up to the sociotherapists to decide this. The group resolved to vote on the specific criterion on Muslims participating in a secret ballot. This criterion did not make it.⁹ The sociotherapists publicly reached agreement on the other recruitment criteria, however.

10.3 The training programmes

Occasion

One of the goals to be achieved with the intervention was to restore dignity to the social relations in the living environments. The implication of this was that attention should be focused on the network of social relations that had been dramatically decimated and damaged through man-made violence. Working towards this goal not only made it desirable but, in particular, essential that the sociotherapists learn to develop the training programmes.

My daily recorded assessments of sociotherapists' individual development underpinned my idea that they were capable of participating in the activity of designing a training programme for their new colleagues.

Introducing the assignment to draft the training programmes

Again, I adopted a step-by-step approach to introduce the assignment (cf. Box XXVIII). The sociotherapists could choose topics, methods and games that they themselves considered important, suitable and doable to include in their programmes. They could decide to incorporate topics that they had found particularly useful or that they had understood best. To allow the sociotherapists some overview of their task, I did not as yet suggest at this stage of the training that they add new learning by doing topics or methods.

Sociotherapists in one of the training locations feared the reactions from local leaders, who might feel passed over. Elsewhere they responded, on the

⁹ When I visited the newly recruited colleagues, one year after actual practice had started, I saw a few Muslim women participating after all in the supervision of sociotherapy groups.

one hand, with surprise that they would be able to create a programme and, on the other, with curiosity about what was going to happen.

I showed understanding for the sociotherapists' surprise and reminded them of my visits to the local authorities prior to the training. And I recalled their first day of training, when they asked if they could count on assistance if and when the training was going to be implemented and used in practice. And who better to create a programme than the sociotherapists, I asked them defiantly.

In a few groups I left it to the sociotherapists to devise a structure for the programme. Looking back over this approach, I helped out subsequent groups with an example, and drew a table for any activities they wished to schedule, together with columns in which could be noted: number of minutes, executor of a part of the programme, method used and materials needed for each activity.

I sometimes suggested that the group create a seven-day (later a six-day) programme. For actual practice showed that if a few mornings or afternoons are left open, this creates room for answering newly arisen questions or, if necessary, for revising a theme. The eighth (last) day are particularly useful for a plenary meeting of the pairs giving the training and their trained groups. Organising this last day became a co-production, with input from the sociotherapists, the coordinating staff and the trainer.

Box XXVIII Assignment to draft a training programme

The assignment is to be done and completed in the fourth week of training	
Step 1	Each pair drafts an eight-day training programme on the basis of the subjects dealt with in the training
Step 2	Consult with other pairs about the progress of the draft programme
Step 3	Present the draft programme in a plenary meeting (10 minutes per programme)
Step 4	Follow the steps and procedures that you used in the rule-making activity when you discuss and make decisions on the programmes (20 minutes per programme)
Step 5	Establish what resources are required to implement the programme

Introducing the assignment to draft a manual

Sociotherapists in the groups in Kakata in Liberia were given the task to develop, in pairs, a manual for fifteen three-hour sociotherapy sessions (cf. box XXIX). The difference in assignments was due to a much smaller available budget, which also called for the trained team to start coaching and supervising sociotherapy groups directly after the training.

Box XXIX Assignment to develop a manual on supervising sociotherapy groups

The assignment is to be done and completed in the fourth week	
Step 1	In pairs, draw up a programme of fifteen mornings and/or afternoons of three hours' sociotherapy each (use your notes)
Step 2	Consult with other pairs about the progress of your programme
Step 3	Present your programme in a plenary meeting
Step 4	The programmes presented in the plenary meeting are discussed and questioned one by one by the other group members (follow the steps and procedures that you used when making rules for your own group)
Step 6	The other group members decide on each separate programme
Step 7	The pairs process all the advice and corrections given

Execution of the creative process

The surprise that the assignment elicited did not, however, stop the pairs from making a start with their training programmes. The Happy Families game was still displayed on the walls in some groups, and sociotherapists there started the extensive assignment with a smile on their face. They realised there was little time left. Pairs in all groups asked me, as I passed their work tables, to repeat the instructions. Now, the floor was all the sociotherapists; and some reiterated how strange this experience was.

The sociotherapists now leafed through their updated notebooks, consulted the texts collected on the flip-over and drew a summary table. They coordinated and aligned, gave arguments, weighed and moved the selected methods around a number of times until they were happy with it. They used these questions:

- Which subjects are best for a first day?
- And which for the subsequent days?
- Which subjects do we find the most appealing and which will we include in the draft?
- Which subjects can be left for a later moment?
- Which of us two will introduce which subject?
- Which subjects don't we quite master yet and which would we like to re-visit?

Next, it was jointly established on the basis of questions how the training was to be organised. Questions directed at me included:

- Which days of the week are we going to train?
- Where are we going to train?
- Who is going to negotiate a training room? (Facilitating the groups would, where possible, be done outside the training room).
- How much can we budget for the rent of a training room?
- When is the last day of training?
- On which day of the week do we plan the refresher day for ourselves?¹⁰
- Do the authorities know that we are coming to their villages?

At the end of the day, the contours of a sociotherapy training programme had emerged, including: rules, games, the group phases and principles, prayer, morning and afternoon assemblies with everybody sitting in a circle, various assignments, homework, a discussion about the meaning of playing games, role-play, dialogue, types of family organisation, reflection, the exercise describing pictures, the exercise about emotions and behaviour, a focus on socialisation, on social systems and identity, and a visit to a gacaca court.

When doing the assignment some pairs had difficulty dividing tasks equally. This demonstrated that understanding and appreciating new concepts does not 'automatically' lead to their implementation. I saw how, as the pairs consulted each other, various academically trained sociotherapists on their own initiatives emerged as patient questioners and advisors. And there were pairs who wanted the trainer's reassurance when they had finished a part of the training programme: 'Is this right, as it should be?' It was only once or twice that a pair needed more than average assistance. In one group the co-trainer

¹⁰ Each pair (occasionally foursome) facilitates the new colleagues to be recruited in 4 weeks, 2 days a week. In each of these 4 weeks, 1 day is reserved as a refresher day. During these 4 refresher days, the whole group of 32 or 24 or 20 sociotherapists looks back on training the new colleagues, with the aim of learning from each other's experiences, and discussing and settling any organisational issues.

interrupted work on the exciting assignment with the question if sociotherapists wished to carry on or wanted to do a game first. They chose to have something of a break. The sociotherapists made a memory game and voiced their surprise at their own creativity.

The training programmes were drafted with great focus, concentration and commitment. Again, the sociotherapists did not want to take time out for a short break. I wrote down the organisational issues: these helped me prepare the agenda for the refresher days.

*Execution: the process of **decision-making** about the drafted training programmes*

The six pairs in each group were given ten minutes to present their draft to the group. Then there were ten minutes for asking and answering questions.

In those groups where the male sociotherapists 'obviously' were the ones to speak out first, I asked everybody questions about this kind of behaviour. Then, the men would make way, usually with a smile, for the women who then took the floor as well. The many questions that the sociotherapists asked each other were welcomed and received with approval. I inferred from this that, in contrast to the first training days, they now understood the reinforcing effect of these questions. The sociotherapists demonstrated visibly and audibly what they had learnt. The questions asked were:

- Haven't you got a rather packed agenda?
- What is your goal for the second day?
- Wouldn't you have to add some time indications?
- What do you mean by 'psychology', did we discuss this subject in our training?
- Do you start at varying times?
- How do you think you could use the 'trust' phase at the same time as the Johari window?
- Don't you think you might need more time for the phases?
- What are you going to do with the principles?
- Are we correct in thinking that your days do not always end at the same time?
- Could you explain your goal of striving for collectivity?
- Are you going to make rules?
- Shouldn't you limit your morning break to ten minutes?
- Haven't you overloaded your agenda?

- Are you going to specify the assignments?

These were the pairs' replies:

- This is what we feel in general that the programme should include. We still have to work out the details.
- Yes, our programme is a bit full but we expect to get the full participation of the new colleagues.
- Don't worry about the word 'psychology': what we mean here is the exercise about the difference between emotions and behaviour.
- We'll have a look at the times, and equalise them. We think we can start the day at 09.00 a.m.
- Our aim here is to work on trust-building, and the Johari window is the tool for training this.
- We want the programme to be flexible and we will find a time when we can ask our new colleagues to make the rules that we need.
- We're going to add the principles in the programme after all.

The co-trainer of one group asked each pair to present one of their fifteen days of their draft due to a lack of time. The ten twenty-minute presentations were given in four hours, after which the sociotherapists discussed what they had learnt from each other.



Photo 11

Author's own collection. Working on decision-making. 2016

I was asked some general questions about what would certainly need to be incorporated into the programmes, and about the role of the trainer in the follow-up programmes. I explained that the trainer's supportive role also hinges on the donor, who every year decides whether or not to continue their donation. And that a donor makes a decision on the basis of the sociotherapists' commitment and the results achieved with the sociotherapy groups.

I reiterated that the content of the programmes depended on what each pair had created themselves because every sociotherapist gains a sense of certainty when s/he works from choices they have made themselves and therefore understand best. I reassured sociotherapists by stressing that every subject in

every draft matters. A sense of certainty also ensues from the knowledge that one's colleagues have looked over each programme critically.

Execution: making a decision about the training programmes

After all the deliberations and discussions each pair knew where they could still make improvements. On that condition, they knew themselves assured of their colleagues' approval, gained in a democratic process. The sociotherapists took pride in the fact that their programmes were clear and beautifully worked out in great detail. Where necessary, they also worked at home at their draft.

10.4 The sociotherapists' reflections

The sociotherapists made no secret of their pride in their self-created programmes. They reiterated that this training was very different from all previous training programmes.

With respect to the assignment to draft a programme, various sociotherapists said they had found it difficult to put the training subjects in the right places. One person had had a restless night over it, but added that she felt well-prepared. She knew herself assured of her colleagues' support. Another woman said that the group had become like family. She had participated in many a training, but never in such a one. A young man recounted that he had been won over in the second week of training, and had embraced sociotherapy as a method after his own heart. He had talked with his father, who approved of his decision to give up his job of primary school teacher in order to become a sociotherapist. His view was that sociotherapy could be of great importance for East Congo. A modest, proud-looking woman related how she had been made to think deeply. She was married to the chief of a village where there was a great deal of fear. She hoped that she and her colleagues would be able to persuade the chief to participate in one of the sociotherapy groups so that the knowledge gained from the programme would help them restore unity in the village. Someone else said that he had not known you could also learn things outside a school. A woman claimed that there was love in the training group, and that this was a great feeling.

Reflecting helped the sociotherapists to discuss in greater depth what was at play in their living environment. Somebody said she was happy: following a

good conversation in her home environment her land had been returned to her. Occasionally, new, last-minute themes emerged, as the one on poisoning, for instance. As they looked back on the assignments that marked the end of this stage of the training, the sociotherapists again got talking about what could be learnt from making and playing the game of Happy Families and the 'I'm going on holiday' game.¹¹ They had included the knotting game in their programme because it was important to learn to look at a problem from various angles before acting. Sociotherapists in another location looked back in pride on how they had ultimately determined the composition of the pairs themselves, after they had first tried to shift responsibility to the trainer. A woman shared her amazement over the fact that she had now set recruitment criteria herself, while earlier she had not even known the concept. She asked if the method could also be taken to lazy people.

Sociotherapists in one of the groups belatedly voiced their objection to running the training at a location that was remote and did not have a restaurant. The present management of Faith Victory Association (FVA), the coordinating staff member and myself tried to counter these objections with a number of arguments. A new road had recently been built, for example. The distance by motorbike taxi was ten minutes at most and travelling expenses were reimbursed. It did not change anything in the objection to the distance. I suggested that the group jointly resolve the problem, and I made as if to leave the room. That was not necessary: a pair offered to go to the less favourite location.¹²

And one sociotherapist found himself passing on his new knowledge to others, now that he had learnt what constructive criticism is. The discovery had left a deep impression on him. A woman mentioned a new problem: 'There are too many people who want to take part in our sociotherapy groups and I don't want to disappoint anybody'

11 The 'I'm going on holiday and I'm bringing..' game is about remembering and reproducing items in an imaginary suitcase in their correct order.

12 The reader should bear in mind here that the political situation in Rwanda did not allow the sociotherapists to express their real objections. As transpired later, ethnicity played a role in the resistance mentioned.

10.5 The trainer's reflections

The core objective of the training programmes is to develop a situation of safety and trust. Trust in the group decision-making process is supported if it has the following characteristics. I have structured my reflections according to this evaluation model.

**Box XXX Characteristics of effective decision-making in groups
(Johnson & Johnson 2009)**

- The group members' potential and resources have been used to the full
- The available time is well-spent
- The decision is correct and of high quality
- All group members are fully committed to carrying out the tasks
- The group's problem-solving ability has increased

a. Using sociotherapists' potential and resources to the full

When these two assignments were prepared, it was consistently borne in mind that the decision-making should be a joint undertaking and that everything should be reviewed. As a result, a climate of sufficient trust (in the sociotherapists themselves as in the others) had come about in the fourth week. Even so, a growing uncertainty was perceptible on the sociotherapists' part that I was also beginning to feel to some extent. Would the authorities consider it a sign of disrespect if the sociotherapists recruited and took on new colleagues? The sociotherapists are not formally recognised as authorities.

I recalled my assessment of the cooperation that the authorities had pledged and this helped to contain the feeling of uncertainty. One of the coordinating staff members similarly reassured the sociotherapists. The impact of a (local) context was borne out in various ways. Sociotherapists in East Congo, for instance, thematised as early as the first days of training the fear that authorities might feel threatened by the initiatives of sociotherapy, and be resentful.

Drafting their programmes, the sociotherapists became automatically involved in issues of organisation and in the preparations for the logistical implementation of them. Their questions showed that they also felt responsible for the preparatory tasks of the programmes. With this attitude they demon-

strated their understanding of the fact that they themselves were the available resources and the means for broadening the local organisation's capacity.

The sociotherapists' resources were optimally used on three points:

1. They participated in the process of drafting a programme with a great deal of cooperation and concentration.
2. The pairs consulted each other.
3. The pairs produced visible results.

b. Well-spent time

The sociotherapists were intrinsically motivated to complete the task within the available time. Working intensively and with great discipline, they found that time flew by. They felt an increasing inner certainty that they were capable of executing the task-to-come. I noticed that my tension-regulating role was much less called for. This I took to be a sign of an emerging new balance.

Within the available time, the sociotherapists formulated and discussed recruitment criteria and took decisions in democratic fashion. In, on average, twenty-two hours per group, nearly one hundred sociotherapists drafted thirty-four programmes and ten manuals for the new colleagues. The sociotherapists decided on each separate draft in an intensive process, and within the available time.

c. The quality of the decisions taken

The decisions were of satisfactory quality because they had been reached according to the same procedure as the rules for the sociotherapists' own groups. They were considered, informed decisions reached by the group as a whole.

Let me mention three examples here:

1. The sociotherapists acknowledged that they could take their own stance when discussing the draft assignment. This was in strong contrast to their replies to the question about their expectations fourteen training days earlier.
2. The pairs now saw corrections as improvements; their fear of criticism had diminished.

3. The sociotherapists had no trouble answering their colleagues' many questions; they had mastered the course material as well as the decision-making procedure.

All programme drafts were approved. The programmes consisted of twenty-four to thirty different training activities.¹³

Once the programmes had been determined, the sociotherapists worked very seriously to process the corrections and to design their lay-out. I deduced from this that they were carefully preparing for the meeting with their future colleagues and were embarking on a new relationship with their environment with attention and focus.

d. The quality of cooperation

A balanced cooperation between the pairs benefits the quality of the tasks carried out within sociotherapy.

Mapping and using everyone's potential in the cooperation task laid bare the tenacity of traditional and general role patterns (affecting people's actions). Now that an atmosphere had been created where feedback on these role patterns was possible, some sociotherapists recognised how they were still domineering (and, for instance, left the thinking and writing to their partner). Where necessary, the pairs now made an effort to rectify the balance as much as possible. This was proof of the quality of their willingness to cooperate.

e. The problem-solving ability

People's problem-solving abilities increase if agreements are reached in a balanced manner. In the training, it was found that problem-solving abilities had improved in the task where group members who had fundamentally different ideas on a recruitment criterion had to reach a decision together. Group members elsewhere settled a matter themselves as they decided to go to the (training) location that was not a favourite area.

13 In Byumba the sociotherapists scheduled on average 5.1 types of activities a day (with a total of 206 in 40 days). In Nya-Ngezi, an average of 7 types of activities were scheduled per day (totalling 170 in 24 days). In Nyamata, the average was 7.7 types of activities a day (totalling 108 in 14 days).

In general, problem-solving skills had noticeably developed, seeing that critical questions could now be asked. Sociotherapists showed enthusiasm for the new method and were keen to practise it.

An occasional sociotherapist found the assignment difficult. For people who have long not been in a position to receive education it was a major achievement to stay in the group and participate. These sociotherapists too could not wait to share with others this newly gained 'wealth' with which problems can be approached from a different angle.

10.6 The significance of the recruitment criteria and the training programmes for learning about the phases and principles

The phases

The sociotherapists learnt that they could reach deeper levels of insight by answering, time and again, the same questions about the circle depicting the six phases. Using ever-varying formulations, they expressed how working on the assignments contributed to an atmosphere of safety in the group, to a deepening of mutual trust, to greater care towards each other. And, to the realisation that criticism can be constructive and thus broadens the classical notion of respect. They experienced when doing the two assignments set out in this chapter how gaining a say on issues also implies assuming responsibility.

The sociotherapists discovered and felt more deeply that while changes may be technically feasible, this does not make them emotionally easy. In a long history where women and youths are habituated to functioning in the background and men occupy forefront positions, a few weeks of training may well constitute a small but significant intermezzo. The constant attention to the traditionally subordinate position of female and younger sociotherapists laid bare socialised behaviours, made them palpable as well as discussable. The women and youths displayed their commitment and talents, and the men acknowledged and appreciated these. Coordinating staff notably had more difficulty re-assessing behaviour that goes naturally with hierarchical positions.



Photo 12

Collection Yolanda van den Broek. Learning from and with each other in Liberia. 2013

The principles

The assignments gave the sociotherapists more practice in joint decision-making, and they experienced how applying a broad interpretation of democracy actually works in their environment. In the areas where the training took place, the existing hierarchical order was challenged when the sociotherapists made decisions about the recruitment criteria and the training programme. Any nervousness about

pushing its borders were set off by the pride the sociotherapists felt at what they had accomplished.

10.7 Reflections on the role of the trainer

It was easy for the sociotherapists to share their experiences (learning to look differently at their own world) with their home environment (the location of intervention). Sometimes, fellow villagers inquisitively awaited the return of the sociotherapists at the end of a day of training. In every subsequent training location I saw that the training had this impact. I attribute this effect to the training locations, which were and stayed community-based, and to the fact that the sociotherapists were recruited in the area of intervention.

With the assignment to draw up recruitment criteria I facilitated the pairs to intensify the contact they had engaged in and I furthered the discussion of themes that were relevant within the given context. I explained the learning by doing principle again, thereby acknowledging the nervousness that the sociotherapists showed at following a procedure that was so foreign to them. Having the explanation repeated reassured them and they practised the principle while explicitly focusing on the method's upcoming implementation.

The sociotherapists had become capable of creating one training programme. This made me decide to set a more complex assignment where not one but thirty-four programmes were to be created. To my thinking, every pair would then be able to experience that it was indeed capable of devising a programme and would happily assume responsibility for it. A related learning goal was that pairs would seek each other's advice if they felt uncertain on a matter.

At this stage, I decided not to delegate this task as yet, but to supervise the discussions where decisions were to be made about the programmes myself. The follow-up training was designed to train this particular skill.

It almost goes without saying that a sixteen-day training in coaching sociotherapy groups is too short to address all the themes that emerge. Where sociotherapy significantly differs from classical concepts of aid is that its essential point is not to discuss each issue exhaustively or resolve it down to the smallest detail. But it is about being together and about talking together about problems and issues as a normal part of everyday life, just like people had always done in and around the yard (until the practice was lost). It is especially important that the sociotherapists learn how to handle any motivating and hindering behaviours that surface in the gatherings. With the saying 'Whoever is soft on oneself and strict with others will lose authority' in mind, I decided to bring up the subject of my own unhappiness when a coordinating staff member stayed away at an essential point in the training. I could take up that position since I knew how to justify it. With my decision I conveyed that staying away without notice is an undesirable example for the pairs who were shortly to facilitate the sociotherapy groups. As they repeated and practised this focus when discussing and deciding on multiple programmes, the sociotherapists learnt how to coach and supervise participants in the sociotherapy groups: in cooperation and with an open mind.

It was established that the starting point of sociotherapy is not the wish to change others but an orientation on changes that are brought about together with others.

10.8 In conclusion

I find that the basic assumptions I entertained when introducing the two assignments were realistic. The sociotherapists were sufficiently capable of playing an activating role in their future practice. They had been equipped with enough self-confidence to draw up selection criteria for the recruitment of new colleagues and to discuss these together. They were happy to agree to disagree and to direct constructive criticism at each other when collectively making decisions. The sociotherapists parted ways, with the promise that each would recruit a small number of new colleagues.

The training programmes for the new colleagues and the manuals were devised without any steering intervention from the trainer. The decisions bore

all the features of effective group decision-making. This method of working created support for viable plans.

The training programmes showed similarities on these points: the days of training begin and end with a thought for the new colleagues' personal well-being; participants make rules for their own group; the phases of sociotherapy are discussed (a priority). Games and short breaks to refresh everyone's attention are included, as is the setting of homework and other assignments. Last, most pairs scheduled doing roleplays and holding review meetings.

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11

Visits to the Practising Groups in Preparation for the Next Training

Six months after the start of a practice period in the various locations, a coordinating staff member and myself paid unannounced visits to selected sociotherapy groups in operation. The visits were meant to help set an agenda for the subsequent training programmes. To me, it was important that my observations were incorporated in this, together with the sociotherapists' and coordinating staff's experiences.

The first visits to groups in Byumba took place in 2006. The visits to groups in Nya-Ngezi were made in 2008 and to those in Nyamata in 2009. A different volume of funding for the training in Kakata meant that the start-up of the training's implementation was supervised by the co-trainer. Elsewhere, teams managed to find their way once this process of starting up had been gone over with them. The subsequent training in Kakata thus started without a prior visit to the groups.

The choice of groups to be visited (130 groups were now operational) depended on available transportation and on the times at which the groups convened.

I observed the actions of the sociotherapists. Had the training provided them with enough skills and insights? Could they respond properly to whatever happened in the sociotherapy groups? Were they capable of guiding the participants through the development phases that they themselves had also been through? Were they able to facilitate the participants or did they seek refuge in the role of a teacher or a classical aid worker? Was the initiative given a chance in the traditional environment? What bottlenecks presented themselves for the agenda of a future follow-up training programme?

11.1 Basic assumptions

As I paid these unannounced visits, I bore in mind that:

- The sociotherapists and staff were absolute beginners at putting community-based sociotherapy to use.
- There could be no routine as yet of interpreting and attributing meaning to certain situations that may occur in sociotherapy groups.
- There was no reference institution in the near vicinity of the training location for the staff and sociotherapists to turn to.
- Each sociotherapy meeting that is facilitated will yield themes that require attention in subsequent training sessions.
- In Nyamata, the first practice experiences might well be beyond the sociotherapists' powers and accomplishments since the 1994 genocide had assumed unimaginable proportions here.

11.2 The trainer's observations

The next sections describe my observation of eleven of the twenty groups I visited. These were sociotherapy groups from the second practice cycle. I here offer instances of groups where the sociotherapists had few or no problems coaching the sociotherapy groups and of groups where sociotherapists did encounter problems. The examples also illustrate what sociotherapists come up against in actual practice. Let us start here with three of the seven groups visited in Byumba.

Group 1

I saw the two sociotherapists working together calmly. The female participants were austere dressed, their clothes betraying a lack of detergents. Some carried a child on their back. The women were appreciative of the support they received in the group. This was, they said, the first time in many years that their situation received attention. They told each other about their present status of being without rights and how they managed to survive by offering household services in return for a place to sleep. A number of them recounted that they were no longer welcome in the families of their deceased husbands. One woman said she had lost both husband and children, that she had no roof over her head and that she had no wish to live anymore until the moment when she was invited to take part in sociotherapy. Her facial expression now lively, she put her arms around the group members sitting to her

left and right, and said that sociotherapy had given her friends and she felt a small spark of hope and life again. What with her devout expression, her eyes turned upward, and her manner of speech (the friends had been given to her), she seemed to think that this change must have come from the holy spirit.

After this visit, the head of the secondary school, in passing, expressed his appreciation for the humanising effect of the sociotherapy groups in his village. Since the genocide, the villagers had met at a baptism, at the home of colleagues or after a church service. They might speak on these occasions but the teacher had reached the conclusion that, in fact, they no longer discussed anything. Themes like safety or trust had never come up again for discussion.

Group 2

The two sociotherapists conferred with the group of ex-prisoners (persons who had been suspected of taking part in the genocide, had confessed to this, and in return had been released) whether the meeting should be held according to plan during our visit. The participants decided that the meeting should go ahead and that the coordinator and myself could sit in at the meeting and listen. The sociotherapists approached the participants openly and gave them the floor in a way that showed commitment. I saw from the manner in which the participants reflected that there was trust here. In our presence, they continued their discussion of the miserable situation in which they had ended up during and after the genocide. The participants interacted cautiously, and slightly stooping, listened attentively to each other. Towards the end of the meeting one of the men asked if the lady who had brought them this method had any questions. They then went on to answer my questions but made little eye contact. One of the participants claimed that he had 'decolonised' himself, which he clarified as meaning that how he thought and acted had been changed by his participation in sociotherapy. I asked a twenty-three-old man who had been in prison for six years what he had dreamt about doing once he was outside again. The boy told me that he had dreamt of killing the person who had betrayed him. His group members advised him against putting this idea into practice. The young man had, in fact, run into his 'betrayed', and this encounter had gone very differently from what he had long envisaged: 'I did not kill him and I don't want to kill him anymore, either. We now greet each other'. An older man who had spent ten years in prison said he had lost his wife and children, his home and possessions. Upon his release, he no longer had a roof over his head and he had no expectations anymore whatsoever.

Sociotherapy meant a lot to him because the meetings gave him the feeling that it was all right for him to put both his feet on the ground.

After the meeting, one man after the other was bold enough to establish eye contact. Through the coordinator, one of them said that our encounter felt as if he could take off a heavy coat now that someone from the other side of the world had shown an interest in them. He could barely believe it.

Group 3

The sociotherapists coaching a group of secondary school pupils floundered. The students had expected sociotherapy to bring them financial support towards their school fees. The sociotherapists showed understanding for this expectation. But once the students discovered that understanding was as far as the sociotherapists could go, the latter could no longer shift attention to subjects that might also appeal to the youths. The sociotherapists asked me for advice but at the same time thought that they might be able to break the impasse if they offered the students a small financial gesture after all. My advice was to facilitate by example. I turned to this method so that I could experience for myself if what is trained actually suits a group of secondary school students, and I wanted to find out if this target group demands additional skills from the sociotherapists.

The coordinating staff member later told me that the issue of setting limits had also occurred with a pair whose first sociotherapy group was composed of administrators.

General observations

The sociotherapy groups regularly numbered more than ten participants and the meetings often took longer than the agreed three hours. Sociotherapists said that the participants continued to need their attention even after the agreed fifteen meetings had come to an end. They honoured this because both the participants and they themselves were delighted with the relationship of trust that had come about. They said that they now saw the participants as friends and that they now treated each other as such. They regarded this as aftercare and thought it reasonable to ask for some extra payment for this from the donor. When I had asked various questions about the issue, I

concluded for myself that the pros and cons of 'setting boundaries' should first be topics of discussion in the upcoming training.

In Nya-Ngezi I visited five large meetings

The coordinating staff organised my visit differently from how I had asked it to be in the preceding communication. They organised five meetings to which they invited all the participants from the first and the second practice cycle as well as the sociotherapists. As a result, I had to improvise with my intended manner of observing. I decided to focus on the sociotherapists' role in these meetings.

Meeting 1

The forty-five-strong meeting (of participants and sociotherapists) had a relaxed and laid-back atmosphere. After a warm welcome and general introductions, some participants performed a roleplay about sociotherapy and a row in the living environment. They acted out the row very realistically and showed how it was calmed through the group's interactions. An improvised meal made palpable the increased safety as well as a budding trust. The sociotherapists remained in the background. After the roleplay the participants wanted to engage in conversation with me. The participants replied to my questions that their participation in the sociotherapy group brought equality to their families. The examples they mentioned almost assumed the character of a confession: one man, for instance, said that for years he had treated his wife like a slave. He urged the staff to continue with this method. A woman claimed that she had been a liar before she took part in sociotherapy. Now, her neighbours said she had become reliable. The woman also said that these days her family were doing better. She asked if sociotherapy could be brought to anyone. Another woman remarked that people were selfish. But now she had observed some change. Though she had long been a church member, the church had done nothing to help her. She could continue and mention quite a few examples but the short version amounted to this: sociotherapy is the key to a great number of problems because the method brings solidarity. She thanked God for bringing sociotherapy to Congo.

Meeting 2

One hundred and twenty persons (participants and sociotherapists) had gathered in the village. The participants and the sociotherapists together performed a roleplay about some merchants returning from their purchases in Dubai. Upon their home-coming, they found that relatives had been attacked and bound by militia members. The second part of the play featured the participation of the returning merchants, the attacked relatives and the ex-militia members in a sociotherapy group. The group members playing the sociotherapists demonstrated effectively and invitingly how they brought the members of the two groups in contact with each other. After the play some participants in the first group said that they would continue getting together after their fifteen meetings. Every week, they deposited a small amount in a joint moneybox with the intention of keeping some small livestock and thus generating an income together. The participants stressed that sociotherapy had to stay because even military staff and police authorities took the method serious. They asked how the method could be brought to the military and the authorities.

Meeting 3

In one of the villages, where a long-running (36-year-old) land dispute had been resolved with sociotherapy, one hundred and thirty persons (participants and sociotherapists) turned up. It was proudly related that the population nowadays did not turn to the civil courts because quarrels were now settled by means of the sociotherapy method. One man admitted that he had initially mistrusted the invitation to take part but had discovered as early as the first meeting that this initiative was different from what he had envisaged. The man asked if the trainer could take the sociotherapy anywhere. Another participant stressed that the roleplay that had just been performed was an exact representation of his own problem. While he was taking part in the sociotherapy group, a participant had gone to see his neighbours who had stolen something from him. He had now gone about the visit very differently, as a result of which the outcome was completely different as well. The man was glad that the neighbours and he shared beer again, according to the tradition.

Meeting 4

A hundred participants and their sociotherapists had gathered in the fourth village. They performed a multi-act roleplay. In the first act, the participants stepped realistically into the shoes of militia group members and child-soldiers who were armed and stupefied with drink and drugs. In the second act, the participants acted the role of sociotherapists, showing how they could create trust and established a dialogue between the harassed villagers and their then attackers. One woman asked herself after the play why her God had deserted her. She related how she was now doing much better because she took part in the sociotherapy meetings. Others argued that sociotherapy brought togetherness because they were learning by doing things together. A young woman felt sufficiently safe to confess in the midst of a hundred fellow villagers that before, she had been far too stubborn without much wisdom but that she had found far more wisdom in sociotherapy. A man emphasised that the attention the sociotherapists had given to his emotions helped him a lot. It had enabled him to talk about far more subjects in his family. He too termed sociotherapy an interesting key to rebuilding Congo.

Meeting 5

Here, a hundred and twenty participants presented themselves, including various traditional leaders. The local chief and a sociotherapist opened the meeting. One participant proudly recounted that the police nowadays had much less to do and had come enquiring what was going on. The chief from a neighbouring village confirmed that people no longer went to the police with their complaints. He argued that there was more cooperation following the arrival of sociotherapy. People now solved their everyday problems themselves. The man spoke from experience. He had participated in the first fifteen meetings. Women were often humiliated, a woman said. She called my attention to the new equality of women in the company of men. Chief Nya-Ngezi acknowledged the justice of men and women holding equal positions. He admitted that the traditional way of administering justice and trying everyday quarrels in and round the yard had long been a time-consuming burden to him. Since the arrival of sociotherapy people submitted far fewer problems to him while safety had increased. The new situation now freed him to carry out his administrative duties. His advice was to continue with sociotherapy. One of the sociotherapists asked some ten traditional leaders to come forward. In a short speech he stressed his intention to cooperate. The looks of approval in the eyes of the ten leaders and the participants radiated

faith in the intention. Towards the end of the meetings, the inspired and enthusiastic coordinator stepped into the role of a classical manager as he told the participants what he expected from them.

General observation

In Nya-Ngezi, too sociotherapy groups were over-peopled. Staff there allowed a maximum of fourteen participants per group. The sociotherapists said that in the follow-up training they would like to address the theme of 'time-management'. Further, they wished to revise the format for reporting. In practice it had turned out to be more difficult to put across some of the methods well, and they therefore asked to have a refresher on this. And since some participants could be rather long-winded, it proved difficult to let everyone have their say. They enquired how they might cautiously regulate proceedings. And they wanted a method for prioritising the subjects to be discussed after the opening of a meeting.

Here follow my observations of three out of eight groups visited in Nyamata

Group 1

A group of ten participants convened in a living room for their ninth of fifteen meetings. I found a warm, free and open atmosphere. Participants spoke when they were invited to but also of their own accord. The sociotherapists (a man and woman, both in their mid-thirties) showed self-confidence and conducted themselves professionally: they maintained eye contact with the participants and with each other, and neither dominated proceedings. There was variety in the activities they offered. They divided the available time over an opening assembly, an advisory conversation, physical exercise, and a review assembly. They had no trouble filling their three hours.

Group 2

A sociotherapy group of eleven participants carried out a task in the sociotherapists' relaxed but encouraging presence. The male and female participants had put aside small amounts of money because they wanted to keep

getting together after the fifteen sociotherapy sessions and wanted to have something to do together. They were already baking bricks and collecting wood and were now building a pen for the small livestock they planned to keep. The sociotherapists said that they had received a suicidal ex-prisoner into their group. He was now helping to build the pen, and was allegedly no longer suicidal. During the closing assembly the participants recounted how they had felt hopeless for years. After the genocide nobody had talked to them about safety and trust. Now that these were talked about, they developed hope.

Group 3

In the third village, the sociotherapy group consisted of participants who had survived the genocide and men who had been released from prison. I attended the tenth of fifteen meetings. The group members talked about trust, emotions, connection and disconnection, and misunderstanding. The meeting took place in a constructive atmosphere and I saw, moreover, that the sociotherapists in their enthusiasm did more work than the participants. In this uneven division I spotted a subject for the follow-up training.

The first day of the follow-up training in Kakata

Upon their return to the training room the sociotherapists recounted that they implemented what they had learnt and that their relationship with their spouses had improved. Participants in their groups attended faithfully and some even preferred participating to doing business. They valued the games and role-plays. The sociotherapists related that after the third meeting participants had become used to the approach and how they were treated, and had come to appreciate this. Participants were given an opportunity to lead the morning and afternoon assemblies themselves. In some groups the participants had expected a material compensation. It had occasionally been difficult to explain that this is not what happened in sociotherapy.

The participants too shared at home what they learnt in the sociotherapy group. They advised friends and acquaintances to join the groups as well. Consequently, there were more than enough participants to fill subsequent sociotherapy groups. Glowing with pride, the sociotherapists ended the meeting with their report that the town chief had been impressed with the method.

The sociotherapists talked about their sense of unease at the responsibility that accompanied their new social role of sociotherapy groups coaches. Their environment treated them differently now, they felt. Some sociotherapists found it difficult to align themselves with the participants' level of knowledge and comprehension. Starting up the programme had felt like 'heavy wood against the chest'. In one of the groups, the entire first cycle had been hard-going: there had been three deaths in the area in the fifteen weeks, and as a result, the subjects of loss and sorrow kept returning. The co-trainer reported in writing on the commitment and professionalism with which the sociotherapists had dealt with this situation of loss. With their attendance of the funerals, they had suited their actions to their words with respect trust and care.

Reflections on my observations

My visits to the operational sociotherapy groups taught me that the sociotherapists had learnt enough to be able to work in practice. They had gained sufficient insight and skills to start up a sociotherapy group and to deal with its unpredictable dynamics. Most sociotherapists expressed an inviting attitude, they activated the participants to take part in open dialogue while the participants showed in their conversation and behaviour that the sociotherapists were able to coach them through the development phases. Sociotherapists and participants alike showed surprise at the impact that participating in sociotherapy had on themselves and on their environment.

The sociotherapists experienced difficulties in imposing limits. Participants in a few groups initially expected some material aid and this gave rise to some reserved reactions that usually, after some explanation, subsided after more or less time. The intended direction of the sociotherapy process held out in all the groups that I visited.

My decision to have tens of sociotherapy groups start up in the same area seemed to come to fruition. The sociotherapists no longer spoke of their fear that the authorities might feel passed by. Moreover, the large meetings in Congo, in particular, but also the groups visited demonstrated that the meetings were not just noticed by the authorities and the local residents; they aroused their curiosity as well.

I found at least seven themes that warranted attention in a forthcoming training programme (cf. box XXXI). A next training programme will have been

carefully prepared if its agenda is aligned with experiences gained so far and provides solutions for questions and bottlenecks that have presented themselves in practice. I chose to wait until sociotherapists and staff had shared their experiences and put forward their points for a follow-up training before I put forward the subjects that had come to my notice. I then phrased my focal points in the form of questions. During the training I sought answers through questions that I incorporated in creative exercises where possible.

Box XXXI Agenda items to be included in follow-up training programmes(s) collected by the trainer

Themes	Questions to be discussed
1. Motivating factors	<ul style="list-style-type: none"> • How do the sociotherapists explain the participants' sense of satisfaction?
2. Hindering factors	<ul style="list-style-type: none"> • How do the sociotherapists explain the participants' sense of resistance?
3. Safety	<ul style="list-style-type: none"> • What facts, actions or signs did the sociotherapists observe as proof of participants' growing trust in the method, the sociotherapists and the other group members? • In which meeting did the sociotherapists discern a growing trust for the first time? • In which meeting did the sociotherapists discern a growing sense of resistance? • Did any unsafe situations occur during the meetings? • Are the sociotherapists willing and able to talk about these situations?
4. Content and format of the foundation training programmes	<ul style="list-style-type: none"> • Was the content of the foundation training satisfactory, according to the sociotherapists? • Was the format of the foundation training satisfactory, according to the sociotherapists? • How do the sociotherapists look back, after their practical experience, on content and format of the foundation training programmes?
5. Sociotherapists' skills and limitations	<ul style="list-style-type: none"> • Do the sociotherapists discern a link between the answers to these questions and their own skills? • Do the sociotherapists discern a link between the answers to these questions and their own limitations? • How do the sociotherapists describe the way they dealt with the dynamics in the sociotherapy groups? • How did the sociotherapists think they could steer this dynamics?

	<ul style="list-style-type: none"> • Which themes would the sociotherapists like to have revised? • On which themes would they like to have additional training?
6. Imposing limits	<ul style="list-style-type: none"> • How would the sociotherapists (and staff) describe the added value of having more than ten participants in one group? • What makes the meetings take more than three hours? • What are the experiences with a training length of fifteen meetings? • What arguments can the sociotherapists and staff adduce for offering aftercare? • When is a participant eligible for aftercare? • What should this aftercare address? • Who will provide the aftercare? • Are there any ideas as to the length of the period of after-care? • How could ideas about aftercare be formulated? • Is aftercare possible once sociotherapists and participants become friends? • What arguments would justify an increase in funding? • Is it relevant how participants are described?
7. Coaching by the coordinating staff	<ul style="list-style-type: none"> • What role did the staff adopt in order to achieve results? • Did the organisation that had been set up support or hinder achieving results? • How did the staff and the support organisation look after the emotional well-being of the sociotherapists?

11.3 In conclusion

Sociotherapy fully comes into its own if the meetings take place close to the participants' yards and they evoke the familiar atmosphere of the yard. An interesting side-effect of situating them there is that the sociotherapy groups nowhere go unnoticed.

The sociotherapists had become sufficiently well-equipped by (the content and methods of) the training to put sociotherapy into use, in actual practice. The participants were living proof: they re-established contacts, with each other, in their home environment, with participants from a previous or a subsequent group, and in passing, in the field, at the market or in the church square. This was easy because everybody knew who was taking part in a

socio-therapy cycle and they now shared something to talk about. Since many wished to participate and the sociotherapists were not used to imposing limits, the groups often were larger than was desirable.

After the sociotherapists, the first participants were empowered to start regaining their dignity. They requested that the intervention were continued and brought to the authorities. These were articulations of hope and prospects of a more humane life. And they were expressions of the newly gained liberty to voice constructive criticism. The participants attended subsequent meetings. They had become inquisitive, and curious about next surprises and changes. A striking social change was that, following their participation in fifteen meetings, a number of groups took the initiative to continue getting together and linked up joint activities to generate a livelihood with the pleasure of staying connected.



Photo 13

Author's own collection. 'Sociotherapy groups nowhere go unnoticed' East Congo, 2008

Many sociotherapy pairs found it difficult, in their first days of practice, to apply and put sociotherapy to use. At the same time, all pairs talked enthusiastically about the results their sociotherapy had achieved while nobody reported any uncontrollable situations in the sociotherapy groups. It was, however, experienced everywhere that the number of fifteen sociotherapy sessions for which the budget allowed three hours a week was too low: it led to feelings of unease and shortcoming. This perception made the problem of imposing boundaries, which recurred in numerous situations, extra difficult. The questions that I formulated for inclusion in the agenda of the follow-up training programme(s) focused on this theme of learning to set limits.

Literature consulted:

- Johnson, D.W. & Johnson, F.P. (2009). *Joining Together: Group Theory and Group Skills*. Upper Saddle River: Pearson Education.
- Remmerswaal, J. (2015) *Group dynamics: an introduction*. Amsterdam: Boom/Nelissen.

Recommended reading/watching:

- Video DCR Liberia (2017) Community based Sociotherapy- YouTube
<https://www.youtube.com/watch>

PART III
Social Change Through
Community-based
Sociotherapy in Rwanda,
East-Congo and
Liberia

12

Community-based Sociotherapy Represents Social Change

As community-based sociotherapy connects, it facilitates and represents social change. Its connecting effect is based on participation, allowing its participants to practise control. The positive-oriented approach reinforces connectedness and endows it with prospects. The method's effective strength further lies in its structured and coordinated format that provides transparency and enables alignment. Last, the community-based location supports an integrated and context-oriented grass-roots, bottom-up way of working that is characterised by inclusion.

12.1 World history struck deep craters

The sociotherapeutic approach to post-conflict issues starts with the acknowledgement that world history has taken a heavy toll on the social lives of millions, and with a critical interest in an aftermath that is characterised by growing material inequality and constant violation of self-esteem. Studying and acknowledging all this enabled me to find both relevant questions and fitting exercises.

Complicated situations in developing countries are often described from the perspective of how national and local elites control tradition-based or state institutions. Much of the literature on, for instance, Rwanda, Congo or Liberia describes how the complex present 'should' be understood in the light of pre-colonial, colonial and post-colonial economic, political and social history.

The 'bottom-up' perspective has not been given a great deal of attention in the literature. Where it has, the perspective stresses the existence of a painful relational deficit because possibilities of mutual aid had been lost – with profound concomitant socio-economic impact. This perspective emphasises that people survive due to undamaged networks.

12.2 Alignment with local institutions

An intervention with community-based sociotherapy in post-conflict areas is doomed to fail if beforehand no exploratory talks are held with representatives of the local population that carry responsibility. In a face-to-face introductory meeting it is explored what interpretation the local worthies put on the present situation in the light of the rules with which they have been socialised.

As a rule, clarifying content, procedure and organisation of a community-based sociotherapy programme also becomes an occasion on which to discuss the recruitment criteria for the trainees. In such an atmosphere, it is possible to make arrangements for meeting rooms for the tens of community-based sociotherapy groups and for desired support (cooperation with existing authorities). At crucial moments, experiences gained in practice proved the confidence-building significance of agreements made earlier.

12.3 What works and why?

Task-shifting

Any orientation on problematic social issues requires a task shift from professionals to lay persons. The training is tailored to the needs of lay people. People in post-conflict areas do not look at their problems in medical terms. And accordingly, these were not used: neither during the training nor in its practical implementation. In community-based sociotherapy, everyday sources of tension in the home environment are used as a basis for work. (Is it possible to borrow a kettle of water from the neighbours before dusk, and will my neighbours help carry me to a health centre in an emergency?) The community-based angle encourages togetherness and self-reliance and creates a social safety net. If people feel safe and trust each other (and themselves), this creates space that invites them to share everyday normal news and acknowledge the concerns, mistrust, complaints and sorrows of others. And it is then that lending each other mutual aid and support becomes possible once more. The sociotherapists' and participants' experience that they are capable, under their own steam, of developing a horizontal (informal) democracy mostly has a direct impact on family and community relationships outside the group. The renewal of such feelings spells hope for the near future.



Photo 14

Author's own collection. Task-shift-oriented training. 2016

In 2005, the World Health Organization (WHO) acknowledged the doubts voiced by psychiatric and psychological experts about the effect of psycho-trauma treatments in post-conflict areas. Its advice was, therefore, to focus professional attention on social interventions and henceforth to integrate specialist trauma treatment in existing programmes of mental healthcare.

My research on the training programmes and the implementation of community-based sociotherapy has shown (as has other research done in various other social science disciplines) that as a method, it is able to concretise the first part of this WHO recommendation in a sustainable and confidence-building way. Trainees and participants view sociotherapy as *'ihumure'*: as relief, 'a programme for us'.

Working towards change as a basis for dignity

The training programmes in coaching and supervising sociotherapy groups are primarily dedicated to regaining dignity. It is a group-oriented approach that focuses on developing the trainees' problem-solving ability. Once they

have developed this ability, they can, under their own steam, and without any substantive intervention from the trainer, effect any change(s) deemed desirable.

It is through a variety of learning by doing activities and exercises that trainees' attitudes undergo a change. They participate actively and learn methodically about the meaning they attribute to activated experiences. Practice has shown that this will increase the number of shoulders on which to carry the burden that blocked relationships are. The trainees discover the possibility of pushing back constraining social boundaries because this insight grows during the learning and development process of the training. These learning experiences encourage trainees to share what they have learnt, and they open the way for more complex exercises where trainees learn to experience how they together can become instigators of change as safety, mutual trust, and care (looking out for each other) are experienced again and the group proves trustworthy. Trust is built when the group members' view on role definitions, expectations and ideas about the meaning of values change at the same time. It is thus that regaining dignity becomes the result of one's own doing.

The role of the trainees in the process of social change

Shaping and modelling the practical implementation of community-based sociotherapy together, in partnership, is fundamentally different from how trainees and participants have been socialised. Their socialisation was discernible from the way they presented themselves as receivers of cognitive knowledge during the first days of training. They showed their unfamiliarity with participation as a means and a goal in itself and expected a 'normal' programme that included material aid and support for whose distribution they expected to receive instructions.

The learning by doing exercises aroused both surprise and attentive curiosity, and the trainees participated actively in the instructive and creative activities. They formulated rules for their own group and their own definition of the structuring phases and principles and learnt about effective decision-making procedures. In review meetings they articulated what they had discovered and learnt by playing the games. The trainees scripted roleplays about situations that they wanted to understand more clearly. In this way they gradually discovered that they could play an active role in pushing back boundaries in existing social patterns.

Participation was usually accompanied by pleasure and joy, sometimes by uncertainty. Learning from new exercises and games and thus gaining new insights brought joy. The realisation on the trainees' part that the trainer consistently delegated any decision-making to them, on the other hand, raised uncertainty and fear. They feared that local leaders might feel passed by if the sociotherapy method were put to use outside the training room. From the very first to the last day of training, trainees experienced that quarrel-free participation felt as if they had become part of a new family. And this experience and insight they wanted to share with others.

The interplay between trainer and trainees

A trainer will consistently ask for clarification of anything that occurs as locally 'normal' or usual behaviour (women waiting to be asked to speak out, for instance, or local leaders possibly feeling left out when trainees recruit new colleagues). The upshot of this is that trainees are stirred to think about these 'natural' behaviours and about new possibilities. If trainees expose themselves to a situation of change, this begs for a relationship of trust. Developing a relationship of trust requires the trainer to regulate any tension that arises.

'Regulating' is part of the word field of its superordinate 'structuring'. Under this latter verb there are also the words 'weaving in, visualising, slowing down, speeding up, protecting, challenging, attenuating, intensifying, delimiting and expanding'. The 'weaving-in' method was described earlier (cf. section 3.2.2). Visualising key notions that were new to the trainees and kept recurring served as a good supporting tool. Visualisation: a) keeps the attention, b) enables trainees to remember a concept discussed earlier, c) helps trainees to identify the effect of an (or a combination of more than one) applied method, and d) supports discoveries about the interrelationship between cause and method. Regulating cognitive tension is done by either slowing things down or speeding them up. Protection or challenges are given when politically sensitive subjects are touched upon and it is not yet clear if sufficient trust has been built. It is necessary to either attenuate or intensify proceedings when initial enthusiasm about the new window of opportunity makes way for uncertainty, on the part of the trainees, about taking responsibility for choices and decisions that have been delegated to them. Regulation in a delimiting way was required when trainees digressed too much or expected too much of sociotherapy. Expanding was possible if (and when) golden moments of breakthrough insights presented themselves. Then, this

promoted the discovery of interrelationships, after which the intensity of the regulation diminished. From that point on, encouraging became the trainer's most relevant word.

After some days of observation, the trainees started to appreciate the relationship-oriented approach. The method boosted participation, furthered responsibility-taking and continued attendance.

Trainees' discovery that they (if they work methodically) can themselves push back social boundaries creates a solid foundation for the viability of community-based sociotherapy. The structure of the sociotherapy groups, which the trainer discusses and develops with trainees and which in practice is given a weekly rhythm of meetings, safeguards a responsible use. The interplay between the trainer and the trainees (then: sociotherapists) continues in between two fifteen-meeting cycles. In subsequent training sessions the sociotherapists discuss their experiences with actual practice. The trainer offers continued moral and substantive support.

Trainees' own world and environment are central

The sociotherapeutic intervention targets everyday social aspects, which is why issues in the (trainees') environment constitute the central topic of the training. This came as a surprise to the trainees: 'This training is about us.' This focus helped them to discover step by step that the problems were a tangle of traditional, religious, post-colonial, post-conflict and post-genocide aspects.

Learning by doing

The learning by doing activities provided trainees with their first insight into how various ways of treating others (based on personalised power or on agreed and understood principles) work and what reactions they may elicit. They learnt about their impact on the group development phases. As experiences were repeated, trainees discovered that participation was both pleasurable and instructive. The mechanism of repetition created increasingly more space to discuss all sorts of subjects (including uncomfortable ones). It paved the way for a discussion of the meaning of socialisation processes.

The participation-enhancing method of sociotherapy is unlike what aid work is conventionally perceived to be. The roleplays 'laid bare' how strongly the role of the conventional aid worker had been internalised at the same time that they served as a tool for making adjustments to this perception. This worked particularly well when the observers of one game became the players in the next, and vice versa. Safety and trust were created in togetherness and thus more subjects for dialogic discussions came up than could be dealt with in the training.

When making and playing a game of Happy Families, the trainees and I learnt how everything that had been dealt with in the training had been understood, taken on board and internalised. And we discovered what was still to be learnt or practised. What trainees said about making and playing a game of Happy Families provided insight into the impact of the training on cognitive structures (more matters had become subject for thought), on attitudes (there was now a willingness to cooperate), on values (working according to the sociotherapy principles is interesting) and on perceptions in behavioural patterns (it was understood that control over how social boundaries were pushed back had been delegated to them in small doses).

The focus of the activity of together setting and formulating recruitment criteria and training programmes was on learning to have a say (in rule-making). Skills in cooperation, in having respect for self-formulated behaviour rules and control over one's emotions were perceptible now. In all groups, the days of training ended on a proud note, with participants happily surprised at the talents they proved to have.

The added value of a community-based approach

The community-based approach is the cornerstone of the training programmes, and this is where their added value lies. Exchanging thoughts about oppressive themes (visits to gacaca courts or the issue of sexual violence as a weapon of warfare), trainees found out how they related (or would like to relate) to these subjects. Because the trainees participated together in creating safety and trust and care and in observing discussion rules, new viewpoints were carefully developed and aligned with what was viable given the local context.

The community-based method of working allows a sizeable number of teams to be trained. The added value of this is that tens of trainees from the same

area simultaneously learn to coach and structure rather than focus on content. In practice, many weekly sessions were scheduled for the same time so inhabitants could keep strengthening and encouraging each other to experiment with different ideas. Combined with the organisation of three practice cycles per year, the volume and outcome of this form of sociotherapy constituted a relevant reply to the authorities' wish to launch an intervention with radiating effect, geared at making improvements in the inhabitants' social fabric.

Given the tens of sociotherapy groups it trains, the method of community-based sociotherapy reaches far indeed. The sociotherapy groups themselves were visible because they took place in classrooms, churches, conference rooms, living rooms and in the open air. They emanated commitment, which had a positive effect on the atmosphere in the environment and roused bystanders' curiosity. It provided an accessible opportunity for new (renewed) encounters between people whose relationships were fraught. Without being mediated by any intervening conflict managers, a glance or a cautious greeting could mean a small beginning and a big difference.

One of the effects of the community-based method was that participants continued to come together without their sociotherapists once they had taken part in the group. Even participants who had been deadly enemies during the periods of violence kept coming together. This resolve to keep meeting was tantamount to a major step towards reducing disruption and motivated the participants to advise their friends and family to apply to take part in sociotherapy, too. Many such applications were put in well before the start of a new training.

The fifteen sessions were not always sufficient to cover all participants' needs. This experience taught the sociotherapists to specify why participation in a subsequent group was desirable, and to argue cogently and reassuringly why specialist aid was required.

Strengthening local organisational capacity

The organisational capacity of local institutions was positively impacted at the community level. Sociotherapists themselves made arrangements with participants on meeting times and venues. Where necessary, they made arrangements for the use of rooms. As they carried out these and other logistics operations on a weekly basis, they developed skills that did not go un-

noticed on the part of local authorities. People participating in sociotherapy sooner lent a hand in the activities of local organisations (as the example below illustrates).

'Before I took part in this activity, my perception of my family was that my father was the only person with the right to speak out. He alone had the final say in the family. But now that I have participated in a sociotherapy group fifteen times, the whole family comes together nowadays in order to decide on subsequent steps. In our family it no longer happens that one person is in total control'.

'If something unpleasant occurs in our community, regardless of who is involved, we all convene as a community and we discuss the situation and resolve a problem together. Nobody can just imprison another person anymore or take legal action against us. Our community is under control.'

Source: YouTube, video Sociotherapy in Liberia 2017.

12.4 Motivating factors

There were various motivating factors at play, four of which I would like to mention here:

- The structured way of cooperation, which took shape and gained depth as the exercises and various activities were carried out. The trainees were assured of each other's and the staff's support.
- The wide variety of attractive activities. Outlooks were broadened in playful manner so that renewed attention could be focused on the meaning of joyful events (a pregnancy, the birth of a child, a forthcoming wedding) and such subjects as victimhood, jealousy or single motherhood could be cautiously discussed.
- The loyal attendance and participation of the trainees, and their eagerness to learn. The available training time was thus used to the full. Trainees' eagerness to learn made it easier to transfer responsibility for the outcome of the training.
- The broad composition of the training groups. This had two effects: a) insight was developed and shared about patterns of existing social relations that were characterised by unfiltered dynamism and b) the trainees learnt from and experimented with the pros and cons of a corrective social climate.

12.5 Hindering factors

There were also various hindering factors at play, of which I mention again four:

- A hindering factor in all training groups was the prevailing idea that obedience is a virtue, and disobedience is not. This hindered the expression of a constructive critical attitude and maintained personalised forms of governance. And it kept alive a fear of losing one's good relations with God.
- Another hindering factor concerned the differences in educational level and attendant differences in status. Some trainees were therefore ahead of others, from internalised habit and/or ambition, while others looked up to higher-educated trainees. Trainees who were ahead (more often men, who already had a head-start) were the cause, if they were not corrected, that other trainees had less opportunity to, for example, practise the skills required for coaching sociotherapy groups independently. It was necessary to correct both the trainees with a higher level of education and those looking up to them. This necessity, however, of correcting both the higher educated trainees and those in awe of them had first to be figured out by the trainees themselves. I then found that trainees had to overcome a formidable obstacle to correcting behaviour themselves.
- It is a hindering factor when a coordinator and a trainer cannot reach agreement on how the organisation of the entire community-based sociotherapy programme should, preferably, be managed. If a coordinator opts for classical top-down management, this is difficult to reconcile with the position of the trainer, whose aim is to develop the trust and confidence on which a constructive critical attitude can be built.
- Similarly unhelpful was the difficulty trainees had in imposing limits, so that the sociotherapy groups became larger than was desirable, both for guaranteeing over-all quality and for ensuring the sociotherapists' well-being. And as the group size limit was exceeded, the available hours were, as a result, felt to be inadequate, as were the number of sessions.

12.6 The volume of community-based sociotherapy

My acceptance of the invitation from the Anglican Diocese in 2004 to return to Byumba was, to use Hannah Arendt's words, a beginning of something new that could not have been expected. So far, a total of 1101 sociotherapists (99 plus 1002) and 49,650 participants in 4943 sociotherapy groups, and many more people who are indirectly involved (cf. Table 12.1) have valued the new experiences. Moreover, once their participation in the fifteen meet-

ings was completed, hundreds of sociotherapy groups combined the pleasure of the weekly meetings with the business of an initiative that ensured their livelihood.

Table 12.1

Place/ Country	Period	Number of sociothera- pists initial- ly trained by me and a co-trainer	Number of sociotherapists who themselves facilitated training for new sociotherapists	Number of new socio- therapists trained	Number of socio- therapy groups facilitated by these	Number of participants reached
Rwanda, Congo, Liberia	2005- 2013	99	12	255	2050	20,500
Burundi	2010- till now		4 from Byumba	12	Unknown	Unknown Extended to 3 provinces in 2011
Goma in Congo	2011- till now		2 from Nyamata	20	20	200
8 districts in Rwanda	2013- 2016		15	500	2680	26,800
South Kivu, province in Congo	2017- 2021		4	72	54	648
Kakata in Liberia	2014- 2017		2	11	77	770
Bukavu in Congo	2017- 2018		2	12	6	60
8 places in Liberia	2018- 2021		8	112	56	672
Total	2005- till now	99	49	1002	4943	49,650
						Indirectly involved
						(49,650 x 5) 248,250

In the years between 2004 and 2018 I travelled to Africa many times, staying there for over 500 days.

- The experiences described in this handbook were gained between 2004 and 2013. In addition to the initial 99 sociotherapists, another 255 colleagues were trained by a great many from these 99 sociotherapists in this period. They made it possible that (with an ideal size of ten participants per sociotherapy group) at least 2050 sociotherapy groups convened, thus reaching 20,500 participants.
- In 2010, four of the Byumba sociotherapists from the first cohort trained twelve colleagues from NGO HealthNet TPO in Burundi. In 2011 this NGO took sociotherapy to three provinces in Burundi, integrating it, as of 2013, into a large-scale intervention and research programme of family planning and reproductive health services. (HealthNet TPO, 2016 Annual Report, 'The SRHR project in Burundi'). The 2013-2016 program was financed by the Dutch Embassy in Burundi.
- Two sociotherapists, trained first in Nyamata themselves trained eight sociology students in Goma, East Congo. A next pilot, supported by the Dutch foundation Society for Medical Anthropological Research and Theory (SMART), and facilitated by the Goma based NGO Africa Restoring Bridges Initiative (ARBI), ended up with 20 sociotherapists. The pilot reached 200 participants between 2015 and 2016. (Source: Website Richters, A., 2013-2016).
- Between 2013 and 2016 the Dutch embassy in Rwanda made it financially possible to roll out the sociotherapy programme in eight districts in four Rwandan provinces. Fifteen sociotherapists from the first cohorts in Byumba and Nyamata advised and trained a team of prospective trainers and researchers. Together they recruited five hundred trainees and trained them in coaching sociotherapy groups. The well over five hundred sociotherapists reached almost 26,800 participants.
- In 2017, six out of sixteen Congolese sociotherapists who had been certified the year before and had since then organised themselves in an NGO of sociotherapists, Paix & Développement Durable (PDD), trained thirty-six new colleagues in the northern part of the East Congolese province of South Kivu. In 2018 they trained another thirty-six colleagues in a nearby area. The 36 teams facilitated 54 groups and reached 648 participants. The training took place as part of a clustered programme set up by ZOA, War Child and the Association of Dutch Municipalities. This cluster is financed by the Dutch Ministry of Foreign Affairs from 2017 to 2021. Aim of the organisations is to start a democratic dialogue.
- In cooperation with the Congolese Bukavu-based NGO Peace and Conflict Resolution, PDD also trained another group of twelve new colleagues

at the end of 2017. This group facilitates six sociotherapy groups per fifteen weeks. This initiative was possible at the request of the Centre for International Cooperation of the VU University Amsterdam, and was funded by NUFFIC (Netherlands Universities Fellowships For International Cooperation).

- Another 660 participants were reached by the 21 Kakata sociotherapists in 2015. The sociotherapists originally trained in Kakata trained eleven new colleagues, thereby reaching another 110 participants in 2017, which altogether amounted to a grand total of 770 participants.
- The Swedish Development Cooperation Agency has made funding available to ZOA and YMCA (Young Men's Christian Association) for extending the sociotherapy programme to eight locations in five counties in Liberia for the 2018-2021 period. Assisted and supervised by two Dutch trainers, eight previously trained sociotherapists in Kakata trained 112 new colleagues in 2018. As from March 2018 they will facilitate 56 groups in 15 weeks. The Liberian sociotherapists reached so far 672 participants. After this first cycle they plan to facilitate 112 groups every 15 weeks.

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About the author

Cora Dekker (1944). After primary school, I attended a vocational school for domestic sciences between 1957 and 1958. Not until 1968 did I have an opportunity to train as a maternity nurse and while I was working as such, I took a correspondence course which gave me access to the in-service courses in general, and later, in psychiatric nursing. During my courses in the units of the Santpoort Provincial Psychiatric Hospital [Provinciaal Psychiatrisch Ziekenhuis] I was introduced to sociotherapy.

I alternated my positions in various Dutch healthcare institutions with a stint as a member of the Provincial Council for the province of North Holland (1982-1987), with further training in District and Community Psychiatric Nursing and with a nursing secondment to Zimbabwe (1991-1995).

Between 1995 and 2009 I worked as a sociotherapist in clinical programmes for war-afflicted refugees in the Netherlands. In addition, I was a (part-time) lecturer in Social Work at University of Applied Sciences Leiden between 2002 and 2011, for which I received a teacher training certificate in 2003.

From 2004 I also developed and supervised the community-based sociotherapy programmes in Rwanda, East Congo and Liberia, provided training and supervision, and did research. This led to the defence of my PhD thesis in 2016.

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This handbook describes the process of training community-based sociotherapy in four geographically and politically diverse areas where war had left deep scars. The training is aimed at developing three skills in targeted groups: the ability to facilitate sociotherapy groups in their own region, to recruit and train more sociotherapists and set up and maintain an appropriate sociotherapy organisation. Dialogue proved to be a suitable tool for arriving at the right training content and form. Dialogue brought about enthusiasm, but also caused confusion and uncertainty. Family-like feelings developed without the presence of a 'strictly controlling father'.

Playing games on a daily basis facilitated participants to give meaning to these experiences.

A variety of inter-referring methods proved to be the route to a participatory process of increasing safety, trust, care, respect and having a say in collective affairs. These concepts were used as the subject of further conversation.

Training in this group-oriented way at the same time brought about change in the sociotherapists themselves: in their perception of role definitions, in their expectations and thoughts on the meaning of values that always play a role in social change.

Their regained dignity was thus, ultimately, the result of their own participation. Mutual trust and social assistance returned thousandfold and were perceived as reliable and sustainable.

Cora Dekker (1944) was born in Harenkarspel, the Netherlands. Her continued primary education between 1957-1958 included basic household management skills. She later qualified as an all-round nurse as well as a lecturer in higher vocational education. From 1995-2009 she worked as a sociotherapist in Dutch clinics specialised in treating war victims and taught Social Work at Leiden University of Applied Sciences. In the 2005-2018 period she also initiated, trained and supervised community-based sociotherapy initiatives in Rwanda, East Congo and Liberia. Since 2012 she worked to develop the PhD thesis that she defended in 2016.