



BAGH: A Time to Tell Our Story **By Dr Stewart Falkes**



The earthquakes and landslides that brought such devastation and human tragedy to Kashmir became a powerful media story from November 2005.

The seismic waves and ripple effects of world news were as nothing compared to the horror and incomprehension they were trying to portray.

The broad narrative that followed was gargantuan: the mass grief and numbness, as family and friends were pulled from the rubble; the after-shocks, rising death toll and the growing fear of winter; the airdrops of supplies; the involvement of aid agencies and the thin promises of the international community; and, more recently, the complex task of reconstruction, the Non-Government Agencies (NGOs) and the government compensation.

The tale is of the vastness of the tragedy, of destruction, human misery and survival, the attempts to stimulate rebuilding and recovery. Amid the enormity and the scale, inevitably what got buried were the individual stories, the accounts of those who without shovels tried to remove the bodies of their families from schools and houses. Their personal narratives were as enveloped by the grief and trauma, as were the bodies of their wives, husbands and children covered by debris and earth. Nearly half a year later, since the catastrophe, it is certainly crucial to rebuild and develop and it is also the time to listen to tales of fear, accounts of suffering and stories of living and dying.

At this time then, amongst the alphabet of aid agencies, government bodies and NGOs, all doing the essential work of rebuilding roads, constructing permanent shelters, tackling the problems of sanitation and hygiene and re-establishing training and education, also came a small group of psychotherapists and counsellors to hear. Working with the National Rural Support Programme (NRSP), this group came to Bagh recognising that after some months the individual who has experience of extreme trauma and grief, is able to begin the process of healing, of speaking out, of wanting to be heard. The sheer size and scale of the tragedy meant that in such a community there were many voices to be *listened* to but few that could *hear*, as they had their own issues. The first priority of the 14 volunteers was to liaise with the NRSP.

The worst thing to do for those offering help is to cause confusion or to be competitive rather than to focus their attention on getting to the camps and villages and giving time to the people who needed it. The feeling of the counselling team was that there was so much rivalry between the NGOs, as many of them had to justify their funding by demonstrating how much work and assistance they were providing. The second key issue was to try to ensure the work done by the volunteers, no matter how committed, was expanded by the training of sanitation and hygiene workers who wished to offer emotional as well as technical support.

And so, the very next day, the training began.

After the arrival of the fieldworkers, a meeting was arranged with Dr Aamer of Alleviate Addiction Suffering (AAS), Ms Lynne Kaye and Mr James Gidlow-Jackson of the Centre for Personal and Professional Development (CPPD, London) who had already been training counsellors in Karachi since 2001.

In a makeshift lecture room, on the edge of the NRSP encampment, Dr Aamer offered guidelines as to how post traumatic stress disorder could be recognised. He was followed by the two members of CPPD, who had funded their own trip, who spent their time looking at basic counselling skills. Their main messages were:

- i) to 'speak with your eyes'
- ii) not to feel that you must say something
- iii) not to try to make things better: it would not be possible to replace their dead
- iv) or to make good government promises and above all
- v) not to just *listen* but to *hear*.

These training sessions were to be the first of many; the volunteer counsellors were to support 5 or so of the fieldworkers and they would, in their turn seek to pass the experience to others. It was significant, and poignant, that during the inaugural training most of the sanitation and hygiene personnel were individuals who had their own stories of loss and grief to tell. The trainers, in their programme, were keen to recognise that those before them also needed to be heard, that they too would be subject to 'survivor guilt': the "why did I live and why did they die."

It was then that the trainee counsellors began to perform the job they had come to do: to visit the tents, prefabricated houses and schools to offer support. They went to the tented village of Sarbuland and the more ramshackle settlements outside in the surrounding hills.

This group heard, gave time to and validated the experiences of those men, who felt impotence at returning home from work to cracked masonry and twisted metal with no tools but their bare hands; to women, who felt anger and helplessness at the loss of their sons, fathers and husbands when they themselves had survived; and to children, fearful with no-one to trust their family members dead.

The people of Sarbuland Village and the steep slopes of Bagh were not merely humble and hospitable but pleased to be able to talk, to have time to tell their story. Even though they were overwhelmed by rage, by fear and feelings of “what could anyone do about it?” they offered tea, kindness and the greatest privilege of all, a willingness to talk. Some believed that the earthquake had come because God was angry with them. However, the job of the counsellors was to honour their faith and, at the same time, to move the people away from looking for grand causes, focusing instead on the personal journey they had made since their trauma. Many villagers were still experiencing flashbacks of the horror, that prevented them sleeping and eating. Subsequent tremors rekindled a good deal of the fear and this was especially the case amongst the children.

The personal aftershocks too continued to reverberate with a multitude of worries and uncertainties: when would government compensation arrive and how much would it be? When would the sanitation and water supplies be available locally, rather than being so far away that many women took over an hour and a half to make one journey to fetch water? How many of the men would need to leave the valleys of Bagh to migrate southwards in order to make money to send home to those they would need to desert to do this? Of course, these very real issues could not be addressed by the trainee counsellors, but what mattered too was they could show they were at least hearing. They acted as eyes and ears that could say “your grief, fear and uncertainties are real, this is what has happened and is happening to you.

What is as profound as the crumpled corrugation, the slouched, cracked walls, the twisted metal and the invasive earth and rocks, was the resilience of the people of Bagh. Their individual stories need rescuing from underneath the rubble and debris of the larger narrative of a disaster – and this is a process that should begin now. Their willingness to tell is there; if they are simply listened to they are expressive about the problems they are facing.

As the counselling group left ‘a camp with no name’, a little way outside of Sarbuland, they were told: ‘So many people have come to see us and gone away, but none have come and sat and listened, until today.’