## Global Echoes

*BJPsych International* would like to encourage submissions from medical students, foundation doctors and psychiatry trainees for publication in 2017.

We believe that those who are beginning their careers in mental health are often involved in high-quality projects or have diverse training and clinical backgrounds that would be stimulating for our readers to discover. We also strongly feel that you represent a valuable source of knowledge that can help all professionals to keep abreast of what is happening in the field around the world. We want you to voice your perspectives and allow your interests to find a home in our publication. We place particular value on hearing of your experiences and the lessons you have learned, as well as your awareness of the literature in your area of interest.

We would like to receive submissions in the following areas, with a focus on international mental health work, although we would be happy to discuss other topics. Submissions should be between 500 and 1500 words and original pieces, with references as appropriate.

 Brief literature reviews on mental health policy, promotion, provision of mental health services or other areas of interest to those working in global mental health.

- Articles on completed projects in mental health, particularly
  if collaborative and with a focus on outcomes which
  benefit those working in psychiatry globally. These may
  be research focused or relate to local schemes or smallerscale interventions, but should not be research reports in
  conventional format.
- Reports of elective projects in psychiatry or other experiences of working or volunteering abroad in mental health.
- Reports about experiences in training in psychiatry worldwide.
- Thematic papers on a particular topic of interest encountered during your training, featuring original commentary.
- Reflective or descriptive pieces about work you have undertaken or experiences or challenges encountered in working around the world, or in carrying out research in challenging contexts.

If you would like to contribute, please email us (ip@ rcpsych.ac.uk). Your work will undergo peer review in line with other submissions we receive. Please see the online BJPsych International guidelines on format and style (http://www.rcpsych.ac.uk/usefulresources/publications/journals/submitpapers.aspx). Note that the Harvard system of referencing should be used.



## Listening to silence – trauma and recovery in post-golpe Chile

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School of Medicine, Medical and Biological Sciences, University of St Andrews, UK, email lindsey. kent@doctors.org.uk I visited Chile for the first time in 2003. Over the course of the 12 months during which the country became my home, I realised there was a secret side to the capital city, Santiago. Never was this clearer than when I witnessed a demonstration to mark the 30th anniversary of the 11 September 1973 coup, when General Pinochet took power. I watched tears stream down the cheeks of men and women as they sang along with the revolutionary Cuban folk singer Silvio Rodriguez, raising their fists in the air. I felt the distrust of and anger towards the police who lined rooftops with snipers and the military units which filled side streets with water cannons. It was a visceral experience, made more so by the contrast with day-to-day life on the city's streets. This was a boom town, proud of its malls and economic growth, and the residents of Santiago made every effort to remark upon their high standards of living.

In contrast, there was a marked silence about the long history of the Pinochet regime, infamous for human rights abuses, including torture, lengthy detentions, murder and disappearances. While some felt the General was the man who saved Chile from communism and made the country an economic force to be reckoned with, others saw him as a despotic leader who silenced all those who stood in opposition to him and carried out abuses with impunity. These two perspectives on Chilean history, almost unbelievably contrasting in their stances, divided Chilean society and often meant that those who had suffered during this period were left to inhabit their silence. This was partly self-censorship but is understandable when there was seemingly no national or unified narrative which acknowledged their suffering, or any significant punishment of those responsible. They were left to quietly face the long-term consequences associated with surviving human rights abuses and institutional violence, including mental and physical ill-health, social isolation and economic disenfranchisement.

On only two occasions did I hear echoes of stories hidden – a woman who remarked that she had never seen her daughter or grandchildren again after they were forced into exile, 'like so many others'. A man spoke of his changed life, playing music for tourists in the streets of Bella Vista after losing his job as a pilot following the coup. These were such quiet echoes, buried in the

busy mêlée of day-to-day life in Santiago's bustling centre.

On my return to Chile in 2016, I was keen to listen hard to the stories that Chile had to tell me now, so many years later. Had things changed? Would people talk more freely about their experiences and their lives during that period? What became of those who survived, and had breaking their silence been useful? Had participating in restorative justice processes helped or hindered them?

I worked closely with the Universidad de Valparaiso and a team of inspiring researchers in setting up a small study to examine testimony from survivors of human rights abuses as well as interviews with those who had worked with them in a professional capacity in the years following Pinochet's rise to power. As we talked over the project, it began to evolve before us. At the heart of the work was a desire to understand how breaking silence could be an important part of overcoming trauma. I wanted to hear narratives, collect personal stories and perspectives and use qualitative methods to consider in what way survivors felt they had overcome an extremely difficult time and had in some cases even begun to find strengths of which they were previously unaware. This idea, that post-traumatic growth is possible, became the focus of our work. To discover more, the first step was to start to listen.

Over 2 hours, in a quiet postgraduate study room, I watched the first of the tapes with my Chilean colleague. And we listened, hard, to the story of a life of a woman who had suffered extreme violence during the regime. Yet she could still talk positively of her girlhood, of her sense of purpose in her life after leaving prison. She spoke of uncovering a strength within her that terrified her, an inner metal that she had absolute certainty would ensure her survival. She spoke of how using her voice to tell her story, to call out perpetrators and to protest about the farce of restorative justice which selected the voices it heard - how her voice and her story became a source of strength. We cried as we listened to her describe horrific events. We shared nods of agreement as she described herself positively as having something significant to offer. It seemed that she was describing elements of posttraumatic growth and that by reflecting on her story and ruminating on the past and identifying strengths, she finally felt she could lead an existence that brought her satisfaction. She continued to grow, despite the events she had experienced.

Post-traumatic growth is a relatively new concept that continues to court some controversy. There is a need to take care when using the term. It is not the case that survivors 'grow' because of their trauma, more that the experience of overcoming negative experiences, continuing to live, and of reflecting on and sharing their stories can engender a recognition of strengths. This can be very positive during the continued work of managing their traumatic experience and finding a way to lead lives they feel

are productive. They continue to progress, despite what they have had to overcome. An approach which aims to encourage survivors to focus on strengths has been used by therapists who have worked with trauma survivors in Chile. Often they identify with patients any protective and helpful factors, including those associated with themselves and their outside contexts, which provide strength and support. The key, as mentioned during an interview with a psychologist, was to listen. Equally important was to find a way to help survivors listen to themselves, too, and remain with them as a supportive partner as they begin to explore the spaces their stories inhabit.

There are other professionals for whom the idea of post-traumatic growth is not valid. They feel this because, in their experience, survivors of trauma may not encounter a new way of living that they see as positive. They may continue to face chronic health problems and their difficulties can be compounded by the impunity granted to state actors and institutions and the loss of socioeconomic status that can perpetuate trauma and ill-health. There are many factors involved in how a person is affected by trauma over time. By placing the emphasis on survivors as the ones who should work to ameliorate their own suffering, without efforts to address the other levels and factors which strongly impact on their ability to achieve a good quality of life, there is a loss of justice and balance. It seems unfair. More than that, some psychiatrists feel it is impossible. There are those who report no cases of post-traumatic growth during their practice at this difficult time in Chile's history.

Throughout my time in Valparaiso, a beautiful coastal town composed like a work of art of hundreds of coloured houses tumbling down steep hills, I continued to listen hard. As I shared information about the project that we were carrying out, more and more people shared their stories, both those whose families were previously conservative Pinochet supporters and those who had come from left-wing homes. My housemates recounted a much reported story, that of a 1987 shooting in central Santiago. Maria Paz Santibanez, now a famous pianist, was shot in the head at point-blank range by a policeman during student protests. She recovered, and was helped on the scene by a young medical student. He would later become one of Chile's eminent psychiatrists, Dr Rodrigo Paz. Much later, he commented that the policeman, who broke his silence in 2014, had appeared terrified. Dr Paz was unsurprised that the policeman felt like a victim too, of the many complex circumstances that led to the events of that day. And as I listened to this tale, and could see that in Chile there are connections between people and places that are closer than they appear, I began to see how a patchwork of stories could add up to a brand-new narrative for a country previously so bitterly divided. And the first step, the simplest of all, is to listen bravely. Especially where previously there was silence.