2. The CWWPP – Page Text

In this page of the course, we want to tell you a little of what the CWWPP is, what we do, and the standpoints that we take.

Charles David Tauber, M.D. CEO of the CWWPP

The leader of the course, Charles David Tauber, is a physician. He got his medical qualification from the University of Groningen in The Netherlands in the late 1980s. After that, he did a number of graduate courses in psychological trauma, general practice, forensic medicine, and other medical areas. I’m one of the founders of the CWWPP.

He grew up in a refugee family in a refugee neighborhood in New York. Thus, he learned a good deal about refugees and traumatization at home as well as professionally. By the way, one of his grandmothers was an illegal immigrant to the USA.

He has been working in movements for social change since 1966, first in the environmental and peace movements and later in work with refugees and asylum seekers. He also has had training and experience in non-violent conflict transformation.

The Beginnings of Pragmatic Empowerment Training (PET) and the CWWPP

When he finished his medical qualification in 1988, Tauber became a member of the Amnesty International-International Physicians Medical Examination Group and other Dutch local and national groups giving assistance to asylum seekers in their requests for asylum. The group also was treating asylum seekers where other doctors weren’t. As we’ll see later in this series, working with asylum seekers is not easy, and it takes special skills and a large amount of time and energy. At the time the group was working, there were a lot of very good people volunteering their time and effort with asylum seekers. There also were staff members of the asylum seekers centers. Most of both groups of people had little or no education with such people, that is, with the cultural differences and the high levels of traumatization, and they were not getting assistance with the traumas that they themselves were getting by hearing the stories of trauma. Out of that, the education and supervision method known as Pragmatic Empowerment Training, otherwise known as PET, was born. We will discuss PET in detail on the next page of the course.

In the early 1990s, the wars in the former Federal Socialist Republic of Yugoslavia broke out. Some of us from various groups formed a working group on the region. The CWWPP was formed out of that.

Tauber came to Croatia, Bosnia-Herzegovina, and Serbia in June 1995 and the CWWPP has been here ever since. Our main field office is in Vukovar in eastern Croatia, which suffered heavily in 1991.

The region in which we live is on the Danube River. The cultures here are 8,000 years old and one of the first calendars in Europe was found close by. It’s a beautiful and fascinating place, but also a sad one in many respects.

Registration

Formally, we are a non-profit organization registered in The Netherlands (a “stichting”). We also have a local organization registered in Croatia and are registered as a foreign organization in Bosnia-Herzegovina. In the USA, we have a fiscal agent, the Baudouin Foundation of the USA.

The Aims and Functions of the CWWPP

The main aim of the CWWPP is to increase capacity in working with psychological trauma and the physical consequences of it. We know there are not enough psychologists and psychiatrists and social workers and others around to deal with all the people who have reactions to severe traumatic events such as wars, natural disasters, discrimination, migration and other man-made and natural disasters. We also know that, very frequently, experts don’t reach people on the ground as well as their friends and neighbors can. It’s not that the experts don’t have the knowledge, but they’re at a higher level. Thus, what the CWWPP does is to train people on the ground, in villages and communities, to assist one another. They then become “barefoot therapists”, who otherwise are called “peer supporters”. We use the method known as Pragmatic Empowerment Training, PET for short, to do that. We will explain PET in detail on the next page of the course.

We also do a very limited amount of direct counseling with anyone who comes to our door.

Another important part of our work is giving psychological supervision to people who are assisting other people. When we work with people, unconsciously, we absorb some of their traumas. We also tend to work too hard when we care about something. This leads to reactions called burnout, which we will explain in detail later in this first course. Psychological supervision means that anyone who is working with other people talks to someone else and gets out the absorbed traumas and tries to get balance into his or her life. Every person working with traumatized people needs supervision, be they psychologists or doctors or teachers or volunteers. We will come back to supervision very frequently in this series.

Our Biases and Standpoints

Before going further, we want to discuss our biases and prejudices and our standpoints. We all have them, whether or not we’re aware of them or not. We would ask you to become aware of yours.

First, we believe that all people should have control of their own lives and should take that control. Our mission is to give people the knowledge, skills, and attitudes to do so. That’s called empowerment.

Next, we don’t believe that we have all the answers. Thus, we believe that any learning process, and any process of interaction between people, is a two-way street. Thus, we never stop learning. Certainly, we don’t have all the answers.

In a similar way, we believe in working from the bottom up rather than from the top down. Like the psychologist Carl Rogers, we believe that people have the answers to their own issues, rather than having those answers dictated from above.

With regard to psychological trauma, we believe that people have normal reactions to traumatic events and that those reactions are not pathological. The reactions can be psychological and physical and usually are a combination of both. Although there are some common combinations of reactions, the specific combination is individual to the person. We’ll talk about those common ways of reacting later in the series. The important point here, which we will come back to many times, is that, if you have a reaction to traumatic events, you’re not sick.

Another point here is that the work in dealing with traumatic reactions is long-term. It is very rare that things happen overnight, as much as we would like them to. It takes patience to deal with them. That’s difficult.

In a similar way, we don’t believe much in drug therapy. We know that drugs can assist with relieving symptoms sometimes, but they don’t get to the heart of the problem. That takes a variety of types of work, which we’ll discuss later in the series. Again, the type of work that is effective is different for each person and can change in the course of time.

Finally, we believe in self-help groups, also known as mutual interest groups, also known as Balint groups. These are groups of people with similar interests who get together to discuss the issues affecting them. These can be people with specific experiences, people living in a village, people with a specific disease, former solders, teenagers, and a very wide variety of people in other circumstances. Frequently, people in such groups know more than the experts. Also, knowing that you’re not alone and that you can share with someone else helps a great deal.

Please think about the points we’ve made here. If you’d like to, please post your views about what we’ve said and about your own biases. Please remember that everyone and anyone can see what you’ve written. You also can write to us directly at cwwppsummer@gmail.com.