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Psychosocial Care of
Tsunami-Affected Populations

Caring for Your Own Emotional Well-being

Guidelines for Relief Workers

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For additional information contact: Dr Vijay Chandra, Regional Adviser, Mental Health, WHO/SEARO (chandrav@whosea.org)

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MESSAGE FROM THE REGIONAL DIRECTOR

December 26, 2004 will forever be a date that haunts our memory. It will always be associated with the massive earthquake in the Indian Ocean which generated the destructive Tsunami waves that battered the shores of many countries. Unfortunately, the WHO South-East Asia Region bore the brunt of the devastation. Among our Member States, Indonesia, Sri Lanka, Thailand, India and Maldives were affected the most. Myanmar and Bangladesh were also affected, but to a lesser degree.

WHO immediately responded to the disaster. During the early phase of the crisis, our priority was the provision of technical advice to governments of affected countries to help them take care of the immediate threats to human health.

Given its sheer magnitude and scope, no single organization can adequately cope with the disaster alone. WHO is supporting national health authorities of the affected countries in close coordination and cooperation with other agencies. Never before have organizations of the UN system demonstrated such an ability to respond to the immediate needs during a crisis with unity, professionalism and speed.

In addition to providing technical support on health issues, we were very cognizant of the psychosocial needs of those affected by the Tsunami disaster. Technical guidelines were immediately made available to governments and disseminated widely to agencies working in the field. It was widely recognized that impairment in psychosocial rehabilitation can affect efforts in physical rehabilitation.

Providing psychosocial support to communities affected by the Tsunami disaster is a key component of the Organization's long-term strategy to rehabilitate the damaged public health infrastructure.

I am confident these manuals will be found useful by community-based workers who will ultimately provide the psychosocial support to those affected by this unprecedented tragedy.

Samlee Plianbangchang, M.D., Dr.P.H.
Regional Director

PREFACE

The Tsunami disaster has imposed a huge burden on communities, not only physically but also in terms of the psychological trauma inflicted on them. It should be noted that EACH AND EVERY PERSON in the population is psychologically affected to some extent. Thus, in terms of numbers, the magnitude of the problem of psychological trauma of the disaster affected population is as large as the size of the population. It is imperative that psychosocial interventions be made accessible to each person in the community, because psychological distress can hamper rehabilitation and resumption of normal life.

WHO's policy on mental health/psychosocial support to disaster victims is that it should be community-based and culturally appropriate and take into account the needs of special groups such as children, women, the elderly, etc. WHO recommends that psychosocial support be provided to affected communities by community-based workers who understand the needs of disaster victims and are trained by experts in psychosocial support methodologies.

The role of the WHO lies in defining the psychosocial needs of the community, establishing technical guidelines to be used, providing technical support to governments, NGOs and other stakeholders involved in psychosocial support, as well as training people for the implementation of psychosocial support strategies, monitoring and evaluation of programmes. Actual implementation in the field can be done by community-level workers, NGOs, self-help groups and other UN groups, etc., using WHO guidelines. All activities should be in collaboration with the Ministry of Health and the WHO Representative office.

This set of manuals, prepared by a group of experts has been developed for use by community-level workers entrusted with the responsibility of providing psychosocial support to the community. The manuals recommend increased community outreach, taking into account the needs of special groups such as children, women and the elderly, while offering a culturally appropriate approach to support.

It is hoped that the training these workers receive will enable them to reach each and every member of the community and provide them with the appropriate level of psychosocial support needed. In addition, relief workers can learn how to care for their own emotional well-being, so that they can handle the stress of relief work and serve the community better.

1. INTRODUCTION

Workers participating in rescue and relief work after a disaster are exposed to stress which may affect their own emotional well-being. It has been observed and documented that relief workers develop stress-related problems during their work and even after relief work is over.

Supervisors must make sure that field workers are properly briefed about what to expect in the situations where they are going. Many community-level workers will never have seen mutilated bodies or misery in such a large scale as in disasters. They must be appropriately counselled on these matters before they start their work.

You have been (will be) doing a very noble job by providing relief services to disaster affected communities. You might be working overtime, over exerting yourself, witnessing the plight, trauma and loss of people very closely and in the course of your work, perhaps, frequently realizing your limitations in helping them. All this is likely to put you under severe stress and lead to what is often called "burnout". It is your responsibility to manage this stress and control its untoward effect on your emotional well-being and psycho-physical functioning. This is important not only for your own well-being but because it can also affect your ability to serve disaster-affected people. This module provides information about the possible factors causing stress to relief workers and also provides guidelines to ensure your emotional well-being.

Before venturing out into the community make sure you are properly prepared in terms of living arrangements, food arrangements and communication needs. It is very important to keep in touch with your family and friends.

2. STRESS IN RELIEF WORKERS: WHY DOES IT OCCUR?

You are constantly exposed to stress during relief work due to the following reasons:

- You are repeatedly exposed to grim experiences such as handling bodies, dealing with multiple casualties, powerful emotions and tormenting stories of people affected by death and loss.
- You frequently carry out physically difficult, exhausting, or dangerous tasks.
- You are exposed to unusual personal demands to help meet the needs of survivors.
- Frequently, you put your own physical and emotional needs at low priority to ensure maximum service to disaster-affected people.
- You neglect your sleep, food, and at times, even personal hygiene in your excessive concern for survivors.
- At times you perceive that you are not able to do enough for people and therefore you feel frustrated and helpless.

- At times you feel guilty that you have better access to food, shelter, and other resources than the survivors.
- Frequently, you face moral and ethical dilemmas.
- You are exposed to the anger and apparent lack of gratitude of some affected people.
- You may be away from your home and family which deprives you of a very effective psychosocial support system.
- You may feel frustrated by the policies and decisions of your superiors.

3. WARNING SIGNS OF UNMANAGEABLE STRESS

You should be aware of some warning signs of unmanageable stress either in yourself or in your colleagues. These signs include:

- Mental confusion, inability to make judgments and decisions, inability to concentrate and to prioritize tasks
- Inability to clearly express verbally or in writing
- Anxiety, irritability, depression, excessive rage reactions
- Neglecting one's own safety and physical needs
- Sleep difficulties
- Appetite disturbances
- Excessive tiredness
- Progressive decline in efficiency
- Loss of spirit
- Self-blame
- Decreased self-esteem
- Heroic but reckless behaviour
- Grandiose beliefs about yourself
- Excessive use of alcohol, tobacco or drugs

4. WHAT YOU CAN DO FOR YOURSELF

4.1 Self-help tips to reduce stress during relief work

- Try not to be emotionally involved, i.e. do not transfer the grief of others on to yourself. Be very kind and humane but be somewhat detached. Keep a perspective on things.

- Be proud of yourself for volunteering your services. Realize that your work is very important even if at times people do not appreciate this.
- Remember that your reactions are normal and largely unavoidable.
- Be aware of your tension and consciously try to relax. You may also do deep breathing exercises for 10 to 15 minutes once or twice a day.
- Try to find time to do something you enjoy e.g., listen to music, read a book, go for a walk or a jog, play with children, connect with a friend etc.
- If you cannot sleep or feel too anxious, discuss this with someone you can trust. Don't take sleeping pills, tranquilizers, alcohol or other drugs.
- Talk to someone with whom you feel at ease; describe to him/her what you were thinking or feeling. You may want to talk about very stressful things that you have experienced or witnessed during the disaster or you may want to talk about the stress of relief work and how you are coping with this. It is your choice whether or not to focus on traumatic events. It can be helpful to discuss traumatic events but you should not be hurried or pushed to talk about it. Neither should you push others to talk and think about events they may not yet be ready to focus on.
- Listen to what people close to you say and think about the event. It has affected them too, and they may share insights that will benefit you. They may also share with you their ways of coping with the suffering.
- Stay actively engaged in day-to-day activities, if possible. Continue to work on routine tasks if it is difficult to concentrate on demanding duties. Ask your colleagues/supervisor to reschedule your duties if work is too difficult.
- Tell your peers and team leader/supervisor about how the distressing event and the current stress are affecting you, so that they can understand.
- Avoid inflated or perfectionist expectations, either about yourself or others, lest you feel frustrated.
- Participate in peer group exercises to discuss and find ways of coping with the stressful experiences.
- After a few weeks if you still feel uneasy about your reactions, you should seek professional advice.
- Do not self-medicate under any circumstances.
- If at all possible, communicate with your family on a daily basis.
- Try to practice meditation. This can be very helpful in coping with stress.

How to do deep breathing exercise

Lie on the floor or on a bed. Place your hands on your stomach. Close your eyes or turn them towards your stomach. Feel the parts of your body that are in contact with the floor, or the bed – your heels, your calves, your bottom, your back, the back of your arms, and the back of your head. Try to relax your stomach so that your breathing can reach the lower part of your stomach in a natural way. Pay close attention to the movements of your stomach and your hands.

Count to two slowly in your mind while breathing in. Then count to four when breathing out. Wait patiently until you feel the natural need to breathe in again. Breathe quietly the way you usually do.

Meditation

Many cultures have a way of meditating. Meditation can be very helpful in relaxing the mind and in coping with stress. Meditation, regardless of the method used, can be as effective as the other methods of reducing stress that have been described in this manual. Find out whether there is anyone in your community who can teach meditation. Experienced teachers can be a great help.

Most meditation techniques require:

- a quiet atmosphere
- a comfortable posture
- a “mental device” (a word, a sound, a symbol)
- a passive and receptive mental state.

This is true not only for meditation but also for yoga (e.g. hathayoga), elements of Sufism, Buddhism and Taoism, reciting verses from the Koran and certain forms of mysticism.

4.2 Self-help groups for managing stress

Relief workers should form strong bonds with their own colleagues and openly discuss the nature of their work and the possibility that it can be stressful. Small groups should be formed and the possibility of any of them getting “burnout” should be openly discussed. These discussions should start even before there is evidence of the workers being affected by stress. The group must realize that each person can have a different response to the

stressful situation. Nobody should be termed as “weak”, or be “chastised” for “breaking down”.

These groups can have three kinds of sessions to provide psychosocial support to members.

- (1) Informal interaction and socialization during and after work.
- (2) Formal sessions held periodically to discuss the work plan and other activities.
- (3) Specific group exercises aimed to discuss and find ways of coping with the stressful experiences of relief workers.

Peer support groups

Peer support groups is a process of initiating semi-structured group discussion which involves discussing the problems different group members face in their life and work. These may be problems that existed before the disaster, these may be problems of memories related to the disaster, or these may be problems faced after the disaster. In the course of these discussions group members are not in any way pressured to discuss in detail the sequence of events as experienced by each participant (relief worker). The discussion focuses on the cognitive and emotional reactions of relief workers who are trying to cope with the distressing situations that accumulate from their work and life experiences. Activities of the peer support group are carried out as follows:

- It is done in small groups (approximately 6) of relief workers.
- A person with experience in counselling leads the group.
- The group exercise is done in a supportive and confiding environment.
- It is done once or twice a week, and ideally with the same group members. Each session usually lasts for about one and a half to two hours.
- It begins with each worker reporting turn by turn a problem he or she feels comfortable discussing.
- This should be followed by other people asking questions to understand the situation better and to find out how the person has been feeling and coping.
- Group members brainstorm together on how to find better ways to cope with the problem.
- In this manner a problem of each group member is discussed for about 15 minutes.
- The group leader (and other participants) should show their appreciation of the work that the relief workers are doing and for being able to cope with the situation and its stresses. The positive gains made during relief work should be stressed here.

- Groups should advise and support relief worker(s) who have shared their difficulties in coping with the situation they encounter in the field. All discussions should be kept confidential and group leaders should facilitate an atmosphere of interpersonal respect and encouragement.

The group leader should be able to identify any relief worker in need of more specific and individual attention and help.

5. OTHER SUPPORTIVE MEASURES FOR EMOTIONAL CARE OF RELIEF WORKERS

Some of the measures which a distressed relief worker may need at an individual level for his/her emotional care are as follows:

- (1) **Consultation:** A relief worker should consider approaching his or her supervisor/ leader or a mental health professional, if available, to seek consultation (advice, guidance, treatment, whatever may apply) if he is unable to cope effectively with his stressful experiences.
- (2) **Crisis Intervention:** This may be required in rare instances where a relief worker is in a crisis situation due to any reasons – personal, family or fieldwork related. The supervisor or the group leader has the responsibility for organizing appropriate support in these cases.

6. CONCLUSION

Stress among relief workers is an important issue and should be addressed. Accepting the fact that it may occur, openly discussing it and supporting those who may be affected is crucial to the well-being of relief workers. It is the responsibility of the relief worker themselves, the supervisors and the organization for which they work to take care of the well-being of all workers.