

INFORMATION MANUAL-2

TSUNAMI DISASTER

PSYCHO SOCIAL CARE BY COMMUNITY LEVEL WORKERS

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NATIONAL INSTITUTE OF MENTAL HEALTH AND NEURO SCIENCES
BANGALORE - 560 029.

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PSYCHO SOCIAL CARE BY COMMUNITY LEVEL WORKERS

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CONTENTS

Foreword	iv
Preface	v
Introduction	1
Impact of Tsunami on the Survivors	5
Psychosocial Support	8
Understanding Psychosocial Needs of the Tsunami Survivors	12
Emotional Reactions of the Tsunami Survivors	22
Role of Community Level Workers (CLWs)	34
Psychosocial Interventions	38
Special Groups	49
Referral	58
Self Care	62
References	64

Foreword

India faced one of the worst natural disasters on 26th December 2004. 'Tsunami' crushed the coastal lines of Tamil Nadu, Andhra Pradesh, Kerala and Union Territories of Pondicherry, Andaman and Nicobar Islands. The Home Ministry reported the details of destruction due to Tsunami which accounted for a total death toll in India as high as 15,704, of which the highest was in Tamil Nadu numbering 7,793, followed by Andaman and Nicobar Islands and other states. The total loss of houses, livelihood and other infrastructure were estimated at Rs. 47 billion. Tamil Nadu alone accounts for 50% of the total loss in South India followed by Rs.13 billion in Kerala, Rs. 5 billion in Pondicherry, Rs. 3.4 billion in Andhra Pradesh.

In the coastal areas of all these States, the chain of livelihood and lives were affected. Majority of the fisher folks and many other people related with the fishing work who lived beside the sea were badly impacted by the bites of Tsunami. The fisher folk who had been living by the sea shore for generations depending on the sea, had staunch faith in the sea goddess that she will protect them from every calamity and provide them abounding sources of livelihood, were stunned by the massive destruction caused by Tsunami. It broke the basic trust and imposed a lot of challenges in the life of the survivors. NIMHANS, as premier mental health institute took an active initiative to support the psychosocial needs of the Tsunami survivors. Following the normalization model the major responsibility was to empower large number of community level workers with basic psychosocial care techniques to meet the vast needs of the affected communities.

NIMHANS took up its assigned role as a Nodal Agency to provide services and organize effective, efficient and coordinated psychosocial care to all the regions and survivors of Tsunami. NIMHANS, as a lead governmental organization is working in cooperation with the State Government Departments of Health, Education and Social Welfare. It is actively collaborating with international agencies and professional bodies of mental health. Working in tandem with the District, local administration, the NGOs, CBOs and SHG members, a model is in practice on a long term basis and institutionalization of the caring capacity within the community.

Supporting the healing of the minds by addressing the psychosocial needs of the affected people is one of the crucial needs from the relief and rehabilitation phase to long term reconciliation process. This is to ensure the normalization in the life of the affected people by hastening the recovery process by initiating the rebuilding of the eroded support systems. The psychosocial care by the community level workers is one of the prime focuses in this whole process of rebuilding the shattered lives of the Tsunami survivors. This manual is one of the most facilitative tools for the same. The effective use of this manual would strengthen the journey towards community based psychosocial care of the Tsunami survivors.

DR. D. NAGARAJA
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Preface

The beautiful coastal line of South India and Andaman Nicobar Islands were hit by the killer waves on December 26th 2004. This created a deep impact on life and livelihood of the survivors. The waves also washed away the basic happiness and disrupted the social fabric. It is well known that rebuilding the lives after disaster is a long drawn process. Efforts to restore normalcy needs to be initiated at the earliest. The psychological aftermath of Tsunami on the survivors was very well recognized by the Government, the professionals and the civil society organizations. Various initiatives to rebuild the human spirit after the disaster were taken up from the very early stage of relief and rehabilitation. With many other organizations responding to the tragedy of man kind, CARE in strategic partnership with NIMHANS, Bangalore, initiated psycho social support programme together with other relief and rehabilitation programmes.

NIMHANS, the pioneer institute has been providing care to the disaster affected communities in the last two decades starting from Bhopal gas disaster to Orissa super cyclone, Gujarat earthquake and Gujarat riots. CARE had a very meaningful strategic partnership with NIMHANS, in providing psychosocial care to the riot survivors and demonstrated a community based model in an integrated manner.

To respond to the needs of the thousands of Tsunami survivors, Government Departments of Health, Welfare and Education, as well as Non Governmental Organizations, Self Help Groups, PRI members and other volunteers were involved in the psychosocial service. Involvement of this large number of workforce made a major change in the situation. This was possible through the technical collaboration with NIMHANS, Bangalore, who were able to strategize psychological support to the survivors of Tsunami through the community level workers who provided the same from the early days of the Tsunami disaster. The community level workers and volunteers were trained in large numbers by the NIMHANS team. The capacity building continues through simultaneous handholding support at the grass-root level. The lessons learnt from these training programmes coupled with the former experiences is the current outcome in the form of a "Manual for the Community Level Workers".

Still we have to go a long way to build up the lives of the survivors and to heal the minds of the people after the enormous loss. Besides the women and children who are the most affected survivors, the sufferings of many of the males in the community needs to be handled with care on long term basis. Thus, it is not only the construction of house or livelihood rather building up the eroded social support, human spirit and initiating the caring community which is the challenge in the rehabilitation and reconciliation process. This manual facilitates the goal of long term help by the community level workers who are at the heart of each affected community.

I, on behalf of CARE India, thank Dr. D. Nagaraja, Director, Vice-Chancellor, NIMHANS, Bangalore, for his continued support to the psychosocial care initiatives in Tsunami affected areas. My sincere thanks to Dr. Shobha Srinath, Professor and Head of the Department of Psychiatry;

Dr. Satwant Pasricha, Professor and Head, Department of Clinical Psychology; Dr. R. Parthasarathy, Professor and Head of Psychiatric Social Work department; Dr. Mohan K Isaac, Professor of Psychiatry, NIMHANS, Bangalore, for their valuable suggestions and review of the material. Warm remembrances of Dr. R. Srinivasa Murthy, STP, Mental Health and rehabilitation of Psychiatric Services, WHO, EMRO, Egypt who initiated the Disaster Mental Health Care Services for Bhopal gas survivors and Psychosocial care initiatives for disaster survivors in Orissa and Gujarat. CARE Gujarat Harmony Project greatly benefitted from his passion to support the mental health activities in disasters.

Special thanks to the members of CARE and NIMHANS teams in Delhi, Bangalore, Chennai, Cuddalore, Nagapattinam, Kanniyakumari and Karaikal for their continuous support and effort in materializing the programme. I specially thank Mr. Sathyan and Mr. Subhasis Bhadra for their drawings which enhanced this manual. Thanks to Mr. Balamurugan and his team at Vizhigal Publishers who deserve special mention for the effort and time devoted to this work. My special thanks to Dr. Sekar and his most spirited and dedicated team to have made this possible today.

My sincere remembrance to all the survivors without whose active part the work would have no meaning. I sincerely appreciate the contribution and hard work of the authors of this manual who have committed for this great effort of 'healing the minds' of the Tsunami affected people. I am sure this will be an important toolkit for disaster management professionals and humanitarian workers in the world.

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INTRODUCTION

The states of Tamil Nadu, Kerala, Andhra Pradesh and union territories of Pondicherry and Andaman and Nicobar Islands witnessed massive destruction following the huge surging Tsunami waves hitting the coastal land on 26th of December 2004. Tsunamis are high tidal waves caused due to the sea water entering into the coastal land areas. It is the first of its nature in our country. The Tsunami took away the lives of thousands, destroyed houses and disrupted the entire fabric of the fisher folk and others living in the coastal areas.

Official estimates by the Ministry of Home Affairs, says that the death toll due to the Tsunami is 9995, with Tamil Nadu alone accounting for 7923. Number of missing people was put at 6011, after thirteen days of the Tsunami. The total loss accounting for the loss of houses, means of livelihood and other infrastructures have been estimated at Rs. 470 crores in Tamil Nadu, which is alone 50% of the total loss in South India, followed by Rs. 130 crores in Kerala and Rs. 50 crores in Pondicherry. The loss in Andhra Pradesh was calculated to be Rs. 34 crores. (11)



In all the four states it was the fishermen and others living in coastal areas, who were badly affected by the Tsunami. The fishermen lost their family members, near and dear ones, fishing nets, boats, other means of livelihood and houses, thereby leaving their lives totally shattered. They have spent their lives living near the seashore for generations together, worshipping the Sea Goddess who has nurtured and protected them and their families, enabled them to fish and feed their families. The same sea all of a sudden became angry and furious caused this massive destruction to their lives.

A number of instances can be cited from the past wherein these fishermen have survived floods, storms and cyclones that have caused severe damage to their houses and living conditions. These fishermen are generally well equipped to tackle the dangerous sea conditions, putting their lives to risk while they go for fishing in the deep sea. But the recent Tsunami caused a severe damage to their means of livelihood and took away lives of their near and dear ones. The huge magnitude of loss caused by the Tsunami brought the lives of these fisher folk to a standstill. This had a devastating effect on the fisher folk community.

In the post-Tsunami scenario life-threatening situations exist due to injury, malnutrition and infections. It needs a period of time and sustained effort to rebuild the affected areas. The rebuilding should take into consideration the *holistic care* of the affected population. In Tsunami, the magnitude of

mental health issues is enormous. Apart from logistic and material help, human interventions will be required for people who are suffering. *Thus along with relief, rehabilitation and the care of physical health and injuries, mental health issues are also of utmost importance and need to be addressed.*

This manual aims to address those groups of people who would be working with Tsunami survivors and helping them in the process of recovery. The information given in this manual will provide a better understanding of the Tsunami situation, the reactions that the survivors experienced and the principles that can be used to reduce their emotional distress.



Principles of emotional support

Given below are a set of principles that are widely practised nationally, as well as internationally. It aims at providing emotional support to disaster survivors.

1. No one who experiences the event or witnesses the event is untouched by it.

Depending on the nature and magnitude of the disaster, it can cause enormous loss to life, property and the environment. Emotional reactions such as grief, sadness, anxiety, panic are common in such situations. Individuals find comfort and reassurance when told that their reactions are normal and understandable in every way. *Therefore, Community Level Workers (CLWs) help to educate the survivors about common disaster stress reactions, ways to cope with their stressors and available resources to respond to their needs.*

2. Disasters result in two types of trauma

Disaster affected population have *two kinds of trauma - individual and collective trauma*. Individual trauma manifests itself in stress and grief reactions, while collective trauma can sever the social ties of the survivors with one another. These ties could provide important psychological support in times of stress. The loss of these natural buffers in the community is less visible and thus mental health interventions such as outreach support groups and community organizations, which seek to re-establish linkages between individuals and groups, are essential.

3. Most people pull themselves together during and after a disaster. However they function with less effectiveness.

A disaster survivor faces multiple stressors. In the initial phases there is much energy, optimism and altruism. There is often a high level of activity with low level of efficiency. As the reality of loss becomes clearer frustrations and disillusionment sets in, leading to more stress reactions. *This can impair the survivor's ability to make decisions and take necessary steps towards recovery and reconstruction.*

4. Disaster stress and grief reactions are normal responses to an abnormal situation.

Stress reactions and grief responses are common in disaster situations. Almost all individuals who face this event experience such reactions. Relief from stress and ability to talk about the experience with the passage of time usually leads to re-establishment of equilibrium. *Public knowledge about normal reactions, ways to handle them and early attention to reaction that are problematic can hasten recovery and prevent long-term problems.*

5. Many emotional reactions of the survivors stem from problems of daily living, as a result of the disaster.

Disaster disrupts all aspects of daily life resulting in practical problems like finding food, clothing, shelter, etc., *Timely and appropriate relief and support measures are very vital to help survivors to handle disruption.*

6. Disaster mental health service must be uniquely tailored to the communities they serve.

Mental health interventions should be based on the demography and characteristics of the population. It is also essential to consider the ethnic and cultural groups in the community, so as to provide help, which is culturally relevant, and in the language of the people. *Hence such programs are effective if workers indigenous to the community and to its various ethnic and cultural groups are integrally involved in the service delivery.*

7. Survivors respond to active interest and concern

Survivors will usually be eager to talk about their feelings, thoughts and experiences when they are approached by a community level worker. *Community level workers should not hold back from talking with survivors out of fear of intruding or invading their privacy.*

8. Interventions must be appropriate to the phase of disaster

It is of paramount importance to recognize the different phases of the disaster and its varying emotional reactions of each phase. *In the initial phase it is listening, supporting, ventilation, catharsis and grief resolution. In the later phases it involves handling frustration, anger and disillusionment.*

9. Support systems are crucial for recovery

The most important support group for individuals is the family.



Community Level Workers should attempt to keep the family together. The members should be encouraged to involve in each other's recovery. For those who have become single or orphan, support of other neighbors or familiar people can be helpful.

Remember

- ✓ In Tsunami the magnitude of mental health issues is enormous.
- ✓ Along with relief, rehabilitation and the care of physical health and injuries, mental health issues are also of utmost importance and need to be addressed
- ✓ These principles of emotional support need to be practised at work.

IMPACT OF TSUNAMI ON THE SURVIVORS

Tsunami has left a deep scar on the lives of the affected people. It has created a deep impact on the life of the survivors.

ECONOMICAL IMPACT

- *Loss of livelihood and difficulties in restarting livelihood due to loss of fishing boats and nets.*
- *Death of the only earning member in the family.*
- *Loss of documents like ration card, Below Poverty Line (BPL) cards etc., because of which access to certain benefits is denied.*
- *Loss of houses.*
- *Significant decline in real estate business.*
- *Loss of valuable property in terms of household items, jewellery, vehicles.*
- *Unemployment.*
- *Loss of livelihood for the small hawkers, vendors who sell their wares on the beach.*
- *Sudden and steep decline in tourists visit to Indian beaches leading to losses in the tourism industry.*
- *A sudden decline in the sale and consumption of fish due to rumors of fish being contaminated after the Tsunami.*
- *Prolonged and cumbersome process of getting compensation.*
- *Disruption of the transport and communication system.*
- *Loss of certificates.*
- *Agricultural land spoiled.*

PSYCHOLOGICAL IMPACT

- *Shock and panic.*
- *Fear.*
- *Anxiety.*
- *Bereavement.*
- *Grief.*
- *Guilt.*
- *Flashbacks/Nightmares.*
- *Excessive crying.*
- *Feeling of sadness.*
- *Feeling of hopelessness, helplessness, bleak and pessimistic view of future.*
- *Disturbed sleep and appetite.*
- *Death wishes, suicidal ideation.*
- *Lack of concentration.*
- *Anger and irritability.*
- *Social withdrawal, seeking isolation, becoming less communicative.*
- *Increased risk-taking behavior.*
- *Increased alcohol and substance use.*
- *Frustration.*
- *State of Insecurity.*
- *Admancy and temper tantrums.*
- *Denial.*
- *Irresponsibility.*
- *Forgetfulness.*
- *Adjustment problems.*
- *Feeling depressed and insatiable.*

PHYSICAL IMPACT

- *Fractures*
- *Infections*
- *Reproductive health problems*
- *Premature delivery*
- *Diarrhoea*
- *Injuries*
- *Miscarriages*
- *Amputations.*
- *Fever*
- *Epidemics*

SOCIAL IMPACT

- *Homelessness.*
- *Change in marital status due to death of the partner.*
- *Change in family composition, structure and roles.*
- *Sudden displacement and difficulties of living in temporary shelters.*
- *Lack of privacy in relief camps.*
- *Poor sanitation facility in the relief camps.*
- *Emergence of single parent families and orphans.*
- *Migration.*
- *Discontinuity of education.*
- *Difficulties in getting Para legal aid.*
- *Lack of adequate support from the local leaders.*
- *Lack of neighborhood support.*
- *Robbery and house breaking.*
- *Problems related to tenancy wherein the landowners who had been trying to evict the occupants from their land for a long time could easily do so after the Tsunami.*
- *Possibilities of increase in immoral and antisocial activities.*
- *Discrimination and disparity in terms of distribution of relief materials based on social class and caste.*
- *Opportunistic stance taken by some outsiders to grab the land entitlements of the survivors who lived near the sea shore.*
- *Violence towards women, immoral trafficking of women.*

There is thus a need to provide psychosocial care to the Tsunami survivors right from the immediate to the rebuilding phase. **However it should be remembered that the nature of interventions would change in different phases of the disaster.**

At the rescue phase it needs to be ensured that people living in temporary shelters have access to food, medical facilities, clothing, proper sanitation facility and clean drinking water.

Psychosocial counseling and support for dealing with loss and the damage should be provided.

Access to basic entitlements in terms of compensation, government schemes and credit institutions should be ensured. This would enable the survivors to rebuild their homes and livelihood.

Livelihood reintegration should be ensured.

Community based care/rehabilitation for the most vulnerable groups, i.e., widows, orphans, aged and disabled should be provided.

Legal rights and social justice to the Tsunami survivors, especially those who are subjected to discrimination based on social caste and class should be ensured.

In the aftermath of the Tsunami, survivors are experiencing a wide range of distressing emotional reactions, which are **normal reactions to an abnormal situation**. One has to remember that **greater the trauma, the more severe the stress of the survivor**. There is strong evidence worldwide that those receiving psychosocial care have less impact of the disaster and disability than those who do not receive any sort of psychosocial care. Thus psychosocial care for the fast recovery of psychological problems becomes an important component of the holistic care.

Remember

- ✓ Tsunami has had a devastating impact on all areas of life of the survivors - physical, psychological, social, and economical.
- ✓ There is a need for psychosocial care to the Tsunami survivors right from the immediate to the rebuilding phase of the Tsunami.
- ✓ Psychosocial care helps in faster and better recovery of the psychological problems that the survivor undergoes.



PSYCHOSOCIAL SUPPORT

Coping with emotions

The emotional reactions of sadness, irritability, panic attacks, sleeplessness, withdrawal from others, and anxiety in adults and nightmares in children are universal responses of people experiencing events beyond their coping capacity in disasters like Tsunami. The level of sadness varies with the kind of torment the survivors experience. A survivor, who has faced loss of all the family members, and other near and dear ones, means of livelihood and houses would have a high level of trauma as compared to one who has only lost his house and means of livelihood. *The aged, women, children and disabled people experience greater degree of emotional reactions.* These reactions reported by the survivors are *normal reactions to an abnormal experience.* It is important to recognize these so that people experiencing emotional reactions are not made to feel that they are weak or unable to cope in any way.

Co_in_ with loss

Loss due to the death of a near and dear one, separation from loved ones and material losses are inseparable parts of human existence. Under normal circumstances, everyone goes through this process without much difficulty because the family and relatives come together to share the loss. Support from friends, relatives and neighbours occur automatically. Rituals are initiated soon after the death. For example, soon after a death in the family, arrangements are made for cremation and all the daily activities are temporarily suspended. Prayers are offered to the deceased and rituals are completed on a particular day by conducting ... *divasam* (a . . . t . . . a) . . . m ny.



All these help the individuals to understand the meaning of personal loss thus enabling them to come to terms with the changed situation and continue their lives.

Need for external support systems

As discussed above, after a traumatic incident, all friends, neighbours and relatives of the victims (both close and distant) have a definite role to play which helps in recovery. However, in a disaster

Like tsunami, the naturally available support systems and healing mechanisms are disrupted, as most of the people are either themselves affected by the Tsunami or incapable of providing such support. Hence, in a disaster situation, the existing social structure does not play the normal crucial role in the healing process, because each individual in the area has been affected by the disaster. The family as a unit may no longer exist. For many this leads to a sense of isolation, helplessness and despair. The normal process of mourning and other related rituals do not occur automatically. In such cases, establishing a system of support by an external agency becomes important in order to help people who have been affected.



Usually in a disaster situation, people who come from outside the community are doctors, lawyers, NGO workers, volunteers and such individuals, who in their own capacity contribute/donate food/other basic essentials/money, and offer time, their skills and expertise. Along with them a group of volunteers and Community Level Workers (CLWs), mostly from within the community come together and work towards rebuilding and rehabilitation in a comprehensive manner. Community Level Workers (CLWs) have been seen to be very effective in providing psychosocial care and support to the affected people.

Importance of psychosocial care

Emotional problems following disasters often tend to be neglected. This happens because they are relatively invisible when compared to the damage caused to life, physical health and property. It is important to remember that emotional problems occur very commonly. Distress is intense and leads to helplessness, isolation and apathy. *Everyone who witnesses or experiences the disaster is affected by it.* Hence an early identification of this problem followed by intervention helps the survivor to recover.

It is important to realize that rebuilding of an individual's life and reconstruction of the entire community following the Tsunami would depend upon the survivor's ability to accept the loss as early as possible. It will help him/her understand and emotionally accept the current reality and thereby work towards reconstruction of life both at the individual, family and community levels.

Let us now examine an analogy of a person with an injury. An injury to any part of the body will heal over a period of time because the body has the ability to repair the damage. The natural healing process takes some time. However, if the person gets immediate first aid for his injury (e.g., cleaning the wound with uncontaminated water and covering it with a sterile or clean cloth), the healing will be hastened, thereby gradually reducing the pain and discomfort. But on the other hand, imagine if this help is not available and the wound is unattended the wound is likely to get infected and healing

will be delayed, leaving a bad scar. This might even cause some limitation in the normal functioning of that part of the body.

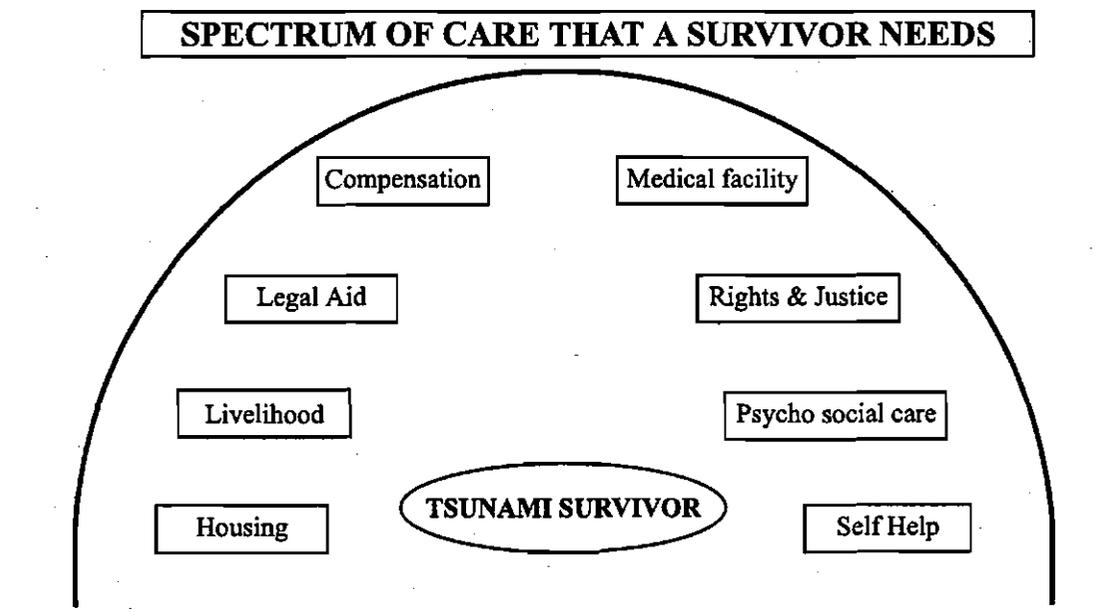
It is important to note that in both instances the scar remains. However, in the former, the scar is light and does not produce limitation. In the latter, the scar is deep and produces limitation for a long time.

Similarly, any emotional reaction like grief and pain due to loss and death will require help to facilitate ventilation or relieving. This would work like the sterile cloth preventing infection, and allowing the body to work and heal. Unavailability of such help to release or share these emotions will leave a scar in the mind. Therefore, it is very important for people to share the pain, feelings and thoughts about personal losses.

Spectrum of care

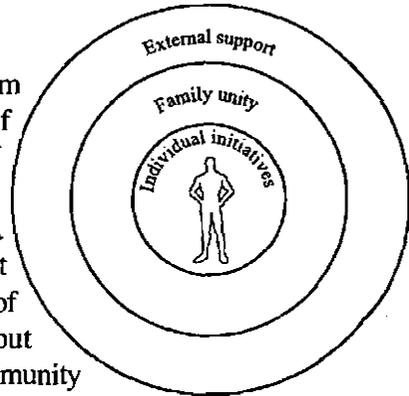
The most important step in the psychosocial care and recovery process is to recognize that such care is essential for the entire population exposed to the catastrophic event of Tsunami. *People differ only in terms of the degree of support needed.* In other words, the care should be holistic rather than being limited to relief and support. Psychosocial care, not only means emotional support but also practical help, suggestions, guidance, information and education.

Under the spectrum of psychosocial care, eight basic issues should be addressed (as explained in the box given below). The focus will be identification of needs and attention to specific problems. Referrals would be made as and when required and there would be a commitment for long-term work.



Circle of support

As mentioned earlier, in any disaster situation the support system of the survivors is disrupted. This leads to absence or loss of support on the part of the survivors, which leads to isolation, despair and helplessness. Therefore, along with providing emotional support and care to the survivors, it becomes important to attempt to rebuild the pre-existing support system that the individual had previously. At the initial phases of the Tsunami, support arrived from the external sources, but gradually effort should be made to strengthen the affected community to such an extent that it is capable of rebuilding and providing the required



support to its members. Support and care needs to be built not only at the family level of an individual but also at the community level, so that every individual gets the care and support during the times of distress. There is a need to build up a *caring community* wherein each and every member in the community would be supportive and involved in each other's well being.

In this whole process of creating a caring community one needs to understand the significant role of leadership. Local leaders need to be identified, who can carry on the process of building a supportive community in an organized manner. Without a proper leadership, a community can be split into several groups, accompanied with conflicts and tension that would hinder the process of building up a caring community. Thus there is a need to identify the leaders within the community who can help the community in its rebuilding, in a sustained manner.

Remember

- ✓ Proactive support and care is required to cope with loss.
- ✓ In a disaster situation like the Tsunami, the support system breaks down.
- ✓ After the Tsunami, it is the external agencies that are providing support to the survivors and this is facilitating the recovery process.
- ✓ Psychosocial care is an important component of the rehabilitation process.
- ✓ Early recognition and intervention leads to speedy recovery.
- ✓ There is a need to rebuild the pre-existing support system of the Tsunami survivors.
- ✓ There is a need to build up a *caring community* wherein each and every individual within the community would be supportive and involved in each other's well being.
- ✓ Local leaders play a crucial role in rebuilding a caring community.

UNDERSTANDING PSYCHOSOCIAL NEEDS OF THE TSUNAMI SURVIVORS

This chapter aims to focus on the stress that the Tsunami survivors have experienced. While providing psychosocial care to the survivors it is extremely essential that one is able to understand and recognize the various stresses that the survivors undergo at different points of time.

Understanding the experience of stress

Survivor's stress is the result of painful experiences, inadequate living conditions, a sense of insecurity and a constant feeling of loss and isolation. Stress causes unhappiness and prevents people from doing useful work and may affect all areas of a person's life. An individual suffering from stress and anxiety may not be able to talk about the stress directly but the existence of stress can be recognized through different reactions such as:

Behavioral Reactions

Traumatic experiences cause a lot of stress, which is often beyond the coping capacity of an individual. The inability to cope effectively leads to reactions in a person, some of which are manifested in his/her behaviour, such as:



Loss of interest in life

35-year-old woman

“Why should I live anymore? What is the use of my life without my grandson and my granddaughter? The waves should have killed me also.”

Reduced activity, no energy

40-year-old man

“There is nothing much to do here - just eat and then sit around. We have not started working. My days just pass by. I do not know what to do. Earlier I used to do a lot of work. Now without doing much I feel very tired and my body aches”

Inability to rest (restlessness)

25-year-old man

“I am unable to lie down for a minute. I need to do something or the other. My body is stiff. I am not able to sit or stand for a single minute.”

Difficulty in concentration

12-year-old girl

Saw the waves surging towards her, when she was playing near the house. To save herself she climbed on top of a coconut tree and screamed for help. Others in the village finally rescued her. Two weeks after the disaster, when schools reopened, the teachers noticed that she was restless, had difficulty in concentration and found it difficult to remember what was being taught. She was initially a regular and a bright student.

Sleep disturbances and related problem

48-year-old man

"During nights when I go to sleep, I get these images and thoughts of waves coming and destroying everything. I cannot sleep properly. I have to take sleeping tablets to get sleep, but then also, I get sleep only at around 3 O' clock at night."

12-year-old boy

He lost his father, his house in the Tsunami. Now he is forced to stay in a camp. He keeps waking up in the middle of the night haunted by the images of the killer waves. He feels upset about losing his father, losing his secured environment. He would then wake up his friend, talk about his feelings. Talking it out with his friend relieves him and then he goes back to sleep.

Flashbacks

38-year-old man

He reports inability to sleep as he is haunted by repeated images of the waves coming, children being swept away from their mother's arms, houses being washed away. He has sleepless nights and doesn't know how to stop these images coming to him.



Taking intoxicants or drugs

42-year-old man

"I have nothing to do here in the relief camp. I sit idle all the time. If I sit idle, it reminds me of my two children whom I have lost. If I drink, I can atleast forget my sorrows for some time and get relief from the pain".

Physical Reactions

Often people complain of bodily aches and pains, for which they visit a doctor. These symptoms do not have a physical cause. They are related to the emotional stress a person is undergoing. For instance, a headache can be due to both physical as well as emotional reasons. It is important to recognize and understand the kind of bodily symptoms that an individual experiences when under stress.

Headache

45-year-old man

"I helped in the rescue of my fellow villagers after the Tsunami. Now even after 3 months of the event, I get terrible headache most of the time in the day. Only when I sleep the headache comes down".

60-year-old man

A 60-year-old man lost his elder son in the Tsunami. He was trying to save his friends while his own son got washed away by the sea waves. The man was attached to his elder son and he always helped him in taking decisions. After the death of his son, the man is unable to sleep. He has been suffering from terrible headache since then. He was earlier working as a watchman. Now he is unable to go for work because of headache and also he is unable to take day to day decisions in life.

Tiredness

30-year-old man

A 30-year-old man prior to Tsunami was very active and used to take part in all the village activities. After the Tsunami he says that he feels tired the whole day, he is unable to help others in the rescue and rebuilding process.

30-year-old woman

A 30-year-old woman lost her husband in the Tsunami. Her two young children keep demanding for their father. She does not know what to answer. She is unable to cope with the loss. She feels tired and fatigued all the day, hardly has any energy and is unable to perform the household chores. She has not cooked for the past one month. She along with her children is staying in the house of her relatives. Relatives take care of her and her children.



Tense muscles

12-year-old girl

A 12-year-old girl saw the sea waves rushing and causing damage to life and property. She was so scared that her whole body became extremely stiff for few hours.

Palpitation/irregular heartbeat

20-year-old woman

"Whenever I hear the word 'thanni' (water), my heart starts beating fast and I want to run as fast as possible, to save myself."

10-year-old boy

A 10-year-old boy was very fond of playing on the seashore along with his friends. He would jump around in the seawater, splash water on his friends. After witnessing the fearful image of the sea, which washed away his house, he is very fearful to go near the sea. His heart beats fast when he pours water on his body during bath. It reminds him of the devastating Tsunami waves, which washed away, everything on their way.

Poor appetite, pain in abdomen, vomiting sensation

18-year-old woman

An 18 year-old woman lost her husband within four months of marriage, in the Tsunami. She now feels sad and helpless and she doesn't know how she will lead the rest of her life all alone. She has lost her appetite and does not feel like eating at all. The thought of eating makes her feel nauseated. Even when she sees others in the relief camp eating food, she feels like vomiting.



15-year-old girl

A 15-year-old girl was swept away by the waves of the sea. She was rescued by people from her locality. However, she had already swallowed sand by that time. She vomited sand four times after being rescued. Subsequently she often coughs, has fever on and off and has become very weak. She hardly has any energy. She has lost weight. She is unable to sleep and eat properly.

Unidentifiable pain in arms, leg, chest or all over the body

50-year-old woman

A 50-year-old woman lost her elder son in the Tsunami. While her husband was busy saving his friends, the sea took away their elder son. The elder son played an important role in decision making in the family and both she and her husband were dependent on him emotionally. Following the death of her son, the husband has fallen ill and has stopped going for work. Now, the woman reports that she is unable to carry out household chores with the same efficiency as before. She feels tired and fatigued all the time. She suffers from continuous pain in her legs and hands.

Emotional Reactions

A person who experiences stress will exhibit a lot of behavioral reactions in his/her emotions. Emotional reactions are very apparent as they bring a distinct change in the survivor's behavior. It is important to identify and understand the following manifestations as reactions to stress:

...g.ra...rr.a.il.y

25-year-old man

A 25-year-old man was affected by the tsunami. His house was washed away by the sea waves. However, he used to go regularly for fishing and used to keep the friends happy. But after few weeks he complains of irritability and increased anger outbursts on minor issues. This he displaces on his family members after he returns home.



4-year-old boy

A 4-year-old boy was a very amiable child. But since the Tsunami, he has become very irritable. For trivial reasons or for no reason, he would get angry and would bite his mother. His mother is confused about the change in the child's behavior and feels helpless, as she does not know how to take care of the child.

Fear, vigilance and anxiety

8-year-old boy

A 8-year-old boy's family was affected by the devastating Tsunami. They lost their house and fishing boat. He startles whenever there is any slight sound like that of an aeroplane flying or whistle of pressure cooker. He talks in his sleep. He sleeps tightly hugging one of his parents. He refuses to go out to play with his friends and never goes near the seashore. He is fearful that Tsunami may occur again. He insists that the family should shift to the nearby village for safety where his grandmother lives.

15-year-old boy

A 15-year-old boy was away from the village when the Tsunami struck their village. On returning, he found his house completely destroyed. Now his parents have built a temporary shelter. But he refuses to stay there. He is extremely fearful. Earlier he used to attend school, which is little away from his village. Now after the Tsunami, on his insistence, parents have sent him to the school hostel.

Helplessness, sadness and worthlessness

18-year-old woman

"My marriage was fixed. My mother had started preparing for my marriage, but now it's all gone. We lost all the gold and money that my mother had saved for my marriage, in the Tsunami. Now I don't know whether I will ever get married".

17-year-old boy

A 17-year-old boy lost his father at an early age. He was forced to drop school to earn money to run the house. He has one brother and one sister who are paralytic patients. He has two sisters who are of marriageable age. With lot of difficulties, he managed to make a house and the house warming ceremony was only two days prior to the Tsunami. The tsunami washed away his newly constructed house. Earlier he used to earn his living by fishing. However, after the Tsunami he is too scared to go out into the sea for fishing. Consequently he has developed feelings of emptiness and helplessness. He feels lost and does not know what to do in life.

Guilt

63-year-old woman

A 63-year-old woman was giving bath to her grand children when she saw the waves coming. She caught hold of the children and started running away from the shore to save



herself and her grand children. However, the waves washed away her grand children. Now, she repeatedly keeps saying, "I could have saved my grand children if I had held them more tightly. I am responsible for their death".

11-year-old girl

A 11-year-old girl's mother and brother got washed away in the Tsunami. The sea waves carried the body of her mother some three kilometers away. She did not go to see her mother's dead body as the place was far away. Her father went to see the dead body of the mother and the brother. Now she feels extremely guilty that she did not go to see her mother for the last time. She is unable to sleep properly and keeps thinking about her mother

Repetitive thoughts about the same thing

25-year-old woman

"I lost my child in this place. What is the use of staying here? The thought of me losing my only child repeatedly comes to my mind when I am here. I don't want to stay here."



Suicidal thoughts/attempts

15-year-old boy

A 15-year-old boy had a Christmas celebration with his family on 25th December. The next day early morning, he got up and took a bus, as he wanted to meet his friend in the church. While he was in the bus, the Tsunami struck. There were damages to his bus. He went back home and found that all his family members were dead. His friend whom he was supposed to meet also died in the disaster. He found a briefcase lying and did not know who the owner was. He broke open the briefcase and took out some money. The first thing he did was he went and bought a camera. He took snaps of dead bodies and destruction all around. He always carries those photographs along with him and keeps viewing them every now and then. He says that he wants to see how it happened. He feels extremely guilty that he left his family members in sleep and came out of the house. He says that life is meaningless to him and he wants to die. He often feels like committing suicide.

Forgetfulness

24-year-old woman

"I was a very efficient housewife. However after the Tsunami, I have become very forgetful about where I keep certain articles in my house. I seem to go blank when I need to search for a particular item. It takes me some time to find the item I am searching for."

Relational Changes

When a person experiences stress, certain emotional reactions appear, as observed in the earlier examples. These reactions lower the quality of interpersonal relationships and interactions with others, and result in:

Poor support system

18-year-old woman

A 18-year-old woman had run away from her house and married a man whom she loved. Her family was against this marriage since the man hailed from a lower caste. After four months of marriage, her husband died in the Tsunami. She now feels helpless, as she doesn't know how she will lead the rest of her life. Her parents are not willing to help or take care of her as they feel that God has punished her for her wrong deeds, as she married against the wish of her family.

Lack of trust

45-year-old woman

A 45-year-old woman lost her spouse and three children in the Tsunami. The only surviving son who was 16 years old had to be admitted to the hospital due to severe physical injuries in the leg which made him immobile. During the subsequent days due to rumors of Tsunami everyone ran out of the hospital. She pleaded others to carry her son outside to a safer place. None was able to help her during that time of commotion. She had to drag her son out on the floor to a place of safety. Subsequent to the event she does not trust anyone around even if they say that they would take care of her son. She does not sleep properly nor attend to her daily needs and keeps sitting by the side of her son all the time.

Change in roles and responsibility

65-year-old woman

A 65-year-old woman lost not only her house but also her two children and their spouses in the Tsunami. She is now worried and tensed, as she has to bring up her four grandchildren. Earlier, her children and daughter-in-laws were taking her responsibility. She feels lost by this sudden role change.

16-year-old boy

A 16-year-old boy and his father had been to the sea for fishing on the day when Tsunami struck their village. On return from the sea, the boy and his father found that everything was destroyed near the seashore. He found that his house was washed away. He could find his younger brother who is eight years old and younger sister who is five years old in a camp. And after one day, the dead body of his mother was found. His father now has started taking

increased amounts of alcohol. The father does not do any work. The boy has to take the entire responsibility of looking after his younger siblings, cooking, getting compensations etc. He is very distressed. He says that he is aware of what death is but he is only worried about the two siblings who are still too young. He feels a lot for the father but is unable to help him. He says that earlier he was a very easygoing person but since Tsunami life has changed for him. He feels confused at times as to how to fulfill so many responsibilities

Dependency in the survivors for decision making and support

A wide range of symptoms such as amotivation, apathy, anger outbursts, deterioration in work performance etc., are common in survivors living in camps. Consequently, survivors tend to be dependent on care providers all the time. Efforts should be made to encourage them to take decisions and support them to initiate activities.

Lack of emotion

30-year-old woman

A 30-year-old woman was holding her child in her arms while she ran to save her life during the Tsunami. However, she lost all her three children in the Tsunami. Her husband blames her for not being able to take adequate care of her children at the time when the waves struck. He holds her responsible for the death of the children. She now sits quiet with a blank look on her face.



Disagreement and argument, unpleasantness

A couple lost their house and other belongings in the Tsunami. The government gave a compensation of Rs.4000 for the losses incurred. However, within a few days, the husband spent all the money on alcohol. This made the wife disappointed and angry and the couple has been having arguments and fights everyday, as there is no money in the house even for food.

Assertiveness among the women survivors

Although consumption of alcohol is a well accepted and common phenomenon among the men in the fisher folk community, after the Tsunami it was found that many women became assertive to stop their husbands from drinking because it was necessary for them to save money to run the household and they did not want it to go waste on alcohol consumption.

30-year-old woman

“We have lost everything that we had. Now we are dependent on others. Let us keep the little money that we have got through relief for our children. Otherwise we will become beggars.”

40-year-old woman

“The moment I got the money, I went and bought these gold bangles. If I had kept the money, my husband would have taken it away from me. Whenever I am in need of money, I can either pawn these bangles or sell them if situation demands. I am not going to give away this, whatever may happen”.

Remember

- ✓ Traumatic experiences cause a lot of stress, which is manifested through various reactions in behavior, emotions, physical conditions and all these lead to a change in the quality of interpersonal relationships.
- ✓ There is a need to understand that these reactions are normal and common.
- ✓ There is a need to identify the reactions of the survivors.
- ✓ Recognize the stage in which the person is, based on the reaction that he/she is manifesting.

EMOTIONAL REACTIONS OF THE TSUNAMI SURVIVORS

Apart from the emotional reactions, Tsunami has created an overall disruption of the social fabric of the fisher folk and other members of the coastal community. Physical injuries, fractures, miscarriages, reproductive health problems, fever, diarrhea, amputations and infections were commonly seen among the survivors either due to direct impact of the Tsunami or as a part of their survival efforts. Subsequent to the Tsunami, homelessness, widowhood, emergence of single parent families, orphans, migration, and disruption in education, displacements were very common. Economically there was loss of livelihood leading to unemployment, loss of property and valuables that posed a great threat to the survivors.

It is important to note that all these reactions are inter-linked with one another. For example, due to loss of livelihood opportunities an individual may feel sad and helpless. Similarly a physical injury may prevent him/her from work, thereby resulting in the loss of his/her source of income. Hence, an impact on the socio-economic front causes emotional reactions in the first case, whereas in the second case, an impact on the physical aspect influences the socio-economic condition.



Understanding emotional reactions at different phases

After any disaster, the emotional reactions among the survivors change over time. For appropriate and effective interventions it is very important to have a clear understanding of the emotional reactions of the survivors at different phases of disaster. Given below are the various reactions that were commonly seen among the Tsunami survivors at different phases.

Psychological reactions tend to change over time, it is essential to understand the different reactions in a phased manner. The reactions could be following a normal mode of occurrence or an abnormal mode.

Understanding the stages of reactions

NORMAL REACTION	ABNORMAL REACTION
<p>OUTCRY (Fear and sadness and rage)</p> <p style="text-align: center;">▼</p> <p>DENIAL (Refusing to face the memory of the disaster)</p> <p style="text-align: center;">▼</p> <p>INTRUSION (Unbidden thoughts of the disaster)</p> <p style="text-align: center;">▼</p> <p>WORKING THROUGH (Facing the reality of what has happened)</p>	<p>OVERWHELMED (Swept away by the immediate emotional reactions)</p> <p style="text-align: center;">▼</p> <p>PANIC/EXHAUSTIONS (From the escalated emotions)</p> <p style="text-align: center;">▼</p> <p>EXTREME AVOIDANCE (Unhealthy coping mechanisms to deny pain like taking drugs etc.)</p> <p style="text-align: center;">▼</p> <p>FLOODED STATES (Disturbing images and thoughts about the event)</p> <p style="text-align: center;">▼</p> <p>PSYCHOSOMATIC RESPONSES (Body complaints)</p>

Emotional Reaction (Rescue, relief and rehabilitation phase)

Tension, anxiety and panic

The event happens so suddenly that there is no time to think as to what is happening. The immediate reaction is to run for safety. Fear is predominant among everyone till they reach a safe place.

65-year-old woman

"I was surrounded by water till my neck. I was holding my two young grand children in both my hands. I thought all of us would die being drowned in water. I am still fearful when I think about it"

40-year-old man

“When I saw the huge sea waves coming, I thought I would die. I was extremely scared, and ran for about 2 kilometers for safety. I was panting for breath”

25-year-old woman

“I was so scared when I heard about the red alert a couple of days after the Tsunami. I was at my work and I started crying thinking that I would die there. My parents were all alone at home. I felt I wouldn’t be able to see them for the last time. I didn’t know what would happen to them. I was tensed and was screaming for help.”

Shock or Numbness

There is a difficulty in accepting the reality of the situation. Survivors behave as if nothing has happened. A sense of being paralysed, distant, and detached from one’s feeling of grief is present. The person may be numb or like a robot be able to go through the motions of life while actually feeling little. At the same time confusion and loss of appetite may also be present.

25-year-old woman

A 25-year-old woman lost her all four children in the Tsunami. She knows that she cannot have any more children as she has undergone tubectomy. She sits in the relief camp, with a blank look on her face, speechless, withdrawn from others. She refuses to eat and has not been eating properly since the Tsunami. Her sleep is also disturbed.



Relief, elation, euphoria among the survivors

Some survivors would feel a sense of joy to have escaped unharmed and have their family members safe.

Survivor’s guilt

Feelings of repeated blaming of one self for having survived keeps coming back, especially if the survivor has lost his/her near and dear ones. “I should have done more”, “If only I had known”, are thoughts that haunt many people. The fact that they are alive may cause distress and discomfort.

45-year-old man

A 45-year-old man launched his new boat on that seemingly calm and beautiful day. When Tsunami struck not only his boat was washed away, but his wife also died as she tried to

escape from the waves. Her family members are upset and angry with him. They blame him for not making efforts to save her. After the tenth day ceremony, the wife's family openly told him that they are breaking their relationship with him since their daughter is no more in this world. He now feels guilty and says, "I should have saved her", "Why have not the waves swept me away with my wife?"

Disorientation, wandering and aimlessly talking

Some may have extreme forms of reactions in terms of aimless wandering, talking and a sense of disorientation about what is happening around.

27-year-old man

A 27-year-old man was standing on the bridge along with his three friends. The bridge broke down and fell into the surging waters. He was washed away to the shore, but he saw one of his friends being drowned. He is currently unable to sleep properly and walks aimlessly the whole day.

Flashbacks and nightmares

Several times one would remember or relive the experience of the Tsunami repeatedly. Small incidents may trigger these experiences. This can happen more during nights. Being involved in relief work can also trigger off 'these attacks'. Survivors might keep on remembering those past experiences and this might be accompanied with reactions like sweating, palpitations, irregular heartbeat, etc., This often leads to sleeplessness and restlessness.



40-year-old man

A forty-year-old man was constantly engaged in retrieving the dead bodies in his village Primary Health Centre (PHC). After seeing so many dead bodies, now he feels haunted by the images of the dead bodies. He is unable to sleep, constantly talks about it and has become irritable.

30-year-old man

"Whenever I sleep I get the images of water coming, houses being washed away. I can hear people and children screaming. I get up from sleep and then cannot sleep the whole night."

Anger

After the Tsunami, many survivors feel angry due to the loss and pain that they have experienced. This anger could be towards the Sea Goddess, accompanied with a feeling of betrayal that the Sea Goddess whom they worshipped and depended on, has taken lives of thousands, washed away their houses and boats, thereby destroying their life. This reaction usually occurs when an individual feels helpless and powerless. It may result from feeling abandoned. Feelings of resentment may occur due to the injustice of this loss.



60-year-old woman who lost her grandchildren

“Why did this happen to me? What wrong have I done? I worship God everyday, and yet God punished me in this way.”

40-year-old man who lost his family members, fishing boat and nets

“Why do you come everyday and ask me about what I have lost? Will you be able to get back my children, my boat and nets? I have lost everything. I don’t have anything of my own except this torn shirt (points out to his shirt). I don’t want your clothes and food. I am happy with what I have; at least that’s my own belonging. Leave me alone, I don’t want to talk to you.”

50-year-old man

“We the fishermen communities have been the hardest hit by this disaster. I am crying everyday asking Kadalamma as to why she did this to us? We are hard working people. I can boldly tell you that no fisherman would beg for a living. We work hard. Today look at our plight, we are like beggars. I have lost everything and now stand penniless”

Blame

Many of the survivors blame each other for the loss that they have incurred. This is very common and a natural reaction that the survivors exhibit.

30-year-old woman

A 30-year-old woman was preparing breakfast for her three little children. Suddenly she heard her neighbors scream that the water is coming. She took plastic pots and ran towards the door as she thought that it was the corporation water tank coming with supply of drinking water. She was shocked to see the wild surging waves making their way through the village. She ran and took her youngest child and tied the child over her head. Then she rushed to grab two of her other children aged four and eight years. But the waves struck her and in spite of her best efforts her two children were snatched away from her hands and they were washed away. She feels extremely guilty as she could save only one child. Her husband also keeps blaming her for it.

Sadne

Experiencing a sense of great loss, mood fluctuations and feeling of wanting to be alone may follow. After shock and denial and after anger being exhausted, sadness and hopelessness may set in.

As the days pass by (within one to six months) new reactions appear. These are seen in about 40-50% of the population in form of

Grief

A 38-year-old fisherman's only son, with whom he was much attached was washed away by the Tsunami. He has kept the son's enlarged photograph along with pencils, eraser and other materials. He offers food and garlands to the photograph everyday. He is still not able to come to terms with the death of his son. He keeps repeatedly saying that he sent his son to an English medium residential school so that he would become an officer one day. Currently he is not going for any work even if other relatives or neighbors call him. He is sad all the time.



Apathy

After the Tsunami, some people are little interested in performing even the basic day-to-day functioning, including those associated with personal hygiene.

30-year-old woman

A 30-year-old woman saw her daughter aged three and a half years old being washed away by the Tsunami. Since that day she has not done any household work, stares vacantly in space and does not communicate with anybody. She sits the whole day holding on to her one and a half-year-old son.

Physical symptoms of anxiety in terms of restlessness, palpitations, irregular heartbeat, sweating, panic, etc.,

24-year-old woman

"After the Tsunami I cannot go near the sea. I feel very scared to go near the seashore. The sight of the seashore makes me fearful. My heartbeat starts increasing whenever I see the sea. If someone accompanies me to the sea shore, I hold him/her tightly because I feel very scared".

Inability to adjust

This is characterized by inability to come to terms with the changes that have occurred after the Tsunami like the loss and damage, overall living conditions, change in social status, etc.,

16-year-old boy

"We had everything in our house- even a DVD player, a motor boat. I never liked studies. I used to love going to the sea along with my father for fishing. I don't like staying here in the camp. There is no proper food and I miss homemade food. I want my mother to cook. Here people always fight. We have to listen to abuses. Relief material is distributed in the camp. It makes me feel like a beggar. We never go to take any of those things. I want to go back to the sea once again but I don't have the means to go. I sit here throughout the day doing nothing. It is very frustrating for me. Earlier we had such a peaceful life. Now in the camp, there is lot of noise as people keep fighting. Earlier I used to eat fish everyday. Now I have not eaten fishes for so many days."



Delayed reactions manifest after 6 months and may be seen as an intensification of the reactions seen earlier, in about 30% of the population.

Grief

This is in response to the loss of someone or something. The loss may involve death of a loved one, a job, or some material possession. Grief is a natural and normal response to loss. There are a variety of ways of how an individual responds to loss. Some are healthy coping mechanisms and some may hinder the grieving process. Spending quality time and giving support facilitate the individual's grieving process, providing an opportunity to appropriately mourn the loss.

Bereavement is a painful process and at times seems unbearable. It is combination of many emotions that come and go, sometimes without warning. Grieving is the period during which the individual actively experiences these emotions. The duration and intensity of the grieving period vary from individual to individual. The length of time people can grieve can be weeks, months, and even years but it gradually becomes less and less painful.

Because it is so painful, some people try to 'get over' a loss by denying pain. When people do not deal with emotions of grief, the pain does not go away. Understanding the emotions of grief and its accompanying feelings and symptoms are important steps to heal and to help others who may be grieving. Some manifestations of these are:

- Sadness.
- Distress.
- Yearning for what has been lost.
- Anger.

- **Guilt.**
- **Disturbed sleep.**
- **Loss of appetite.**
- **Severe irritability.**
- **Suicidal tendencies.**
- **Being acutely upset and disturbed by anything, which reminds them of the loss.**

A person can be helped to come out of his/her grief. What is absolutely essential is to help him/her share the feelings of loneliness, sadness, and anger openly and honestly. Next is to help them understand that such feelings and reactions are absolutely normal in anyone coping with a personal loss. Practising relaxation, deep breathing exercises, listening to music and getting involved in other life activities will help in handling the symptoms of grief. Encouraging them to adopt a healthy routine, like nutritious food, regular exercise, adequate sleep, etc., will help them cope with their reactions.

Post Traumatic Stress Disorder (PTSD)

Life never prepares people to face severe trauma. When people face an overwhelming event like Tsunami that is perceived as dangerous and beyond the normal coping capacity, the ability to respond adequately gets hampered. The symptoms that might develop in PTSD are understandable.

- **Reliving the trauma through intrusive memories or dreams that are painful and come uninvited.**
- **Avoidance of all activities and situations reminiscent of the traumatic event**
- **Hyper vigilance (inability to relax, being always tense), constantly alert, fearful, running at the slightest sight of waves, frightened at slightest noise, palpitation.**
- **Inability to enjoy anything.**
- **Panic reactions.**
- **Acute outbursts of violence may also be present.**

These symptoms develop because the person always seems to be in a state of arousal.

For example

38-year-old man

A 38-year-old man reports inability to sleep as he is haunted by repeated images of the waves coming, children being swept away from their mothers' arms and houses being washed away. He has sleepless nights and doesn't know how to stop these images coming to him. He is unable to relax and often has palpitations.

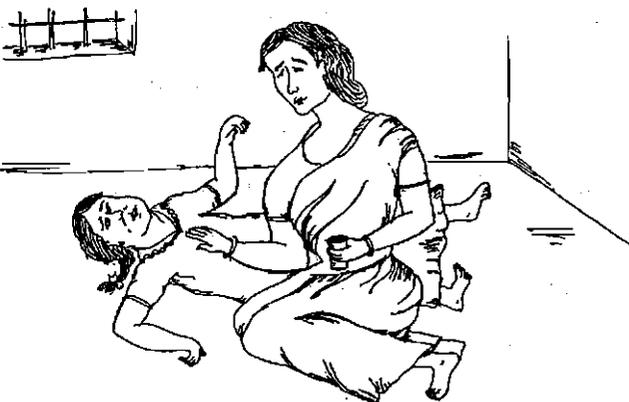
PTSD is not a single symptom but a cluster of symptoms like re-experiencing, avoidance, hyper vigilance in a person.

A person can recover from PTSD on his or her own over a period of time through the combined actions of education, support, anxiety-management and life-style modification, which can hasten the process of recovery.

- Education, the first step, involves helping the person understand his/her condition and reassuring that the reactions are the results of the stress due to the traumatic event.
- Support from family, friends and anyone working with the person by letting the person know that he/she is not alone and is not responsible for the event, etc., helps in the recovery process.
- Teaching anxiety management strategies like relaxation, breathing techniques and diverting the individual's mind through involvement in activities.
- Changes in their lifestyle are very important. This means following a healthy diet, avoiding stimulants or intoxicants, regular exercise and adequate sleep. In certain cases use of medication may be recommended. All these help in the recovery process.

Dissociative reactions

Some people and individuals may manifest jerky movements of limbs. These can occur at specific places and on meeting specific persons. It is important to distinguish these reactions from fits. The person never falls down and hurts him / herself or bites his/her tongue and there is no incontinence. The person also does not lose consciousness. It may be in the form of the person slowly sitting or lying down and jerky movements of the limbs. The person may



close his/her eyes or can roll up his/her eyeballs. A lot of times the person can be found saying things in an unusual voice. These reactions are indications that the person is undergoing a lot of stress, inner conflicts and wanting to fulfill his/her unfulfilled wishes.

It is important to work with the person as well as the family members. Educating the person about body mind relation will help him/her understand his/her own emotions better. The person should be given enough space for ventilation. Family members need to be educated about the person's symptoms. During such reactions family members should avoid giving lot of attention to the person. However, during other times quality time should be given to the person addressing his/her emotional needs.

Depression

Experiencing a sense of great loss, mood fluctuations and feeling of wanting to be alone may follow. Sleep and appetite disturbances, lack of energy and concentration, and crying spells are some of the typical symptoms. Feelings of loneliness, emptiness, isolation, and self-pity can also surface during this phase. After shock and denial have passed, sadness and even hopelessness may set in. The survivor might not have energy even to do the simplest daily chores. Crying episodes may be experienced often. However, men try to suppress their tears even though they may be depressed.

Emotional Reactions (Rebuilding phase)

Loss of productivity

30-year-old man

"I don't feel like doing anything. I don't have anything to do also. What can I do? My boats and nets are all destroyed in the waves. So I cannot go for fishing too. So I keep on sitting idle."

Increase in substance use

Although, consumption of alcohol is a very common and accepted phenomenon among the fishermen, within a few weeks of the Tsunami, it was found that there was an increase in consumption of addictive substances, especially alcohol and country liquor among the survivors. This was mostly seen among men who used to spend all the money that they got during the relief phase. Addiction to tobacco, *guikha* was also widely prevalent.

A 42-year-old man who lost his two children, fishing boat and nets in the Tsunami says, *"I have nothing to do here in the relief camp. I sit idle all the time. If I sit idle, it reminds me of my children whom I lost. I drink, I can at least forget my sorrows for sometime and get relief"*.



Suicidal thoughts, attempts and suicides

A 20-year-old lady along with her sister was carried away by the huge Tsunami waves. Their clothes were torn and washed away and both were almost naked. Both were struggling to save their lives. In this process a man came to save them and offered his shirt to them. While the sister accepted the shirt to cover herself, the other lady felt shameful to do so. She jumped into the surging waves and killed herself.

Marital discord and family problems

When a person experiences stress, certain emotional reactions appear. These reactions lower the quality of interpersonal relationships and interactions with others leading to marital discord or family problems.

A 9-year-old boy was found coming to school late everyday. The teacher on interacting with the boy found out that since the Tsunami the father has not been going for work and he has started taking increased amounts of alcohol. The mother is upset about it. Every night the father and mother fight over this issue, abuse each other and the boy is unable to sleep and hence comes to school late.

Somatisation

Many of the survivors might experience bodily pains like headache, feeling weak, giddiness, etc. However few may experience these somatic pains even a year after the Tsunami.

In one of the medical camps in Nagapattinam district it was found that many women consulted the doctor with complaints of body aches and pains. However, there were no bruises or obvious injuries, to explain such pain.



Difficulties in *resta. tin* and *mana, in,* livelihood

Many people have lost their livelihood subsequent to disaster. It is difficult to rebuild the livelihood once again, as most have lost their fishing boats and nets. Procuring these boats and nets is difficult, because they are expensive. Moreover, most of these fishermen are not skilled to do any other activities other than fishing; as a result engaging in other income generative program is also not possible. All these factors have posed a great difficulty in restarting their livelihood once again.

Apart from the large chunk of fishermen population, it is also the blacksmiths, boat repairers, chisel makers, tourist hawkers who have been badly affected by the Tsunami. The tourist hawkers who otherwise used to hawk on the beach (which were tourist spots) are no more able to do so, as a result of which their livelihood is badly affected.

48-year-old man who lost his fishing boats and nets in the Tsunami

"I don't know how I will get back my boat and nets. If Government doesn't provide any support for this it will be very difficult. In other situation, whenever we are in need of money we usually borrow from our other community people, but now they have also lost their boats, nets and other properties. So they won't be able to help me."

After the Tsunami, the emotional reactions among the survivors would vary and undergo change over time. Therefore, post-Tsunami psychological interventions need to be flexible and based on an ongoing assessment of needs. The emotional reactions should be understood based on the manifestation of various stress reactions, level of individual effort invested by the people for their own reconstruction, the pattern and degree of disability as a result of this psychological stress, etc.

Some factors that could influence the reactions among survivors are:

Nature and severity of the disaster.

Amount of exposure to the Tsunami disaster.

Availability of adequate social support.

Age.

Gender.

Status of the survivor.(single/widowed/married)

Separation/displacement from locality.

Separation from family/primary support group.

Personal losses of the survivor .(loss of kith and kin, property, source of livelihood, personal injury)

Poor pre-disaster mental adjustment.

These factors do play a significant role in influencing the coping abilities of the individuals who have experienced a loss.

Remember

- ✓ Tsunami has affected all spheres of human life and all these reactions are interlinked.
- ✓ After the Tsunami, the emotional reactions among the survivors would vary and usually undergo change over time.
- ✓ These reactions are normal reactions to an abnormal situation.
- ✓ These reactions are common and universal.
- ✓ Anybody who has experienced the Tsunami would exhibit these reactions.
- ✓ Rehabilitation and rebuilding are long-term processes.
- ✓ There are various factors, which influence the coping capacities of the survivors experiencing loss.

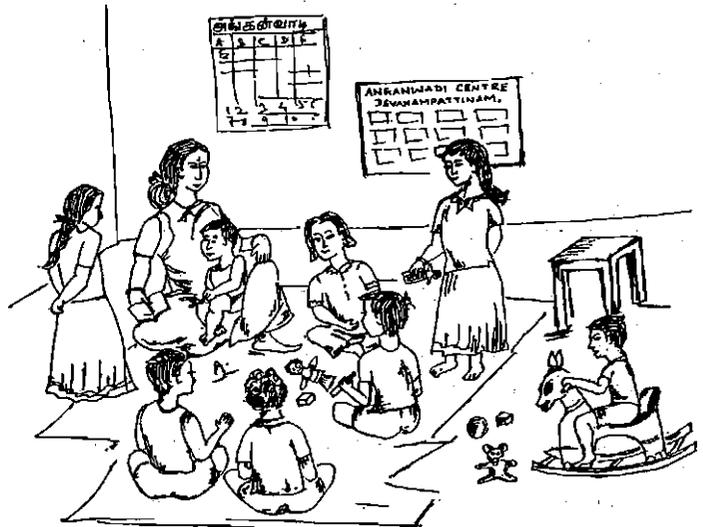
ROLE OF COMMUNITY LEVEL WORKERS (CLWs)

Any community when faced with a disaster responds in its own way to the situation. One such response is the reaction of several local people or groups of people who immediately come forward to help in one way or the other in order to alleviate the situation. These people are known as the *community level workers (CLWs)*. They play a crucial role in the relief and rehabilitation efforts after the community has experienced a disaster.

These CLWs mostly are people who belong to the community and are likely to know the area well and have close ties with several people in the locality. This enables them to work in a sustained and intense manner with the community.

These CLWs might include

- ✓ Anganwad functionaries
- ✓ Village Health Nurses (VHNs)
- ✓ Schoolteachers
- ✓ NGO/CBO workers
- ✓ Volunteers
- ✓ Local community leaders
- ✓ Temple priests
- ✓ Panchayat members
- ✓ Revenue Inspectors
- ✓ Women self help group members



Generally these CLWs do have a helping tendency, but they often don't know whether they are doing right or wrong. *The CLWs are a vital link between the disaster survivors and the several helping agencies (NGOs, Governmental agencies) that come from outside the community.* They provide help to the survivors from the initial phase, immediately after the disaster has occurred. Psychological problems following disaster often tend to be neglected, as they are relatively less visible when compared to the damage to life, physical health and property. It's important to remember that psychological problems often occur and if unattended it would hinder the functioning of the survivor. Hence, early identification of this problem, followed by intervention, helps the survivor to recover.

At the early stages following disaster, most survivors are mentally open and willing to talk about their experiences. Later on with the passage of time this may change into a defensive, non-cooperative

attitude if no attempts are made to provide help. Therefore, it is of utmost importance that survivors are encouraged to seek help and talk about their distress as early as possible. The CLWs need to facilitate this process. In general, people do not readily or directly talk about their psychological distress *however they do talk about themselves if adequate concern is shown towards them.*

Psychosocial intervention can be provided by the CLWs by making daily visits to the homes of survivors. Attempt should be made to spend time to encourage the survivor to talk and express his/her feelings about the loss, imparting health education, discussion about his/her health problems, motivating to organize group meetings, organizing educational activities along with other relief and rehabilitation efforts under spectrum of care and encouraging survivors to maintain a routine despite loss.

The most important step in the psychosocial care and recovery process is to recognize that such care is essential for the entire population exposed to the catastrophic event. People differ only in terms of the degree of support needed. In other words, the care is holistic rather than being limited to relief and support. Psychosocial care means not only emotional support but also practical help, suggestions, guidance, information, education and so on.

Under the spectrum of psychosocial care, eight basic issues will be addressed by the CLWs. The focus will be identification of needs and attention to specific problems. Referrals would be made as and when required and there would be commitment for long-term work. They would be working not only with the people who have been affected but also with larger society.

Spectrum of care would cover issues related to

- Rights and Justice
- Compensation
- Health Care
- Housing
- Psychosocial
- Livelihood
- Self Help
- Legal Aid



Role of a CLW

The foremost task of a CLW would be to meet and interact with the Tsunami survivors and their families. He/she should initiate interactions among the families using culturally appropriate greetings and gestures. In subsequent interactions, the CLW would help them with:

Understanding the changes that they experience in their body and mind.

When people face any traumatic event, they experience both emotional and physical reactions. Helping the survivors to understand that it is absolutely *normal* to feel this way is very important. It will make them feel more comfortable to deal with what they are experiencing. Knowledge that what they are experiencing currently is just a temporary phase and that over time they would be able to get back to their normal life, would benefit them.

Decreasing the physical and emotional effects by using the basic principles of psychosocial care.

Here the CLW would use the basic principles to extend emotional support and establish a relationship with the survivors. This would help the survivors to relate what they have experienced, and share their feelings. By ventilating, the pent up emotions within them would get lighter over a period of time.

Support and rebuild the shattered lives of the survivors in the areas of housing, work, health and community.

After establishing rapport, facilitating reliving and encouraging grief resolution, the CLW would go on to observe or enquire about any specific help a person may need. This could be in the form of

- Helping them to get the compensation money and guiding them as to how to use the same, assistance in paralegal work, house damage assessment.
- Rebuilding their houses.
- Practical help like getting forms/accompanying survivors to the offices or helping the individual open a bank account etc.
- Help them to get the livelihood support, so that the survivors can get back to their fishing at the earliest.
- Facilitating the survivors to get the relief materials as entitled.
- Enabling them to restart their livelihood.
- Mobilizing the community to provide help and support to the vulnerable groups like orphans, widows, aged and protect them from any kind of exploitation.
- Ensuring medical help if necessary, especially going to hospitals.
- Networking and coordinating with other agencies are also important for strengthening various kinds of support.

This sort of holistic approach would be more substantial not only in terms of meeting varied needs of the survivor, but it would also provide more entry points for intervention.

Tips towards being an effective CLW

Do's	Don'ts
<p>Visit families regularly. Accept food or drinks like tea, juices if offered. <i>This facilitates in building rapport.</i> Help the survivors to get medical care or other help if needed. Help the survivors in contacting their relatives so that they can get support from them. Provide practical help in terms of handling the compensation issues, issues related to housing, education and other social security benefits, whenever necessary. Facilitate networking among the survivors. Encourage the local community to initiate and sustain the actions that they have already taken as a response to the disaster situation. Respect the socio-cultural norms. Be non-judgmental and neutral.</p>	<p>Make false promises. Take decisions for the survivor himself or herself. Miss appointments. Get upset with the survivor's behavior. Sometimes they might be angry, uncooperative with you or blame you for causing trouble to them by regular visits or at times they might be very demanding. Overburden yourself with work. Take sides while working at a family level.</p>

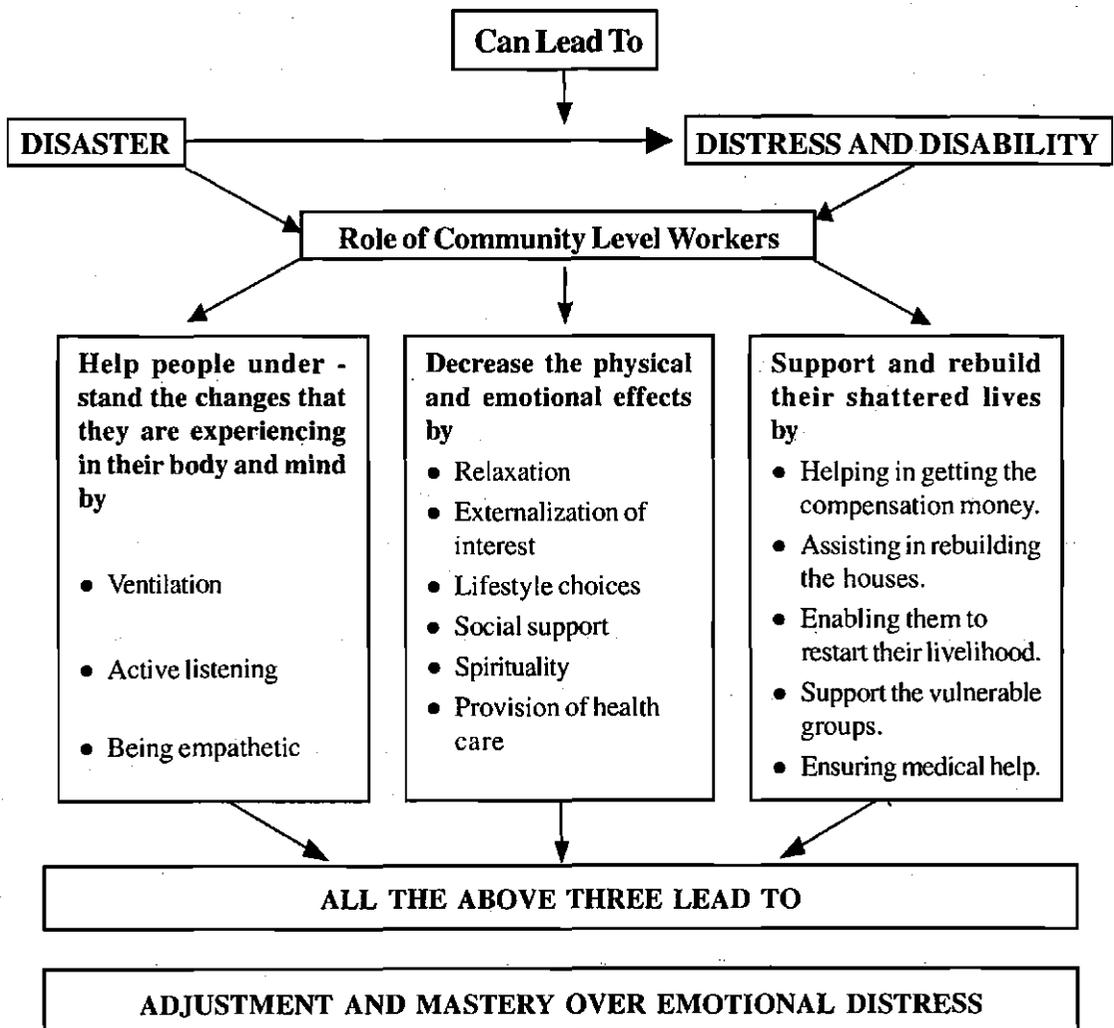
Remember

- ✓ CLWs are appropriate people to work with affected people.
- ✓ CLWs are the vital links between the disaster survivors and the several helping agencies (NGOs, Governmental agencies) that come from outside the community.
- ✓ They play a crucial role in the recovery process.
- ✓ They need to provide holistic care rather than only providing emotional support.

PSYCHOSOCIAL INTERVENTIONS

Under normal circumstances, most people can take care of their problems. The disaster like the Tsunami, being an abnormal situation, upsets people's equilibrium temporarily because of the emotional reactions they experience. Till the time they can develop successful coping strategies and handle their lives independently, they require emotional support.

It is like extending help to a person who has fallen on the ground. Extend your hand to help the person sit, and then slowly make him/her stand. Then walk a few paces with him/her and gradually he/she will walk independently. The following diagram would help understand at a glance the three areas of focus for psychosocial interventions:



Immediate Psychosocial Care

Few simple activities of immediate psychosocial care can be of great help during the rescue and relief phases of any disaster. These activities would include the following:

Meeting the immediate needs of the disaster survivors that include food, water, clothing, shelter and medications

Listening to the survivor about his/her personal experiences of the disaster

Linking with family and community members

Helping them to get relief materials

Attending to the medical needs of the disaster victims

Seven basic principles of psychosocial care

There are seven basic principles, which can be used for providing psychosocial support to the disaster victims after any disaster situation. They are described below:

Ventilation

A Tsunami survivor who has experienced trauma will have strong emotions, which will very often be suppressed. The danger is that if there is no space or appropriate stimulus for release of these emotions, then the stress/ pressure will keep building until one day the person breaks down. Hence, it is extremely important for the CLW to meet the Tsunami survivors, interact with them, help them talk about (ventilate) what they have experienced and share their feelings and emotions. It allows the survivors to release his/her pent up emotions and thus get relieved.

Once the survivor is able to talk about the loss and personal grief, he/she would feel better. It becomes easier to analyze his/her life and understand the feeling of a vacuum, emptiness created by the loss. This would facilitate in rebuilding his/her life. Hence, the more he/she releases the pent up feelings, the lighter he/she would feel.

For example

In a pressure cooker the safety valve is very important. It systematically and periodically takes the extra pressure out slowly and helps in getting the food cooked. The safety valve helps the extra pressure to be released or else the cooker could burst.



Similarly, the role of a CLW would be to work like the safety valve by getting the Tsunami survivor to slowly but consistently release his/her tensions, pain, grief and other emotions that have been suppressed. ***This is an extremely important role of a CLW.*** This process involves release of emotions and feelings. It is a very important

intervention and should be used as soon as possible. People under stress find it difficult to relax and may have other reactions. Even in camps, people can be very lonely.

Things to be done to allow ventilation:

Listen carefully and attentively

Maintain eye contact.

Acknowledge distress.

Do not interrupt.

Never ask them to stop crying.

Do not be judgmental.



Provide support by physical touch like holding hands, patting on the shoulders when someone cries. However the cultural barriers of the community should be kept in mind in this regard.

For example

A 13-year-old girl who was very attached to her father lost him in the Tsunami and was unable to talk about her distress. She was upset, had stopped eating and mingling with other children of her age. She also had difficulties in sleeping. The CLW engaged her in a skit wherein she was asked to play the role of a girl who was attached to her father. She could identify herself with that little girl in the skit and broke down while playing the role, saying, "Whenever I say the dialogue it reminds me of my father. I also used to demand so many things from him and he used to fulfill all my demands happily. I miss my father very much". This helped her to express her feelings that were bottled up within herself.

Empathy

Often when we look at others we do not see their distress and everything appears to be fine. It is very difficult to understand another person's feelings of loss and pain. However, if we attempt to perceive things from the other person's perspective it will give us a clear picture of what that person is going through. The same goes for the CLW. The idea of being able to feel and experience the pain as your own by trying to be in the other person's situation is the main idea of being able to empathize. Whenever a Tsunami survivor is sharing his/her feelings and experiences, the CLW needs to listen to him/her patiently and try to realize what he/she went through by keeping him/herself in the survivor's position. If the CLW is able to empathize with the Tsunami survivor, then the latter will feel a great sense of relief of being truly understood.

Active listening

Good listening is an important skill to provide emotional support to the Tsunami survivor. The community, which has experienced the Tsunami, will have lack of privacy in talking to people. There may be noise and distractions. It is important that as a CLW one should practise the following to promote active listening while working with individuals.

- ✓ **Maintain eye contact with the Tsunami survivor when he/she is talking:** This shows that the CLW is interested in listening to him/her and is concerned about the person.
- ✓ **Respond occasionally while listening:** This makes the person who is expressing feel that he/she is taken seriously and that the CLW understands what he/she is saying. Sometimes it helps to paraphrase what has been said, often giving the speaker another viewpoint.
- ✓ **Avoid interruptions:** Allow the person to finish whatever he/she is saying. Do not interrupt unless there is confusion and the details are jumbled.
- ✓ **Be accepting:** Do not prejudge, moralize, condemn, or interrupt what the person is saying
- ✓ **Empathize:** Empathize with the person while he/she shares his/her feelings/ experiences. As a CLW one needs to be sensitive and have the ability to recognize what the other person is going through, his/her feelings or emotional experiences.

Externalization of interest

This principle emphasizes on engaging the survivors in some kind of activities that interest them in order to give them a sense of being productive. This helps in their recovery process. When people are engaged in activities, their minds are occupied meaningfully. Similarly, any sort of physical activity energizes people and makes them feel better.

For example

Following the Tsunami, when relief camps were set up, a 40-year-old-woman from an affected area volunteered to help in the cleaning work in a relief shelter. She was interested in this activity and she used to keep the surrounding clean. That helped her to overcome her grief.

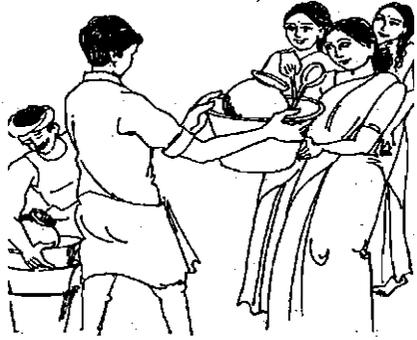
Similarly, in another instance, young men from the area began involving themselves in sorting out and distributing relief materials in the camps.

Other such activities that can be arranged in the community include involving older women as caretakers of the orphaned children, involving people in cleaning up the camp surroundings, cleaning up plates and vessels, filling up water, organizing games for children etc.,



Social support

Everyone feels very comfortable with a certain level of emotional support that comes from others around. Social support networks are extremely important for feeling comfortable and secure. In any disaster situation these support systems get disrupted.



For example, if we go to a new town for the first time and have to work or study there, we would feel insecure, lonely, scared, and at times fearful. If we meet some people from our background (language, religion, region, etc.) then we would immediately feel a sense of happiness, would want to be with them, try to meet them and generally feel relieved.

In any disaster situation the social support system gets disrupted, as the individual not only loses his/her family members, personal belongings and property but also his/her support systems like friends, neighbors and the community people who otherwise constitute his/her helping hands during times of need.

A 48-year-old man who lost his fishing boats and nets in the Tsunami says, *“I do not know how I will get back my boat and nets. If the Government does not provide any support for this, it will be very difficult. Earlier whenever we were in need of money we usually borrowed from our neighbors and other community people. But now they have also lost their boats, nets and other properties. So they will not be able to help me. I feel so helpless.”*

Social support is extremely important for feeling secure and comfortable. So, it is essential to put in efforts to provide some sort of support through a bonding by almost being like a family member. The involvement of external agencies and especially CLWs can play a great role in extending the emotional support.

Relaxation and recreation

Getting back to a routine is a great way to divert one's mind and dealing with the stress of emotional reactions. Relaxation and recreation are two very important components that can facilitate the recovery process. The more the survivors engage in recreational activities, the faster will be the normalization process. For example, CLWs can engage the Tsunami survivors in several recreational activities like playing carom/ludo, singing, listening to music, etc in the relief camps.

Engaging the Tsunami survivors in relaxation/breathing exercises helps in the healing process. Encourage the survivors to undertake these exercises at least twice a day regularly. This would help to gain control over their anxiety.

Instructions

The person should sit in a squatting position and place his/her hands on the knees. Then take a deep breathe, hold it for a few seconds and slowly exhale.

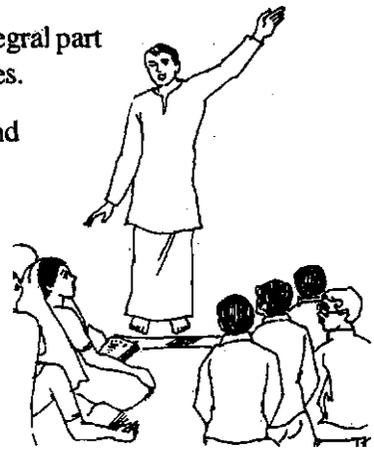
Encourage him/her to do it for 5/10 minutes steadily and slowly. Repeat this at least twice a day.

Another exercise could be to lie flat on the floor. Close your eyes. Take a deep breath and exhale slowly. This should be done for 5 minutes several times a day. Concentrate on fresh air that is coming in and the warm stale air that is going out of your body.

Spirituality

In our country, religious beliefs or belief in a higher power is an integral part of our being and gives us great relief and support during trying times.

We may question this power at times to ask why we are suffering and why we have to go through pain. But at the same time we will again learn to rely on the same power to get through any crisis we are facing. So it is important to reinforce this spirituality in anyone we are working as it has tremendous power to heal pain and suffering. Thus it is essential to encourage the survivors to practice their spiritual beliefs and rituals. Practising spiritual beliefs helps in the recovery process.



For examples The CLWs can organize mass prayers for the Tsunami survivors who are staying in the relief camps. They can also be encouraged to participate in group activities like singing songs, etc.

These principles can be used with people at three different levels, i.e., the individual, the family and the community.

While using these principles, it should be remembered that as a CLW, one should *never make any false promise to the Tsunami survivors*, as the impact can be harmful to the survivor.

Working with individuals

For people who are willing to talk immediately

- Listen attentively.
- Do not interrupt.
- Acknowledge that you understand the pain and distress by leaning forward.

- Look into their eyes.
- Console them by patting on the shoulders or touching or holding their hand as they cry. *Caution: Be sensitive to community norms about touching members of the opposite sex.*
- Respect the silence during your interaction; do not try to fill it in by talking.
- Keep reminding them, *"I am with you. It's good you are trying to release your distress by crying. It will make you feel better."*
- Do not ask them to stop crying.

For those unwilling to talk

Some people may be very distressed or may remain mute and silent.

Do not get anxious or feel rejected that they are not communicating. Remain calm, tell them you are here to help them in the best possible way

Maintain regular contact and greet them.
Ask them about their welfare.

Maintain interaction by reminding them about the pain of separation, distress of being alone, helplessness, isolation, etc. This will help them to feel their pain and get it out of their system.

Acknowledge that you understand their distress, the frustration, emptiness and also subsequent anger because of the vacuum created by the loss.

Share their grief and console them that losing someone dear is terrible and unfortunate.

Make them understand they are not to blame for the tragedy and that they need not feel guilty.

Tell them you will return the next day or in a couple of days.

Tell them you are not upset or angry because he/she did not talk. Meanwhile ask him/her to think about whatever has been told. *"Memories of the good days you spent with each other must be alive in your memory and may be troubling you again and again. You must be tense from inside! Try and let the steam out, that will make you feel better."*



Once the person starts talking, maintain a conversation using the following queries

- ✓ How are you and how are your other family members?
- ✓ Give details of all the losses experienced by you and your family.
- ✓ How do you feel about the loss? What is the personal meaning of loss to you?
- ✓ What is the support you received after the Tsunami from relatives, friends, relief workers, etc.?
- ✓ How have you been recovering? How are you handling this situation?
- ✓ What are the effects of the Tsunami on your health like are they physical problems or problems like aches/pains, decreased sleep, appetite, fear, and loss of interest?
- ✓ How do you visualize the future?
- ✓ What other help do you require?

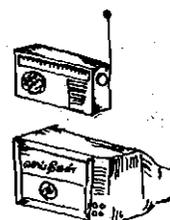
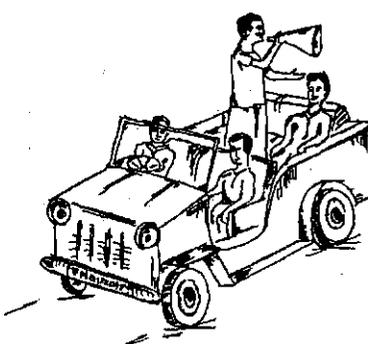
Caution: Guide individuals to adopt healthy behavior.

What can individuals do to recover?

Listen and believe in authentic information about the Tsunami , do not believe in rumors

Soon after the Tsunami there were a number of rumors that were widespread in the community causing enormous panic and anxiety among the survivors. Rumors were spread on the fourth day of the Tsunami that another wave like Tsunami would hit again and would kill the eldest male member of y.I

prayers were organized wherein people lit lamps with various types of oil. There were rumors ha since 'e fire ragedy in Kumbokonnarnam happened on 26th June2004, followed by the Tsunami on 26th December, on 26th of January 2005, some unforeseen event would occur which would take away lives of millions. These rumors triggered anxiety, fear and tension among the survivors.



There was a rumor that fishes in the sea were infected and that ear rings, fingers were found in them. It was hinted that fishes ate the dead bodies. Such rumors gave a strong blow to the fish market with a sudden decline in the demand for fish. This hit the livelihood of the fishermen. It is important to curb the spread of such rumors that usually trigger panic and tension among the survivors. There is

a need to disseminate authentic information about the Tsunami either by going around or using posters, placards and loudspeakers.

- ✓ Stay with family members who are alive.
- ✓ Be with people from the same locality.
- ✓ Get back to daily routine/chores as soon as possible.
- ✓ Make it a point to share your experiences and feelings with relatives or friends. This will help release emotions.
- ✓ Take part in relief and rehabilitation operations. *Work is a good tonic for healing.*
- ✓ Avoid smoking, alcohol or other intoxicants.
- ✓ Sleep for 8 hours at least and eat well.
- ✓ Take time off everyday to relax and have a good time by playing games, reading, listening to music, and singing, performing prayers and being with other people.
- ✓ Make time for yourself and acknowledge and admit that you will not always be functioning at your usual level of efficiency for a few weeks/months.

Working with families

In addition to individual specific interventions, the family as a whole also needs to be helped simultaneously. This depends on the number of individuals surviving in the family. If some family members are present, encourage them to adopt the following activities:

- ✓ The family as a group should be encouraged to share their feelings, experiences and losses.
- ✓ Encourage the family members to contact relatives. This will help mobilize support and facilitate recovery.
- ✓ Participate in rituals like prayers, keeping the dead person's photographs, preserving the dead family member's belongings.
- ✓ Encourage the Tsunami survivors to engage in meaningful activity as a family.
- ✓ Resume to normal activities of the pre Tsunami days within the family like sending children to school, preparing to resume fishing etc
- ✓ Support each other at home. Emphasis should be given that the family members should regularly take up activities together.



- ✓ Engage in recreational activities.
- ✓ Restart activities that are special to your family like having meals together, praying, playing games, etc.
- ✓ Be together as family members. Do not send women, children and the aged to far off places for the sake of safety; separation in this case can cause a lot of anxiety to them and to others in the family.
- ✓ Keep in constant touch in case of a member of the family having to be shifted to a far off hospital or residence. Update him/her about yourself as well as find out about him/her. This gives a feeling of being cared for.

Working with the community

The following activities will help in rebuilding community life and setting up the social support systems, which are essential in the long-term rehabilitation process.

- ✓ Grief resolution should occur at the personal, family as well as the community levels. Group mourning is a process of mass grieving. It expresses solidarity of the grief stricken community and facilitates unity and collective action. Such activities should be organized initially on a weekly basis, and gradually on a monthly basis, and later annually.
- ✓ Singing folk songs about the loss that has happened might help the survivors to gather in a common place and share their grief
- ✓ Organizing the Tsunami survivors and engaging them in devotional songs and hymns might be helpful.
- ✓ Group participation for rebuilding activities like, building the houses, preparing food for others in the relief camp, preparing to resume fishing, putting up a hut as a school for the children, etc. All these actions would help the Tsunami survivors to recognize that there are others around to help them and that they are not alone.
- ✓ Formation of Self Help Groups (SHGs) for women, wherein as a group they would initiate activities that would help them in rebuilding their lives.



For instance, after the super cyclone, women formed SHGs and started taking up livelihood activities, which made them feel good and also benefited others who needed help to come to terms with the loss.

- ✓ Organizing rallies to sensitize and create awareness among the Tsunami survivors about issues related to schooling of their children, livelihood, housing etc., and bringing about a feeling of confidence and normalization among them.
- ✓ Encourage the Tsunami survivors to discuss about local problems that have evolved subsequent to the Tsunami and initiate collective action to achieve it, like:
 - Rebuilding roads.
 - Restarting the schools.
 - Restoration of power/water.
 - Rebuilding the boats and fishing nets that will facilitate in resumption of livelihood.
 - Access to medical care.
 - Working for getting the compensation on time.

Facilitating reconciliation

All the above-mentioned interventions are useful in the process of recovery and thereby would help the Tsunami survivor to gradually rebuild his/her devastated life. Rebuilding one's life is a lifelong process, the gradual initiation of which starts right after the disaster. Timely intervention can facilitate the survivors in reaching towards reconciliation.

Remember

- ✓ There are seven basic aspects that a CLW can use as psychosocial interventions to work with people who have been affected.
- ✓ Rebuilding of life occurs at the level of the individual, the family and the community.

SPECIAL GROUPS

No one who witnesses a disaster is untouched by it'. Although we understand this, it is also important to recognize that due to various factors, there are groups of people who are more vulnerable and need greater attention.

After the Tsunami some groups of people have become vulnerable and are in need of special attention and intervention. As a Community Level Worker one needs to identify these '*at risk groups*' who are more vulnerable after the Tsunami. These groups are:

Their issues are :-

- Women becoming widows.
- Destitution of single women.
- Increased responsibility.
- Increased vulnerability.
- Increased use of substances.
- Increase in domestic violence.
- Sexual and physical abuse following a disaster.
- Coercion to keep quiet about assault.
- Lack of privacy in camps.
- Health needs.



Generally women experience greater degree of emotional distress as compared to men. Due to various biological and socio-economic factors, *women experience more stress*, especially those women who lost their husbands, *and thus feel more vulnerable than men in disaster situations*. Women respond to stress differently from men, which can be manifested in the following ways

Crying spells and feelings of sadness.

Talking about the events and trying to reach out to others in the community.

Having symptoms like 'fainting'.

Experiencing multiple body aches and pains as a response to stress.

Expressing their sense of helplessness.

Taking the role of a caretaker and showing more resilience in taking care of young children, the aged and the disabled.

Along with these reactions, widow experiences:

- A sense of emptiness over the loss of her husband
- A sense of helplessness due to the loss of the support in the absence of the husband.
- Difficulty to deal with the grief of having lost her spouse along with the burden of increased responsibility towards the surviving family.

A 37-year-old woman delivered her first child 10 years after marriage in her native town. By the time she delivered her first child, the husband died in the Tsunami. When she returned to her in laws place, she could not see her husband's body. Her in-laws now have doubts about the child's paternity. The widow is very upset about such doubts and about the loss of her husband. She is very worried as to how to bring up her child without any help or support from her in laws.

Women can be helped in the following ways

- ✓ As mentioned earlier, women need to be together with family members or familiar people rather than shifting them to far away places
- ✓ Disseminate information about the safety of their husbands, children and family members.
- ✓ Help them to share their feelings and fears with others.
- ✓ Encourage them to pursue their interests.
- ✓ Involve them in routine activities like taking care of other children and the aged, cooking and caring for the sick.
- ✓ Formation of Self-Help Groups (SHGs) to encourage in sharing their feelings about their loss, suffering and participation in rehabilitation activities.
- ✓ Involving the women in relief and rehabilitation activities.
- ✓ Decrease the physical and emotional effects by teaching relaxation techniques, encouraging them to practice spiritual beliefs.
- ✓ Help to support and rebuild their life by getting them help for housing, assistance for compensation, paralegal aid, educational help and livelihood aid.



In a relief camp in Cuddalore, when men were found to spend all the money given through relief on consumption of alcohol, the relief workers involved women in the relief activities, wherein women were engaged in distribution of relief materials and money.

Children

Children are always disturbed by any change. They are often treated as young and hence not informed of what exactly is happening. Thus, they are unable to comprehend what has happened. They seek the comfort of adults, as there is a need to discuss and sort out their fears. They are not very sure of the options to get out of the problem situations. They are dependent on adults physically and emotionally. Loud noises, shouting, darkness, running, panic and anxiety, separation from loved ones, loss of their comfortable environment and deprivation of food and drinks affect a child much more than an adult.

Very young children (1-5 years) react b

- Crying - whimpering or screaming.
- Excessive clinging and demanding.
- Regressive behavior (thumb sucking, wanting to be carried, bed-wetting)
- Loss of bowel/bladder control.
- Fear of darkness.
- Fear of being left alone.
- Easily frightened and then angry.
- Sleep disturbances- gets up crying, unable to sleep alone, nightmares.
- Sensitivity to loud noises.
- Fears weather- lightening, rain, strong winds.
- Moodiness, irritability.
- Helplessness and confusion.
- Loss of appetite.
- Speech difficulties.
- Increased aggression, especially in boys.
- Temper tantrums



A mother says,

“My three-year-old son, who was otherwise playful, has become very quiet since the waves hit and destroyed our lives. He always clings to me, and I need to carry him all the time. But this was not so before. He is also not eating properly, becomes scared and starts crying, if left alone.”

A mother says,

“My four-year-old child has become very aggressive. For very trivial reasons he becomes irritated. This was not present earlier. He becomes so angry that he starts biting me. I do not know how to take care of him.”

School age children (6-11 years) react by

- Physical complaints-headache, stomach aches, giddiness.
- Aggressive behavior at home or school.
- Bed-wetting.
- Change in appetite.
- Inability to sleep, nightmares.
- Sadness and apathy.
- Disobedience.
- Disruptive behavior.
- Understand the loss and become anxious.
- Withdrawal - does not mix with friends.
- Fear of recurrence, fear of darkness, sleeping alone, separation from parents, fear about weather, water, safety, imaginary fears.
- Difficulty in following routines.
- Fighting with siblings, parents and friends.
- Disinterest or difficulties in school work, disturbing others, worrying, remain tense, indisciplined, refusal to go to school, poor concentration.
- Feeling guilty and responsible for the loss.



A 10-year-old boy was very fond of playing on the seashore along with his friends. He would jump around in the seawater, splash water on his friends. After witnessing the fearful image of the sea, which washed away his house, he is very fearful to go near the sea. His heart beats fast when he pours water on his body during bath. It reminds him of the devastating Tsunami waves, which washed away, everything on their way.

Adolescents (12-18 years) react by

- Seeking isolation, become less communicative.
- Change in appetite and sleep disturbances- sleeplessness or increased sleep.
- Feel different or alienated because of their experiences.
- Irritability.
- Increased risk-taking behavior, irresponsible behaviour.
- Substance abuse-smoking, drinking and consumption of other drugs.
- Avoidance of trauma -related thoughts, feelings and activities.

...g...s...i...-a.g..., fig...a...-s...y.

- Feelings of hopelessness, neglect and isolation.
- Disobedience, especially towards authority and parents.
- Trying to get involved in activities to get a sense of control like rescuing and organizing at the camps.
- Angry, frustrated and may feel very helpless.



D...-i...d...-l...-.

- Guilt for not being able to do enough or for having survived.
- Suicidal thoughts.
- Inability to concentrate.
- Behavioral problems like aggression, lying, stealing.
- Dropping out of school or work.
- Decreased levels of energy, aches and pains and other physical complaints due to stress.
- Low interest in social activities /recreations.

A 17-year-old boy lost his father at an early age. His mother was unable to run the house because of financial difficulties. Hence, he was forced to drop school to earn money. He has one brother and one sister who are paralytic patients. He has two sisters who are of marriageable age. With lot of difficulties, he managed to make a house and the house warming ceremony was only two days prior to the Tsunami. The Tsunami washed away his newly constructed house. Earlier he used to earn his living by fishing. However, after the Tsunami he is too scared to go out into the sea for fishing. Consequently he has developed feelings of emptiness and helplessness. He feels lost and does not know what to do in life.

Added to the above-mentioned reactions, children who became *orphans* after a disaster like the Tsunami become more vulnerable. They experience a deep sense of helplessness and insecurity after the loss of their parents.

An 8-year-old-boy lost both his parents in the Tsunami. He was put in an Orphanage. However, after few days he came back from the orphanage and started staying alone. He would at times stay with his uncle and aunt, at times at neighbor's place. He would eat food given by people from the locality. At times he would not eat at all. After going back from the orphanage, he went to school for two days. After that he stopped going to school.

Along with the orphans, *single parent children* are also very distressed and experience a sense of insecurity and isolation.

A 16-year-old boy and his father had been to the sea for fishing on the day when Tsunami struck their village. On return from the sea, he and his father found that their house was washed away. The boy could find his younger brother who is eight years old and younger sister who is five years old in a camp. And after one day, the dead body of the mother was found. Now father has started taking increased amounts of alcohol. The father does not do any work. The boy has to take the entire responsibility of looking after his younger siblings, cooking, getting compensations etc. He is very distressed. He says that earlier he was a very easygoing person but since Tsunami life has changed for him. He feels confused at times as to how to fulfill so many responsibilities.

Children whose parents have remarried also need special attention, as they are also a vulnerable group.

A 11-year-old girl lost her mother in the Tsunami. She has another younger sister who is five years of age. The girl was coming to school even after the Tsunami. Recently she stopped coming to school. The teacher made a home visit and found that her father has remarried few days back. As the teacher made a home visit, she has started coming to school again. However, she does not talk to anybody in the class, she is very inattentive. She does not look at the black board while the teacher is teaching and keeps looking outside through the window.

In any disaster situation *girls* are always at risk to incidents like sexual abuse more often than others, which makes them more vulnerable.

Often the child does not understand why he/she is behaving in a particular manner and cannot articulate the reasons for the behavior clearly. It is necessary for the parents/adults to understand these changes and take certain measures to help the child get over the stress. The goal is to *improve* the feelings of security and bonding between the child and the parents.

This can be done by:

Letting the child be close to adults whom he/she loves and is familiar with.

Re-establishing some sort of a routine for the child like eating, sleeping, playing near the sea shore and going to school

Engaging the child in playful and recreational activities like drawing, story telling, singing, clay modeling, etc.

Providing security to the child by touching, hugging , reassuring verbally, etc

Allowing the child to talk about his/her feeling of the Tsunami either in group situation or at an individual level.

For example

In the relief camps, the CLWs can involve the children in several playful activities like drawing, painting, puppetry, skit, clay modeling, playing, telling rhymes and stories etc. Through these playful means children would be able to express their painful feelings and experiences about the Tsunami that would help them in the recovery process and normalization of their routines

- ✓ Organizing story-telling sessions, singing songs and games involving physical movement.
- ✓ Paying more attention and spending time on their studies once they return to school.
- ✓ Working with other caregivers in the environment like Anganwadi workers, schoolteachers, etc., to help the child recover.
- ✓ Arranging foster care for children who have become orphans after the Tsunami.
- ✓ Providin referral for mental health care if necessar .

Aged

When faced with the death of many younger ones, aged people might feel very sad and lonely and *may take a longer time and more effort to recover*. Very old people are often not totally in control of the situation. They might manifest reactions in the following manner:

- Withdraw, cry and groan for many months.



- Experience sleeplessness and loss of appetite.
- Be agitated, feel lonely, hopeless and have suicidal ideas.
- Be susceptible to illness as a result of being emotionally disturbed.

A 65-year-old man says, "In the nights when I go to sleep, I get the images of waves coming and houses being washed away, children drowning. I cannot sleep at all. The more I want to sleep, the more I get these images in front of my eyes".

They can be helped in the following ways:

- ✓ Keeping them with their near and dear ones.
- ✓ Visiting them regularly and spending time with them.
- ✓ Touching them and allowing them to cry.
- ✓ Re-establishing their daily routines.
- ✓ Making them feel responsible by giving them some work to carry out that is not too difficult.
- ✓ Getting them involved in relief work by requesting for their assistance and direction.

Persons with disability

Disabled people were equally affected in the Tsunami as others. They are also found to manifest many reactions as a response to the Tsunami and the loss that they have incurred. The disability often stretches their recovery skills. Their recovery may take a prolonged time or they may regress to a lower level of functioning.

A 12-year-old boy who is physically disabled says, "Any slight noise of the waves makes me fearful, as to what if there is another huge wave coming. I'm scared; as to how will I escape if there is a similar wave. I don't have one leg, so I cannot run as fast as others will".



They can be helped in the following way:

- ✓ Removing them to places of safety.
- ✓ Always keep them informed of what is happening so that they do not feel isolated and ignored.
- ✓ Getting them involved in activities that can be performed by them considering their limitations.
- ✓ Integrating them in group discussions.

- ✓ Taking initiative in getting them appropriate aids and appliances in collaboration with Vocational Rehabilitation Center (VRC).
- ✓ Helping them to get the social security benefits like disability pension.
- ✓ Helping them to get disability certificate, income certificate and identity card to avail of the existing facilities.
- ✓ *As mentally challenged people, especially the women and children are vulnerable to sexual abuse, they have to be given special attention, protection and care.*
- ✓ Keeping them informed of the positive news.
- ✓ Attending to their medical ailments by helping out with doctor's visits and consultations, etc.
- ✓ Engaging them in activities, which they can carry out.
- ✓ Helping them overcome their feeling of insecurity in case of having lost their livelihood. The skills they were using prior to the Tsunami should be explored.

People who have become disabled subsequent to the Tsunami need special attention. They can be helped in the following ways:

Enabling them to accept and adjust to the changes that have taken place and help them to overcome their sense of insecurity and dependency.

Helping them look into their existing strengths and capacities with which they can move ahead in their life.

Building their capacity in terms of skill development to manage their lives with a disability.

Apart from these issues, all the above-mentioned interventions are applicable for them too.

Remember

- ✓ Although everyone becomes special subsequent to disaster, there are some groups of people among the affected ones who become more vulnerable and need special care and attention.
- ✓ These groups of people need to be taken care of.

REFERRAL

The referral process should be done using the spectrum of care framework discussed earlier. *There is a need to look at a holistic model of care rather than focusing purely on the emotional aspect of the rehabilitation work.* There are seven basic areas that need to be considered for each of the families that the CLWs would be working with. It is important to be able to identify the needs in any of these categories and know whom to contact for further assistance. Also CLWs need to tap sources from within the larger social network.

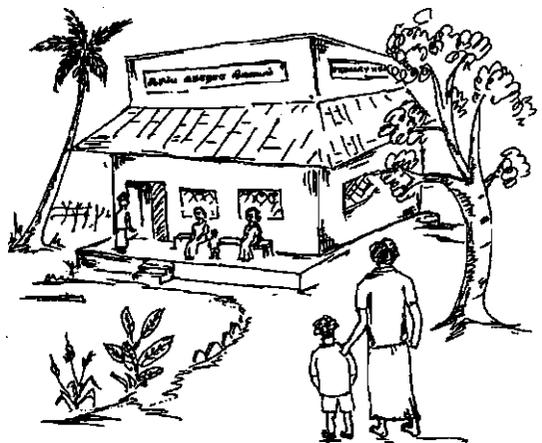
Issues for which referral is needed

- Livelihood issues like assessment of needs, procurement of the fishing boats, nets and other grants.
- Housing plans like assessment and getting construction material.
- Paralegal issues like arranging for compensation and other social security benefits - widow pension, disability pension for the Tsunami survivors.
- Medical issues - regular health check ups, special needs of the disabled i.e. crutches and other aids and appliances
- Issues related to children like educational needs, arranging sponsorship for the educational purpose of the children, adoption or fostering and financial assistance.
- Women support group like special needs of a single parent, widow etc.
- Emotional problems.

For emotional issues it is important to understand that there are certain behaviour patterns one can use as a guideline to identify individuals or families who need help from CLWs. Some of the people may be in a state of mind where they may require professional assistance or the help of a specialist. This would mean that the CLWs have to become a link and know how to enable the individual to access the guidance of a specialist.

Referring a person to a specialist will require tact and sensitivity because of factors like social stigma, etc. Help may be essential but the individual may not readily accept referral for a variety of reasons. However, the first task would be to be able to recognize when it may not be within capabilities of the CLW to help a person and thus CLW has to refer him/her for professional help.

The first referral centre would be the Primary Health Care Centre (PHC) or the doctor attending the



health camp. The doctor at this centre would be able to provide appropriate care. Contacting the visiting psychiatrist and then following up the case at the hospital if needed, is important. The following are the areas, which you can consider while deciding whether you can help by self or you would need to refer the person.

Alertness and Awareness

CLW can handle the situation if the person	Consider referral if the person
<ul style="list-style-type: none"> ✓ Is aware of who he/she is, where he/she is, and what has happened. ✓ Is only slightly confused or dazed, or shows slight difficulty in thinking clearly or concentrating on a particular subject or task. 	<ul style="list-style-type: none"> ✓ Is unable to give his/her name, or with whom he/she is staying or interacting. ✓ Cannot recollect the place he/she is from, where he/she is staying, or what he/she does. ✓ Cannot recall events of past 24 hours. ✓ Complains of forgetting names and other things.

Behavior

CLW can handle the situation if the person	Consider referral if the person
<ul style="list-style-type: none"> ✓ Wrings his/her hands or appears still rigid or clenches the fists. ✓ Is restless, mildly agitated and excited. ✓ Has sleep difficulty. ✓ Has decreased appetite. 	<ul style="list-style-type: none"> ✓ Is sad and shows agitation, restlessness and paces up and down. ✓ Is apathetic, immobile and unable to move around. ✓ Is discontented and mutilates himself herself ✓ Violent, causes harm to others. ✓ Uses alcohol or drugs excessively. ✓ Is unable to care for himself / herself, i.e. does not eat, bathe, shave, change clothes regularly, etc., ✓ Repeats ritualistic acts.

Thought

CLW can handle the situation if the person	Consider referral if the person
<ul style="list-style-type: none"> ✓ Has a feeling of sadness, despair, and worthlessness. ✓ Has a doubt on his/her ability to recover. ✓ Is overly concerned with minor things and neglects more pressing problems. ✓ Denies problems or states he/she can take care of everything himself/herself. ✓ Blames his/her problems on others, is vague in planning 	<ul style="list-style-type: none"> ✓ Is excessively preoccupied with one idea or thought. ✓ Has a false, firm unshakable belief that someone or something is after him/her and the family, someone is going to kill him, harm him. ✓ When there are suicidal ideas. .

Speech

CLW can handle the situation if the person	Consider referral if the person
<ul style="list-style-type: none"> ✓ Talks excessively about the disaster ✓ Refuses to talk much. ✓ Has rapid or halting speech. ✓ Stammers due to anxiety 	<ul style="list-style-type: none"> ✓ Has irrelevant speech. ✓ Shows extreme pressure of speech like his/her talk overflowing. ✓ Does not talk at all for days together

Perception

CLW can handle the situation if the person	Consider referral if the person
<ul style="list-style-type: none"> ✓ Has all the senses intact and there is no perceptual disturbance. 	<ul style="list-style-type: none"> ✓ Hears voices in absence of them. ✓ Sees things in absence of them. ✓ Has unverified bodily sensations.

Emotions

CLW can handle the situation if the person	Consider referral if the person
<ul style="list-style-type: none">✓ Is crying and weeping continuously reiterating about the tsunami.✓ Has blunted emotions, hardly reacts correctly to what is going on around him / her.✓ Shows high spirits, laughs excessively.✓ Is easily irritated and angered over trivial issues.✓ Is very quiet, shows no emotions.	<ul style="list-style-type: none">✓ Unable to be aroused and is completely withdrawn.✓ Is excessively emotional and shows inappropriate emotional reactions.✓ Is excessively happy, over familiar, restless, over grooming, over spending.

Remember

- ✓ There are various issues for which referral to other agencies need to be made in order to provide a holistic care to the survivors.
- ✓ For psychological support and care, at times referral to a specialist may be required and it is important to identify those needs and refer the person.

SELF CARE

It is important for the CLW to understand that he/she is involved in work that would be demanding on his/her physical as well as emotional self. The daily stress can cause internal tension within the CLW. It is important for each CLW to understand this aspect and take some preventive actions to enable him/her to cope with this stress.

An analogy of a tree is useful to understand this. Unless the tree has strong roots to support it, the tree will not be able to withstand strong winds or give shade to others. This is applicable to the CLW too. There must also be some source of sustenance and nourishment in each CLW's life to enable him/her to be strong and positive. Only then will the CLW have the energy to support others.

...ng o e one for yo r elf

Personally for yourself

- ✓ Get some physical exercise daily.
- ✓ Regularize your life leaving enough spare time for rest.
- ✓ Listen to music, read books, watch television every day.
- ✓ Try and eat frequently and get enough sleep.
- ✓ Practice meditation techniques.
- ✓ Stay in touch with your family and share your thoughts and feelings with them.
- ✓ Keep a diary of your activities and experiences.
- ✓ Identify one day in the week for your personal work and relaxation.



With other colleagues

- ✓ Listen to each other's feelings.
- ✓ Do not take anger outbursts of others too personally.
- ✓ Avoid criticism unless necessary.
- ✓ Give each other comfort and care.
- ✓ Encourage and support co-workers.
- ✓ Reach out to others when you are feeling low and look around to support others if they are down.
- ✓ Develop a buddy system with a co-worker.
- ✓ Agree to keep an eye on each other's functioning. Check for fatigue and stress reactions.
- ✓ Take a break when required.

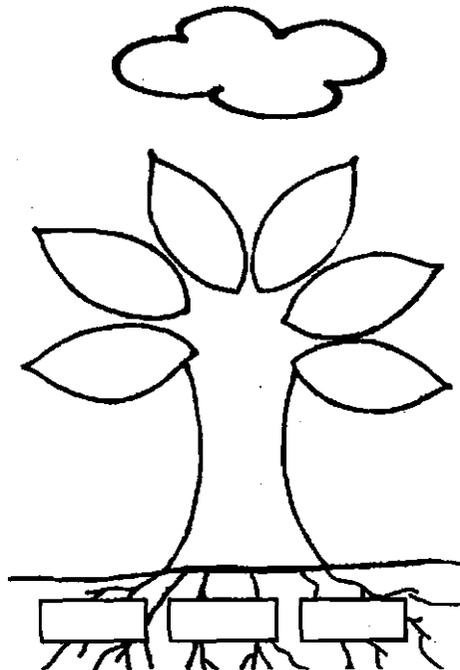
Seek help if you

- ✓ Find it difficult to leave your work even for a short period.
- ✓ Have disturbed sleep, appetite is poor.
- ✓ Are unable to enjoy things.
- ✓ Want to avoid going to work.
- ✓ Are easily irritable.
- ✓ Cry easily.

Make a 'Tree of Sustenance' for yourself

In the leaves of the tree put down three negative and three positive qualities that you have. These are the qualities with which you reach out to people. In the boxes representing the roots of the tree, put the names of people whom you can turn to for care and support when you need comfort. In the clouds above the tree list out things that give you a sense of peace and happiness.

This tree is symbolic of you. If the roots are strong and supportive and the tree has clouds for water, the tree remains healthy, happy and is able to give more shade and fruits to people for a longer time. Similarly, it is necessary to have things and people around to care and support you. Since you are working in a field that would draw on a lot of your emotional and physical strength, these people and things can be a source of nourishment and rejuvenation for you.



Remember

- ✓ There is a need to take care of self. Your work with the Tsunami victims could be taxing on the body and mind
- ✓ It is important to build up support systems to take care of one's own personal well-being

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WHAT WE KNOW...

- Intense emotional reactions in the face of these events are expected and normal.
- There is a trajectory of responses over time most often starting early and subsiding within weeks and months. But for some people, the onset of responses may be delayed. In others, the reactions may become long-term leading to considerable disability.
- Responses will be highly individual in nature, often quite intense and sometimes conflictual. The vast majority of reactions are in the normal range and the intensity will diminish for most people over time without the need for professional help. Support from family and friends is critical. For some, however, the degree of exposure may lead to more serious and prolonged reactions.
- The range of feelings experienced may be quite broad. People may describe intense feelings of sadness followed by anger. Others may experience fearfulness and hypervigilance to the environment among numerous other reactions.
- There may be temporary disruptions in normal coping mechanisms for many people and some may go on to develop problems with sleep, nightmares, concentration, intrusive thoughts and a preoccupation with reliving the events. These reactions are generally short lived but if they persist, professional consultation should be sought.

WHO, October 2001.

WHAT CAN BE DONE ?

- Create opportunities for people to talk and share experiences in supportive groups. This is often done best in familiar surroundings such as religious places, schools or community centers.
- Provide accurate and practical information especially concerning the larger recovery efforts. Special attention to the needs of relief applicants is necessary as relating to the rules and regulations of the relief organizations during the crisis can be overwhelming.
- Give particular consideration to the needs of special groups such as children, those who have been most intensely exposed or had an history of previous events (exposure to trauma), rescue workers and people with pre existing mental health conditions.
- Children and adolescents will need the support of their caregivers. This support should reflect accurate concerns, and diminish any words or actions that would increase the child or adolescent's anxiety. Caregivers should offer reassurance as to their presence and availability during this time. Exposure to television, movies or printed matter that offers too graphic depictions of the destruction or victims should be limited.
- A percentage of people, as high as 30%, who experience the most direct exposure to the events may go on to develop more serious mental health concerns and should be referred for services if they develop persistent issues.
- Overwhelming feelings are to be expected and can stress individuals, communities and nations. There are many actions that can be taken at the level of governments, international NGOs and local groups to appropriately and effectively support victims of such a catastrophe.

WHO, October 2001.

TSUNAMI DISASTER

PSYCHO SOCIAL CARE

BY

COMMUNITY LEVEL WORKERS

Disasters pose a monumental challenge to the total community. There has been a good acceptance on the need for psycho social care by the policy makers, planners, help providers and people. Experiences from Gujarat and Orissa have demonstrated the utility of Psycho social care in reduction of Psychological distress, increasing functionality and quality of life and community life through community level workers. These community level workers are individuals identified from the local community and trained through various capacity building exercises. The CLWs include personnel working in health, education, welfare and women and child development services of the governmental organizations. Further the NGO functionaries, CBOs, members of SHG groups and the Panchayati Raj members are the CLWs who were provided capacity building exercise in various centres. Tsunami like all disasters pose enormous challenge of **REBUILDING LIFE OF PEOPLE, RECONSTRUCTING NOT ONLY SHELTERS AND LIVELIHOOD BUT ALSO THE HUMAN SPIRIT.** This manual aims to address these groups of people who would be working with Tsunami survivors and helping them in the process of recovery. The information in this manual will provide a better understanding of the Tsunami situation, the reaction that the survivors experience and the principles that can be used to reduce their emotional distress.

This information manual is unique because :

1. It addresses the Psychosocial issues and mental health of survivors.
2. It is user friendly.
3. It is based on the learning from the community, the survivors and the concerned.