



MOOC 1 – Learning Unit 5

Chapter 5 – Methods

GOOD PRACTICES

Title: Early intervention with children following a catastrophic earthquake

This is a case study deriving from real events.

Disaster: The earthquake in Athens on September 7th, 1999 focused on Mount Parnitha, with a magnitude 5,9 on the Richter scale. According to official data: 143 dead, 700 injured, 40.000 homeless families, 100.000 homeless people as well as 3.340 buildings had to be demolished.

The Intervener: The Association of Greek Psychologists (AGP) from the first moment provided its scientific knowledge and staff to the Greek Ministry of Health.

The **central unit of psychological support** of the AGP operated in constant communication and cooperation with the Coordination Center of the Ministry of Health and was hosted in the area of a camp, with other non-governmental organizations. About 55 psychologists offered their services on voluntary basis for a period of 3 months. The intervention included psychological support to the

relatives and families of the victims, group activities for children, adolescents, and adults. Referral to the psychiatric services was available for cases that required special psychiatric care.

Aims of the intervention:

- Development of risk reduction strategies and facilitation of resilience in the community
- Monitoring psychological reactions to traumatic events
- Use of the basic principles of psychological first aid and psycho-social interventions in post-disaster contexts
- Identification of those with acute post-traumatic stress disorder or other co-morbid problems like depression or substance abuse, or other health problems, following trauma exposure and referral to proper health services

Case study description: Intervention by a group of psychologists to children, whose families stayed in tents in a military camp near the epicenter of the earthquake.

Setting

The structure of the intervention included first aid psychological support, on a basis of three times a week and for 9-10 hours each day. A number of children, under their parental consent, gathered in the tent where the psychologist offered group discussion, and the possibility of drawing, play, and psychodrama techniques.

The stressor event

There have been hundreds of aftershocks after the main earthquake, during the weeks followed. People who were hosted in the military camp had lost not only their homes and properties, but also family members and friends or neighbours, who were part of their social network. Also, for many days, there was little access to communication with significant others in non-affected areas.

The Intervention



Participants: the children who attended the intervention came from families, whose houses had collapsed. Attendance was not mandatory. Usually, the group counted about 8-10 children, in schooling age of 8-11 years old.

The tent of the AGP was near the tents of the hosted families, as there was consideration to keep the children close to their parents.

In the tent of the psychologists there was a big white table and chairs. Also, a space where some toys were brought by individuals from all over Athens as well as from donations of toys factories. Painting blocks, markers, and colored pencils were disposed on the table at any time. The children could use anything they liked, drawing equipment or toys, in a non structured activity.

During the first session, the psychologists invited the children to take seats around the table, get to know each other by their names and say something about where they lived in the area. Also, to paint if they want. After sharing few information about themselves, names, ages, schools, etc., a discussion started about how they spent the day in the camp, and about their families, parents, and siblings, with whom they were living. In the following sessions, the children were relatively calm, despite the many aftershocks that occurred in the following days, even during the group sessions. The discussion also included their feelings of fear during the aftershocks.

During all the next sessions, the psychologists encouraged the children to freely share whatever came to their mind, regarding the earthquake, even if they were afraid to do so.

The children expressed their concerns about their parents' emotional state: about the mothers who cried for their lost houses, about the fathers who could not go to work or have lost it, about the grandparents who stayed awake all night. The children also talked about the daily life in the camp, which includes politicians' and the mayor's visits to the camp. They also mentioned the food brought by various organisations, volunteers, and Government Agencies. Some children shared how scared they were when aftershocks occurred.

Many children drew their houses in red and black colour, painted their family, and also the debris. During playing activity, children used toys, in a symbolic way, to represent the earthquake or personal incidents in their families. In this way they started to speak about their experience during the disaster.



This early intervention lasted for three months. Even though the attendance of the children involved in the group activity was not regular, as families were moved to new homing conditions, most of them participated for at least six sessions.

QUESTIONS:

1. Why the psychologists chose non structured activities for the children, during this early intervention in the camp?
 - a. Because children could not focus
 - b. To avoid limitation of the children's expression
 - c. To enable expression in the most natural wayd
 - d. To avoid acting like at school

2. The psychologists encouraged the children to freely share whatever came to their mind in order to:
 - a. Understand and normalize their reactions
 - b. Focus on specific aspects of the disaster
 - c. Drive fear away from their minds
 - d. Spend some time with peers

3. Why discussion about how children spend the day in the camp is important?
 - a. To forget their lost home
 - b. To enable developing community cohesion
 - c. To develop awareness of their new life in the camp
 - d. Keeps the contact with normal activities in daily life

4. Do you consider that early intervention for children after mass disaster is a priority? If yes, why?



GOOD PRACTICES: Caring for children in a disaster.

A. Do recognize signs of vulnerability in children:

1. Real loss of beloved ones/pet/home
2. Threat or injury of children or significant other's life
3. Pre-existing emotional or social difficulties or traumatic experiences
4. Co-existing stressful events within their families
5. Limited or dysfunctional supportive network

B. Enhancing resilience in school settings:

1. Ensure a supportive environment at school
2. Strengthen the bonds between family, friends and school
3. Encourage students' emotional expression and acceptance
4. Organize solidarity events and community activities
5. Invigoration of self-care practices

Further suggestions:

- *Earthquake Safety | Earthquake Preparedness | Red Cross*
- *Earthquake Safety Tips | Save the Children*
- *Earthquake Resources | The National Child Traumatic Stress Network (nctsn.org)*

