On May 27th 2003 the Psychological Support Policy was adopted by the 7th Session of the Governing Board. The adopted policy highlights the mainstreaming of psychological support in all community-based programmes of National Societies and the International Federation of Red Cross and Red Crescent Societies.

Addressing the psychological as well as the physical needs of populations affected by crises has become a prominent concern in international humanitarian assistance. Recognizing the need, the International Federation of Red Cross and Red Crescent Societies developed a Psychological Support Programme (PSP) and established the Reference Centre for Psychological Support in Copenhagen. In the past decade, an increasing number of National Societies have included psychological support in their community-based programmes.

The International Federation of Red Cross and Red Crescent Societies addresses three target groups who would benefit from information on stress reactions and concrete psychological support: a) the vulnerable people affected by disaster or living under stressful conditions, b) volunteers and staff engaged in disaster response and community programmes, and c) expatriate delegates.

The Psychological Support Policy is based on the experiences and best practices gained in many different critical settings over the last decade by National Societies worldwide. Thus, psychological support is seen as a crosscutting issue relevant both in disaster preparedness, disaster response, emergency health and development programmes like community health, HIV/AIDS and social welfare projects.

The adoption of the Psychological Support Policy is a major step forward. It demonstrates the Federation’s recognition that the Psychological Support Programme has a contribution to make to the overall work programme. The crucial issue now is to develop a more specific strategy and implementation plan, committing National Societies and the Federation to measurable goals.

One of the main challenges for the Psychological Support Programme is to agree on definitions and indicators of what constitute programs that work. These indicators are crucial to provide guidance as we attempt to develop community based programs and strengthen the capacities of National Societies in providing...
psychological support, especially in low-income countries and conflict and post-conflict areas. Such a discussion will allow us to look at three specific scenarios:

1. disaster preparedness and response (both short-term and long-term),
2. complex emergencies and refugees as a result of such emergencies, and
3. long-term counselling and psychosocial care in the areas of community health, social welfare and youth.

The full text of the policy paper can be found under documents on http://www.redcross.dk/psp-referencecentre and on the website of the Federation.

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**Letter from the field**

First steps towards a Psychological Support Programme in the Iraqi Red Crescent Society

*By Rikke Gormsen, Psychosocial Delegate, Regional Delegation, Amman*

Recently, a multinational and multi-sector assessment team from IFRC visited war torn Iraq. The team managed - in spite of severe security problems - to visit 16 out of 18 branches. If one thing has become clear, it is that the volunteers from the Iraqi Red Crescent Society (IRCS) are an invaluable resource in all relief activities throughout the country.

Without exception, the volunteers are eager to carry out the work that they used to do, both before the war (at the time of economic sanctions) and during the war. In the present, so-called post-war, period they continue to assist the population and put their lives at risk. During the war, the volunteers were very active in providing first aid to the victims, rescuing people from collapsed buildings, carrying corpses from targeted areas. They have heroically protected the IRCS premises from looting, and in many cases with success. Based on these activities, the volunteers are highly esteemed in the Iraqi community. At the same time, these activities have also drained their energy, as they had to combine their Red Crescent tasks with solving the problems in their own families, including deficiencies of water, electricity and, last but not least, lack of basic security.

In some branches, the volunteers are now overwhelmed with demands from individuals searching for their missing relatives and from destitute and poor people. In other branches the volunteers are directly involved in excavating mass graves, identifying the corpses and informing the relatives.

Under the current circumstances giving psychological support is very difficult. Firstly, the security situation seriously inhibits free movement throughout the country. Secondly, it is very difficult to find qualified persons to provide psychological support, as the studies of humanities was hardly developed during the Saddam regime, where exposure of personal feelings could be a concrete threat to oneself or the family.
Given the lack of qualified psychologists and psychiatrists, the IRCS volunteers are the basic actors in attending to the mental health needs of the affected population. However, in order for the volunteers to be able to provide psychological support to others, they have to process their own feelings and experiences first. At the same time the experiences of the volunteers contain a wealth of information on the important work that is carried out by the IRCS, which needs to be disseminated.

The psychological support program for Iraq has to take all this into consideration and plan accordingly. Therefore a letter has been sent to all the IRCS branches, inviting the volunteers to write down their stories related to the war. In this way, they have the possibility to process their feelings and by sharing their stories with others, both inside and outside Iraq, get recognition of their work. This will be part of a long-term psychosocial programme, which includes workshops for the volunteers in how to cope with their own trauma and how to respond to the overwhelming number of requests from the affected population.

The narratives will be compiled in small booklets for the use of the branches and Head Quarters. The most informative and powerful stories might be selected for educational purposes and translated into English to be used in media and the RC movement.

Documenting and disseminating their stories will be a first step in the psychological support programme of the IRCS. This will hopefully encourage the volunteers to continue their important work under the ongoing stressful circumstances.

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**Flood of emotions**

 Argentine Red Cross provides psychological support following the floods in the Province of Santa Fe

*By Ms. Ma.Cristina Saenz, Mr. Pablo Bruno, Ms.Carola Jiménez, Argentine Red Cross*

An unusual amount of rain has been recorded in the province of Santa Fe, Argentina, since the beginning of 2003. The level of River Salado rose, reaching 7.88 metres in May 2003, which resulted in severe flooding.

More than 100,000 persons were evacuated or left their homes by their own means, and more than 200 evacuation centres. Approximately 24,000 houses were affected, of which 4,000 were completely destroyed.

"We lost everything ". This comment is part of everyone’s testimony. The way it is said and the tone used vary, but these words always come back in comments from the affected persons, sometimes with a degree of melancholy, others with sadness and even, at times, with anger or fear. Sad stories resound in the streets of Santa Fe, echoing, "We lost everything".

Many of the evacuation centres lacked minimum standards of hygiene and health. Steps were taken not only to prevent possible outbreaks of diseases, but also to decrease the effects of stress and psychological pain as a result of the flooding. That is why immediately following the disaster, Argentine Red Cross in Santa Fe, assisted by external mental health specialists, set up a psychosocial support operation in the field.

Beatriz, with a dazed look and almost whispering, recalls;"when they brought me here I was like crazy. I cried and cried. Two days later, a psychologist came and talked to me. Then I stopped crying, and now I am alright". Beatriz tries to gain composure. “I am very grateful to everyone here because they treat me well and give me good care. The doctor comes all the time.”

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Photo: Argentine Red Cross
From the start 150 trained professionals provided psychological support in the evacuation centres. Volunteers who had been previously trained to provide this kind of support assisted them. Moreover, a team of specialists was set up at Argentine Red Cross headquarters to provide psychological support by phone.

The team bore in mind that disaster-related traumatic stress often has more serious consequences than material losses. Distress, anguish and anxiety in the wake of the flooding were overwhelming and, initially, only those persons with strong resilience could cope, as well as those who received appropriate support and psychological assistance. By resilience we mean the capacity to grow in adverse circumstances, in the face of psychological suffering and, despite everything, to react positively. Post-traumatic stress may endure and provoke psychosomatic ailments. The aim of the psychological support was to ensure that acute stress would not develop into chronic stress. The idea was also to observe and screen persons who already suffered from psychological pathologies prior to the disaster.

The interdisciplinary team of professional staff focused on:

- Launching a psychological aid programme adapted to the Santa Fe floods, consisting of training and activities in the evacuation centres
- Psycho-social support for the staff at the Argentine Red Cross Central Warehouse
- Reception of phone calls from persons who had not found their relatives; the purpose was to decrease their anxiety and provide them support and information based on real facts
- Distribution of twenty thousand leaflets entitled “Adult and child reactions to disasters” to explain the anticipated reactions to this situation from the bio-psycho-social point of view and the anticipated effects, especially normal reactions to abnormal situations, based on the work from the Peruvian Association of Psychologists
- Training workshops for volunteers on how to handle stress.

The response to the Santa Fe floods was possible through the joint efforts of the Argentine Red Cross and all its volunteers, the community, as well as the teams from the International Federation of Red Cross and Red Crescent Societies.

In light of the growing complexity of disasters affecting an increasing number of people, psychological support is crucial to the management of health, stress and development.

In all the teams of the Argentine Red Cross we aim to increase awareness of the psychological impact of stressful events on persons and communities. In community training activities for hospital volunteers, rescue workers, as well as for our own volunteers we have noted that relevant training and information can avoid or reduce the impact of emotionally overwhelming situations, decrease vulnerability, develop resilience, prevent staff burn-out and other dangers, promote recovery from the consequences and improve the ability to react to damage and loss.

For Red Crossers, each disaster is a challenge to our organization’s leadership capacity and to the capacity to respond to the unforeseen, to overcome the events creatively in a group and to build a response that overcomes the chaos. Activities are typically designed for the victims and their families, teachers, volunteer communicators and emergency workers.

For more information, please contact Ms Cristina Saenz, psychologist adviser in disasters and emergencies for the Argentine Red Cross mcri-saenz@hotmail.com or Mr. Pablo Bruno, Disaster and Emergency Response, Preparedness and Prevention at Argentine Red Cross.
A breakthrough in Psychological Support Programme for Japanese Red Cross Society

By Toshiharu Makishima, Japanese Red Cross Society

It took the Japanese Red Cross Society (JRCS) nine years to adopt psychological support as one of the main projects in its disaster relief programme after the Kobe earthquake killed more than 6000 people. Being a country prone to earthquakes and volcanic eruptions, the JRCS has a well-organised disaster response programme with 471 response teams throughout the country. So far, however, most focus has been on the medical care of the victims, while psychological support was lacking.

In April 2003, JRCS published a handbook for Red Cross relief workers and volunteers, named “Psychological Support in Disaster”. This was followed by an international symposium and a training of trainers’ workshop in June.

The symposium, coordinated by Dr. Makishima, was held in 21 June 2003 in Tokyo, aimed to declare the new stage for psychological support programme in JRCS and disseminate the general idea about PSP mainly to the members of JRCS. At the request of the JRCS, the Reference Centre sent Dr. Rodenburg and other roster members from USA, England and Philippine as the facilitators for the symposium and the workshop.

In the first session of the symposium Dr. Janet Rodenburg, head of the Reference Centre, informed the public about the Federation’s Psychological Support Programme, explaining the scope of the programme and indicating some future challenges. This was followed by a lecture by Dr. Gerald Jacobs, Professor and Director of Disaster Mental Health Institute, University of South Dakota, focusing on the “Organization of the American Red Cross Disaster Mental Health Response to the September 11, 2001 Terrorist Attack on the WTC”. Mr. Jun Maeda, Assistant Professor of Muroran Technical University, Japan, concluded the session with a lecture on “Psychological Support of Japanese Red Cross Society in the eruption of the Mt. Usu volcano”.

The second session was to compare psychological support programmes in different countries. In addition to the above-mentioned resource persons, Mr. Stephen Regel, Director of the Centre for Trauma Studies & Traumatic Stress Service within Nottinghamshire Healthcare NHS Trust, UK, and Ms. Zenaida Paez-Beltejar, Director of Welfare Department of Philippine Red Cross, gave speeches on the subject and joined the panel discussion.

The latter two had also been allocated by the Reference Centre for Psychological Support to facilitate the subsequent five-day workshop to train the trainers within the JRCS. 32 participants from all over the country gathered in the JRCS seminar house in Kawaguchiko Lake near Mt. Fuji: 23 nurses, 5 psychologists, 2 doctors from JRCS hospitals and 2 professors of JRCS nursing universities. The programme followed the Federation’s “Community-based Psychological Support Training Manual” (for a description of the contents of the manual, please see Coping with Crisis No.1/2003). As the manual is a generic tool utilized across different societies and cultures, we had elaborate discussions on how to apply the modules in the specific Japanese context.

This training kick started a new programme in the JRCS to integrate psychological support in various kinds of relief operations. It is planned to train a total of 120 trainers during the coming 2 years in order to cover 47 branches and 91 Red Cross hospitals in the country. These trainers are expected to train the members of the JRCS medical relief teams and JRCS volunteers in their own facilities, while some of them will join international relief operations. Moreover, a task force will be created to give further guidance to the integration of psychological support in disaster relief, both national and international, and to adapt the training manual to the Japanese context and culture.
Inspiration from the VIII European Conference on Traumatic Stress, May 2003, Berlin, Germany

By Wiebke Hendriksen, Senior Officer Psycho-Social Support, Health and Care Department, IFRC Secretariat

The International Federation of Red Cross and Red Crescent Societies (hereafter the Federation) participated in May in the VIII European Conference on Traumatic Stress arranged by the European Society for Traumatic Stress Studies (ESTSS) and the International Society for Traumatic Stress Studies (ISTSS).

The conference reflected clearly that not only mental health professionals are concerned about the consequences of psycho-trauma, but also NGO officers, service personnel, voluntary agencies, lawyers and journalists are increasingly involved in this work. The conference also showed the broadening of the concept of trauma, especially when it comes to entire communities affected by natural disasters and war.

The Federation’s Psychological Support Programme (PSP) focuses on integrating psychological support in its core programmes, such as disaster preparedness and disaster response, first aid, emergency health, and in long-term development programmes such as HIV/AIDS and social welfare. The Federation further recognizes the need to provide psychological care to its staff and volunteers through stress management, security measures and skill development to promote a safe and supportive work environment. Thus, the Federation’s psychological support programme addresses three target groups: vulnerable people affected by disaster or living under stressful conditions; volunteers and staff engaged in disaster response and community programmes; and expatriate delegates.

With this institutional luggage the two PSP/Federation representatives attended sessions on the following topics: a) Natural and technological disasters; b) Lessons learnt from peace keeping forces; and c) Refugees, political persecution, torture, wars, and holocaust/genocide, in order to get inspiration and to see if the Federation’s psychological support programmes are still in line with major research findings.

Early intervention and disaster response

The different case studies presented at the conference clearly showed the importance of early intervention and the strength of a multi-sector response. Several models for early intervention were presented, such as disaster mental health, provision of safety and protection, education about stress reactions, social support, and evidence based practices of PTSD.

The Federation is currently developing a framework for programming psychosocial interventions in emergencies by integrating psychological support know-how in disaster management and disaster response. The basic principle is to use a community-based approach with the assistance of trained volunteers. Therefore, the most appropriate early intervention methods for the Federation still seem to be a combination of the following models: education about stress reactions, provision of safety and protection, social support and, to a certain extent, disaster mental health.

In line with the research findings and the lessons learnt presented during the conference, Federation interventions take into account the context of the disaster, the goals of the intervention, the coping mechanisms of the affected population, the changing needs over time and the capacity of the local service delivery. The Federation further shares many experiences that were presented in the case studies. Thus it seems appropriate to continue to base our interventions on local resources, coordination with other actors, identification of target groups and social support groups, psychological first aid, proactive outreach services, and care for the workers (staff and volunteers).

Worker support

Volunteer and staff support is becoming a major concern for the Federation. In line with other organizations we have experienced an increase in stress reactions and burnout especially related to complex emergencies and HIV/AIDS programmes. The Federation provides stress counselling, stress briefing and debriefing for our delegates and can, in case of a critical incident, support the delegates on location. The preoccupation with delegates is mainly due to their status as expatriates and their lack of a local network. However, in recent years our local workers have expressed their need for this kind of support as well. Whether employed in one’s own country or abroad, worker support, inclu-
Concluding remarks

The conference inspired us in several fields. For example:

- Identification of the different early intervention models’ strengths and weaknesses.
- How to incorporate the social context in the healing of mass traumatization caused by instrumental collective violence (e.g. armed conflict; displacement; rape; asymmetric warfare/modern terrorism; state violence; complex emergencies).
- The importance of organizational support structures (recruitment procedures; safety and security measures; stress management; training and supervision; deployment procedures) to personnel and volunteers working under stressful conditions.

The full conference programme can be found on: www.trauma-conference-berlin.de

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**Trauma, War, and Violence: Public Mental Health in Socio-Cultural Context**

**By Janet Rodenburg, Head, the Federation Reference Centre for Psychological Support**

About 40 violent conflicts are currently active and nearly 1% of the people in the world are refugees or displaced persons. Many of these people have suffered, and continue to suffer, the effects of trauma. Many have witnessed killings and many have personally experienced horrors such as rape, torture and hunger.

*Trauma, War, and Violence: Public Mental Health in Socio-Cultural Context* is an important milestone on a path that is increasingly considered important within the International Federation of Red Cross and Red Crescent Societies. The book outlines a range of options for coping with intolerable stress in conflict and post-conflict situations, both in terms of good practice and prevention. It examines the psychosocial and mental health aspects of conflict, while at the same time considering the historical, political and socio-cultural context. It also describes a series of culturally sensitive intervention models in Africa and Asia, as developed or supported by the Transcultural Psychosocial Organization.

The book describes a variety of innovative programmes to address mental health and psychosocial problems in low-income countries and conflict and post-conflict areas. Governments, humanitarian organisations, United Nations agencies will find this book useful when setting up community psychosocial services.
This is an important book. It not only helps to improve our understanding of the psychosocial and mental health aspects of war and violence, but also provides valuable insight into ways of addressing the needs of victims of trauma. It is a valuable resource for health workers, social workers, community health workers and relief workers within humanitarian organisations. RC/RC National Societies, supported by the International Federation, are at the centre of social mobilisation initiatives to mitigate the effects of conflict on the civilian population, distribute emergency relief and provide essential services during the transition phase, such as psychosocial support to the affected population. The contributions in this book make it clear that this support should build on local traditions, meaning systems and priorities.

Product details:

Trauma, War, and Violence: Public Mental Health in Socio-Cultural Context
Ed. Joop de Jong
Hardcover: 454 pages ; Dimensions (in inches): 1.34 x 9.40 x 5.98
Publisher: Plenum Pub Corp; 1st edition (January 15, 2002)
ISBN: 0306467097
Price: EUR 86

Upcoming events:

- Steering Committee meeting of the European Network for Psychological Support (ENPS) on 5 September, Paris, France.


- Psychological Consequences of Organized Violence and Terror: Psychotrauma—from latest scientific knowledge to practical field work. Cupramontana, Marche Region, Italy, 28 September—4 October 2003. Online registration: http://www.vivo.org or send a mail to: training@vivo.org

- Critical Incident Stress Management: Group and Individual Crisis Intervention in the Emergency Services and other Contexts, the Centre for Trauma Studies & Traumatic Stress Services, UK, 28-30 October 2003. For further information: liz.jeffrey@nottshc.nhs.uk

- “Adding Colour to Peace” International Conference on Children Affected by Armed Conflict. Valencia, Spain, 5-7 November 2003. For more information: Spanish Red Cross: http://www.cruzroja.es or send a mail to: mruiz@cruzroja.es

- 2nd Regional Conference on Psychological Support for the Caribbean and North American Region, 25-28 November 2003, Havana, Cuba. For further information: Cuban Red Cross: crsn@infomed.sld.cu

To subscribe or for more information please send an e-mail to: psp-referencecentre@redcross.dk