The news about the devastating earthquake in the Iranian town of Bam on 26 December 2003 sent a shockwave through the entire world. The world’s worst earthquake in a decade claimed more than 41,000 lives, 30,000 got injured and around 80,000 were made homeless.

In the pictures that were sent out the following days the survivors were seen grieving over their loved ones, desperately digging for their property in the ruins, or just going around in a state of shock. By now, all the survivors have received tents, food and blankets, and the dead are buried. But while the media are packing away their cameras and satellite dishes, the survivors are left with the distress. Both the survivors and the rescue workers, who have been working around the clock, are exhausted and it is first now that the emotional aftershocks are really felt. The population of Bam has still a very long way to go.

From 14-16 December 2003 the 3rd Regional Network meeting on Psychological Support was held in Teheran*. At the time of the meeting no one could have suspected one of the worst scenarios taking place only ten days later. Fortunately, as also became apparent at the meeting, the Iranian Red Cross Society (IRCS) is a front-runner in the Middle East when it comes to psychosocial expertise. It has a psychological support unit integrated in the Rescue and Relief Organisation, which was mobilised immediately after the earthquake. At present IRCS psychosocial teams pay tent-to-tent visits in order to have a chat with the adults and entertain the children, thereby providing hope and compassion. Cartoons are being shown to help families recognise and understand children’s reactions now and in the future. At the same time, local religious leaders and school-teachers are being identified in order to involve them in the programme. This was already

The emotional aftershocks of the earthquake in Bam

By Janet Rodenburg, head of the Federation Reference Centre for Psychological Support
Anticipated by the president of the IRCS in his speech at the opening of the network meeting on 14 December:

Another important point to be specially observed in provision of psychological support is compliance with the indigenous, tribal, cultural and religious values pertaining to the burial of corpses, mourning rites as well as nutrition and temporary settlement of survivors. Therefore, it is necessary for psychological support teams to brief the local tribal and religious leaders and elders ..., and make maximum use of their popular base for counselling and the next steps to be taken.

An IFRC assessment team is presently in Bam to identify the needs for psychological and psychosocial support to the survivors and the relief workers and to assist the Iranian Red Crescent Society (IRCS) with setting up a plan on how to respond to these needs in a timely and efficient way. Such a plan should build on the available local resources and expertise. Psychosocial support is not so much about treatment but about helping people to find their own strengths. ■

* The National Societies participating in this meeting were Egypt, Iran, Iraq, Jordan, Lebanon, Palestine and Syria.

Zimbabwe Red Cross
Memory Book Project

Children in AIDS affected households become vulnerable in many ways, long before their parents die. Recognising the vulnerability of children in households affected by HIV/AIDS, the Zimbabwe Red Cross Society decided to launch a memory project. The concept is simple – by means of the creation of a memory book or memory box, parents who are living with HIV/AIDS are empowered to communicate with their children, who in turn are helped to learn more about their family heritage and feel more hopeful and secure about their future, so that if the parents do die, they have a sense of identity and belonging.

The memory books and boxes provide information about the parents, the family history, stories about the parents and the child, a family tree, photographs, drawings, special family memories and so on – they are a “treasure chest” of family information. The parent works with the children in putting together the memory book and box, using local materials.

The children can also participate in discussions about who will care for them when their parents die. At the same time this provides a practical way of promoting prevention awareness and fighting stigma and discrimination.

There are already more than 13 million children who have lost their parents to HIV/AIDS and millions more who have been made vulnerable. But we must not allow ourselves to be overwhelmed by the staggering statistics. The children need help now. The Zimbabwe Red Cross is helping to provide some of these vulnerable children with that vital ingredient - hope for the future.

The following article has been taken, with permission, from The Federation of African Media Women Zimbabwe's newsletter.

Single mother Lexa Samugadza is concerned about her three daughters' future. The Memory Book allows her to pass on sound advice: “keep away from men and concentrate on school.” Photo: IFRC
As the country enters the 18th year since the first case of HIV and AIDS was discovered, its pangs continue to be felt by many families. One area where families continue to face difficulties is in communicating on HIV and AIDS issues to family members, particularly in disclosing an HIV positive status. “HIV and AIDS affect both parents and children. It does not only affect the person living with it”, says Patricia Tavenga* (41), a widow and a mother of 3.

This, according to Patricia, is because HIV/AIDS deals with life’s fundamental issues.

“When you discover that you are HIV positive, it means that as a parent you have to be prepared to discuss the issue of death with your children because although you will be looking forward to a positive life, the reality of death is something that cannot be ignored and this is not an easy thing to do”, she says.

In response to the growing need for psychosocial support for families affected by HIV and AIDS, the Zimbabwe Red Cross Society has embarked on a memory box project. The memory box project has so far been established at two of the organization’s 23 HIV and AIDS home based care projects, with support from the International Federation of Red Cross and Red Crescent Societies (the Federation). A total of 80 people living with HIV and AIDS have been trained so far. The project encourages family members to produce boxes or books to record their memories. The boxes can be made out of any available material such as paper, wood, tin or grass.

A mother’s memory book helps her to discuss her status with her children and gives them a sense of identity. Photo: IFRC

Through the use of brightly coloured paper and markers each of the project members traces the past, present and future, while vividly describing each detail. Jennifer explains that the bright colours are used deliberately because most people like bright colours, thereby making the memory box writing enjoyable.

For Patricia, the project has enabled her children to understand more about HIV and AIDS and to accept her status. “When I was diagnosed with HIV in 2000, I tried to tell my children, but all of them, particularly my younger daughter got angry each time I brought the subject up. But now through the memory box project, we enjoy writing together as a family all the memorable experiences we have shared together, and this has made it easier for them to accept my status”, she says.

She also adds that because she has managed to express her fears through writing them down, she is now better prepared to plan for her future and that of her children. “Wondering what would happen to my children when I die is something that always tormented me, but I realized that I needed to write a will, stating who would look after my children, and how I wanted all my belongings to go to my children” she says.

The Federation’s Regional HIV and AIDS Delegate responsible for Orphans and Vulnerable Children, Ms. Jennifer Inger, explains that the memory box project was initiated to promote communication within families affected by HIV/AIDS, as a way of fighting stigma. “The memory box project is a powerful tool to break down self stigma by people living with HIV and AIDS and to encourage them to discuss their status with family members, particularly children”, she says.

“Children often can tell when something is wrong and when no one talks to them, they keep this fear inside. The project enables the family to discuss this with their children, in a safe space”, she adds.

The Zimbabwe Red Cross adopted the memory box project idea from Uganda Red Cross, where HIV positive mothers used boxes and books to disclose their status to their children and make plans for the future together. The memory box project becomes an addition to the counseling and material support that members of the home based care project already receive from the Zimbabwe Red Cross Society’s home based care project. To date the organization supports over 100,000 people affected by HIV and AIDS through the home-based care project.
The National Program Coordinator of the Zimbabwe Red Cross Society, Mr. Karikoga Kutadzaushe, explains that although material support has been an important part of the home based care project, increased psycho-social support will mean that families continually empower themselves with ways of coping with HIV and AIDS. The Zimbabwe Red Cross Society plans to expand the memory box project to other parts of the home based care project, which have been established over the years since 1992, with support from the Danish Red Cross, and currently with the Japanese Red Cross as well.

*A pseudonym was used as Patricia is still hiding her status from her relatives.

“Children need to eat, sleep and laugh again”

International Conference on Children Affected by Armed Conflict, Valencia, 5-7 November 2003

By Janet Rodenburg

In spite of all the progress made in establishing norms and standards to protect children affected by armed conflict, the situation in war zones remains grim and precarious for millions of children who are the victims of today’s warfare. The impact of war on children has many faces, both physical and mental. Children in conflict areas are at risk of being killed, maimed, orphaned, uprooted from home and country, deprived of primary protection, education and health care, subjected to sexual violence and abuse and exploited as combatants or service providers to armed forces.

The conference in Valencia was part of the 2003 campaign “Adding Colour to Peace”, organised by the Spanish Red Cross, with support from the Humanitarian Aid Office (ECHO). The objectives of the conference were to provide a space for wide exchange of experience and for international dialogue, and to provide opportunities for stakeholders (NGOs, institutions, organisations etc) for networking and developing future collaboration.

Around 200 people attended the conference from different sectors (UN, international organisations, governments, research institutions, Red Cross/Red Crescent (RC/RC) Movement, media, etc.). Moreover, a range of National RC/RC Societies in war-torn countries were represented, like Colombia, Ivory Coast, Sierra Leone, and Sri Lanka.

Although the main focus tended to be on child soldiers, it was agreed that each category of war-affected children needs a different approach for their rehabilitation – child soldiers, service providers, children living under constant armed forces threat, refugee and IDP children, maimed children, abducted children, child-headed households, etc. In other words, all those growing up in a culture of fear.

The RC/RC Movement - with the International Committee of the Red Cross’ role in providing protection in conflict zones, with the National RC/RC Society’s role in promoting the welfare of the most vulnerable, and with the International Federation of Red Cross and Red Crescent Societies (IFRC) supporting the latter – can contribute significantly to the well being of children affected by armed conflict. In particular in post-conflict situations, the IFRC, by working together with its reference centres hosted by National RC/RC Societies providing different expertise, can support activities for rehabilitation and reconstruction programmes. These programmes can be developed with emphasis on the key issues of basic health care, including HIV/AIDS treatment, psychological support, non-formal and vocational training, reintegration in the community, etc.

It appeared that in many of the programmes implemented by National RC/RC Societies in war-torn countries psychosocial support is a central component. The Sierra Leone RC runs a programme on psychosocial counselling with children in reception centres and with the families in the communities. The challenge of reintegrating these children into their communities is enormous (see Coping with Crisis no. 4/2003).
One of the working groups, "Rehabilitation and social reintegration of children affected by armed conflict", focused on the psychosocial aspects of war-affected children. Rehabilitation and reintegration are twin and inseparable concepts dealing with the normalization of the status of children affected by armed conflicts, which imply helping them make the transition into a society in which their rights are respected and promoted. All agreed that sustainable rehabilitation and reintegration call for a community development approach with emphasis on family and community empowerment. Psychosocial support should be built into the community, which means linking the mental aspect to the social aspect. This approach recognizes the strength and skills of the children acquired during the conflict that could be built upon. As Nicole Daguino from Enfants Réfugiés du Monde put it, after reading testimonies from children: “A child has the right to own his memory again”. One of the universal healing principles, therefore, is to see the child as the agent of change, taking charge of his/her own future. Rebuilding social relationships, based on trust, is a key issue.

During the conference, we experienced the fragility of the peace agreement with the declaration of “state of emergency” from the government of Sri Lanka. The governments in war-torn countries must and should take measures to build peace, prevent conflicts and commit to the reconstruction of the country. The National Societies, whose functions are clearly independent of government, must provide psychological and social assistance to ease the individual’s reintegration into normal society, in particular children as they are the generation carrying out their vision for their own destiny, and most importantly the future and the development of their country.

More background information on Children Affected By Armed Conflict can be found under:

1. Conference’s official Web page, through the Web site of the Spanish Red Cross: http://www.cruzroja.es
First Aid and Psychological Support : ”Treating wounds as well as the wounded”

By Maureen Mooney-Lasalle, secretary of the European Network for Psychological Support, and Nana Wiedemann, consultant to the Psychological Support Reference Centre

The annual meeting of the European Working Group on First Aid Education, held from 24 to 26 October 2003, provided an excellent opportunity to promote and discuss the issue of psychological support. To this end, we travelled to Madrid in order to meet our First Aid colleagues and exchange information. This initiative should be seen as a follow-up of the Red Cross/Red Crescent European Regional Conference, held in 2002, in which one of the recommendations was to further strengthen and co-ordinate Psychological Support and First Aid activities and training for volunteers.

Follow-up of the Berlin Conference
A plan of action and recommendations for this theme were adopted and validated in the Berlin Charter, which gives general direction to National Societies on how to tackle humanitarian crises in Europe. All European National Societies have committed themselves to the recommendations, which can be found on the IFRC web site: www.ifrc.org/news/events/berlin02

The Conference Support Group (CSG) promotes and supports the Berlin Charter until the next European Conference, planned in Russia 2006. The CSG asked the Secretariat of the European Network for Psychological Support (ENPS) to help in the furthering of the commitments made at the Berlin Conference by facilitating and mobilising resources *. A further step was made at the annual meeting of the European Working Group on First Aid Education last October.

The First Aid meeting in Madrid
During the meeting Maureen Mooney-Lassalle and Nana Wiedemann introduced the European Network for Psychological Support and the Federation Reference Centre for Psychological Support, respectively, focusing on the integration of Psychological Support and First Aid. Carlos Urkia of the Spanish Red Cross and Nana were then able to illustrate this integration in two recent operations. Carlos Urkia dwelled upon the Spanish Red Cross intervention in Algeria after the earthquake last year, claiming the lives of more than 2,000 people. He underlined the demand from the survivors for both first aid and psychological support. He noted too that also the helpers need support during and after an intensive and prolonged mission. Subsequently, Nana described a music festival in Denmark in 2000, in which 9 people were killed and numerous wounded as a result of sudden chaos during the concert. She clearly demonstrated the volunteers’ need for psychological support, as well as the necessity to have a good co-operation between professionals and volunteers.

These presentations and the following debate allowed a rich exchange between all participants and resulted in psychological support being included in the final recommendations of the First Aid Network:

“….. that First Aid Education and interventions in their holistic dimension have a psychological support component in their programmes and implementation. National Societies should further enhance in their First Aid education programmes a psychological support dimension. They can find inspiration from the Psychological Support Training manual and assistance from the Federation Reference Centre and its related European Network.”

The Red Cross/Red Crescent has a unique opportunity to offer First Aid and Psychological Support to vulnerable people both in large-scale emergencies and conflicts, and in day-to-day crises. First Aid combined with Psychological Support strengthens the quality of assistance for people in need, making best use of our network of volunteers.

Whether it is within the European region or within each National Society, our activities can only be enhanced if the co-operation and exchange of the Psychological Support and First Aid networks increases. As initially discussed in the last ENPS steering committee meeting and followed up in the Madrid meet-
Upcoming events:

- Working Together to Support Individuals in an Emergency or Disaster, York, United Kingdom, 30 January - 1 February 2004. For further information, please contact British Red Cross: lkerr@redcross.org.uk

- Psycho-social support in complex emergencies, Nottinghamshire, United Kingdom, 31 March 2004. For further information, please contact the Federation Reference Centre for Psychological Support: psp-referencecentre@drk.dk

- Meeting for members of the Federation Reference Centre for Psychological Support’s roster group, Nottinghamshire, United Kingdom, 1-3 April 2004.

* The integration of Psychological Support in First Aid activities and the promotion and development of specific activities has been further endorsed in the Psychological Support Policy paper adopted by the Governing Board of the Federation in June 2003.

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