



# **Psychosocial support for Tsunami affected population**

*Service delivery and referral mechanisms*

**WHO India country office as part of the UN team**



# Psychosocial support

- Intensely traumatic events can lead to acute and long term mental health and psychosocial consequences.
  - Phase I (during and upto 4 weeks)
    - Acute stress reaction/ Disaster syndrome
  - Phase II (2-6 months)
  - Phase III (>6 months)
    - Delayed manifestations
  - PTSD (symptoms of acute stress reaction lasting for more than one month)



# Principles of psychosocial interventions in disaster affected populations

- No one who sees a disaster is untouched by it.
- There are two types of disaster trauma – individual and community.
- Most people pull together and function during and after a disaster, but their effectiveness is diminished.
- Disaster stress and grief reactions are normal responses to an abnormal situation.
- Many emotional reactions of disaster survivors stem from problems of living brought about by the disaster.
- Disaster relief assistance may be confusing to disaster survivors. They may experience frustration, anger, and feelings of helplessness related to Federal, State, and non-profit agencies' disaster assistance programmes.

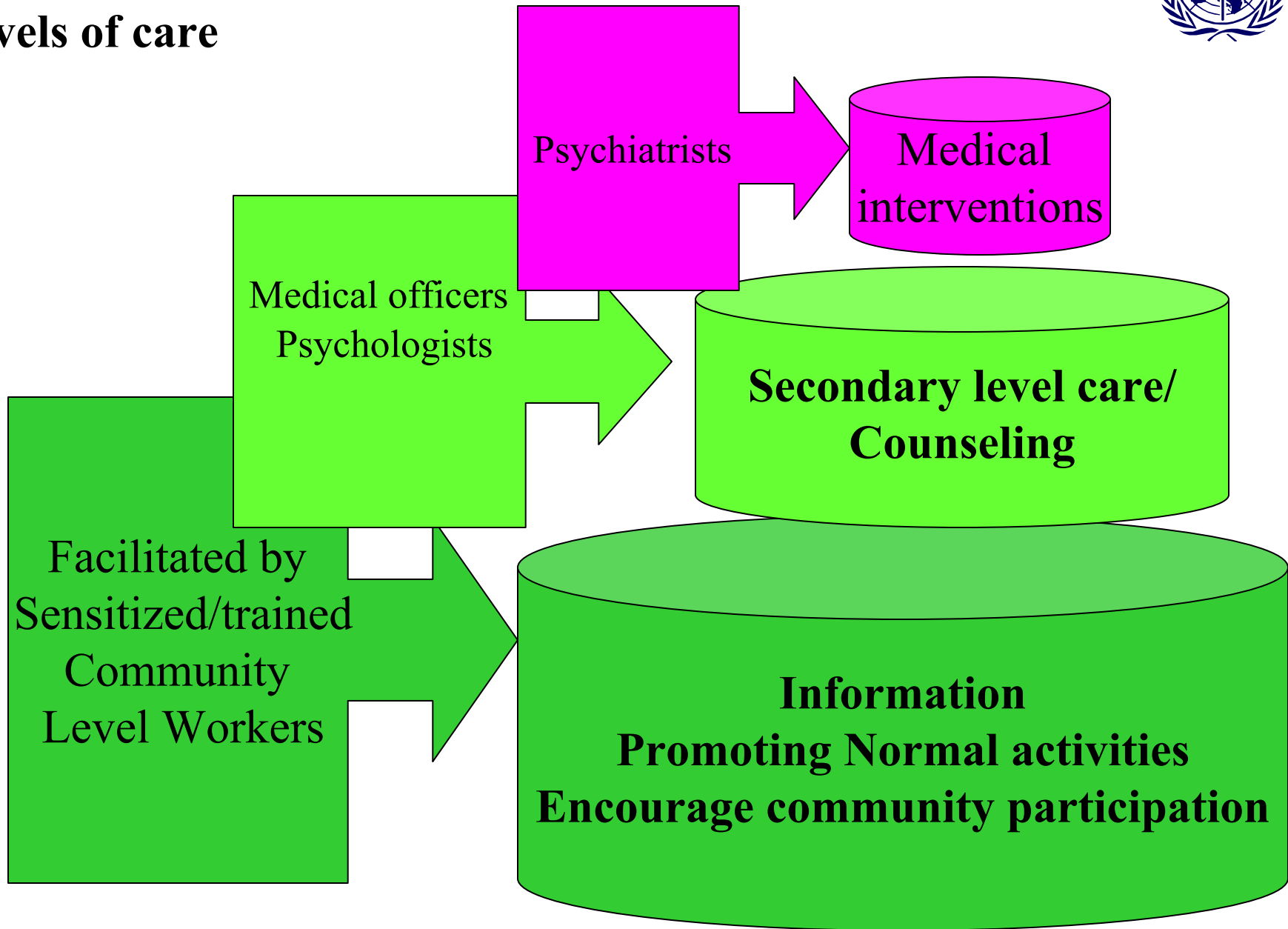


# Principles of psychosocial interventions in disaster affected populations (contd..)

- Most people do not see themselves as needing mental health services following a disaster and will not seek such services.
- Survivors may reject disaster assistance of all types.
- Disaster mental health assistance is often more practical than psychological in nature.
- Disaster mental health services must be uniquely tailored to the communities they serve.
- Mental Health workers need to set aside traditional methods, avoid the use of mental health labels, and use an active outreach approach to intervene successfully in disaster.
- Survivors respond to active, genuine interest, and concern
- Interventions must be appropriate to the phase of disaster.
- Social support systems are crucial to recovery.



# Levels of care





# **Community Level Workers- resources needed**

- **CLWs trained by District level trainers will provide psychosocial care and support along with general relief work.**
- **The CLWs can have a handbook in the local language as a ready reckoner**
- **The handbook will also have all details of Government schemes and names and contact details of relevant agencies in the District.**
- **All the medical resources available in the District also has to be included in the handbook.**

# Capacity building-planning



- **List all agencies- Govt and NGO**
- **Identify modules for training-**
- **Identify the type of training and standardize it based on the duration and capacity of the agency in the field**
  - **Sessions**
  - **Time requirement**
  - **Training intent**
  - **Limitation**
- **Trainers will be SMHA, Psychology Departments and Medical Colleges.**



# Resource mapping

- **Hospitals (PHCs and others)**
- **Psychiatrists**
  - Government sector-hospital available
  - Private sector-place available
- **Clinical Psychologists**
  - Government sector
  - Private sector
- **Psychiatric Social Workers**
  - Government sector
  - Private sector
- **Nearby School of Social Work**
- **Nearby School of Nursing**

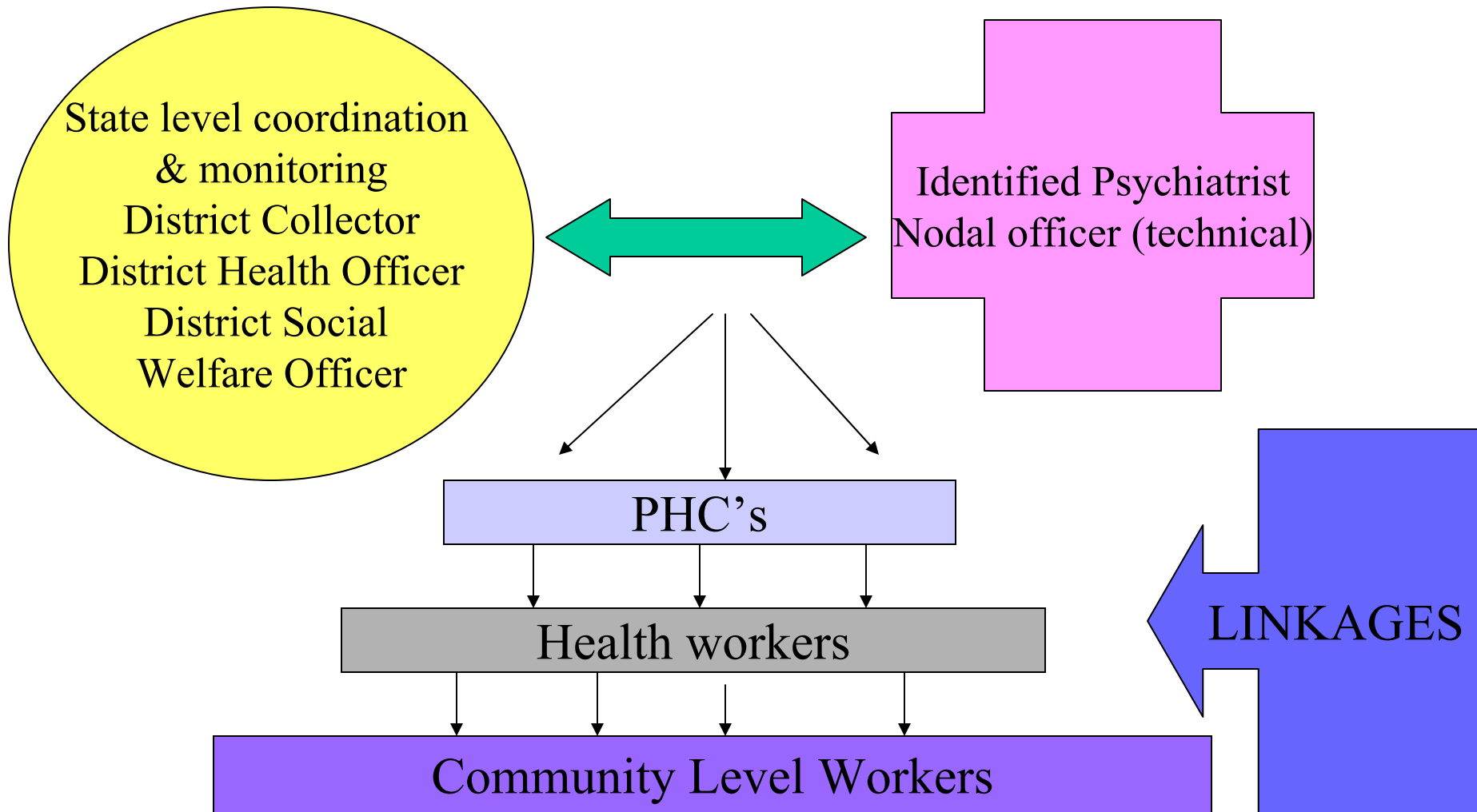


# **Community Level Workers- placement and linkage**

- **Each community level worker or a group of CLW's will be responsible for a geographically defined area**
- **The geographic areas can be the catchment area of the Primary Health Centre (PHC) which are covered by health workers**
- **The PHC has medical officers and health workers like JPHNs etc.**
- **The CLWs can be linked to the health workers as health workers have defined population which they are covering.**



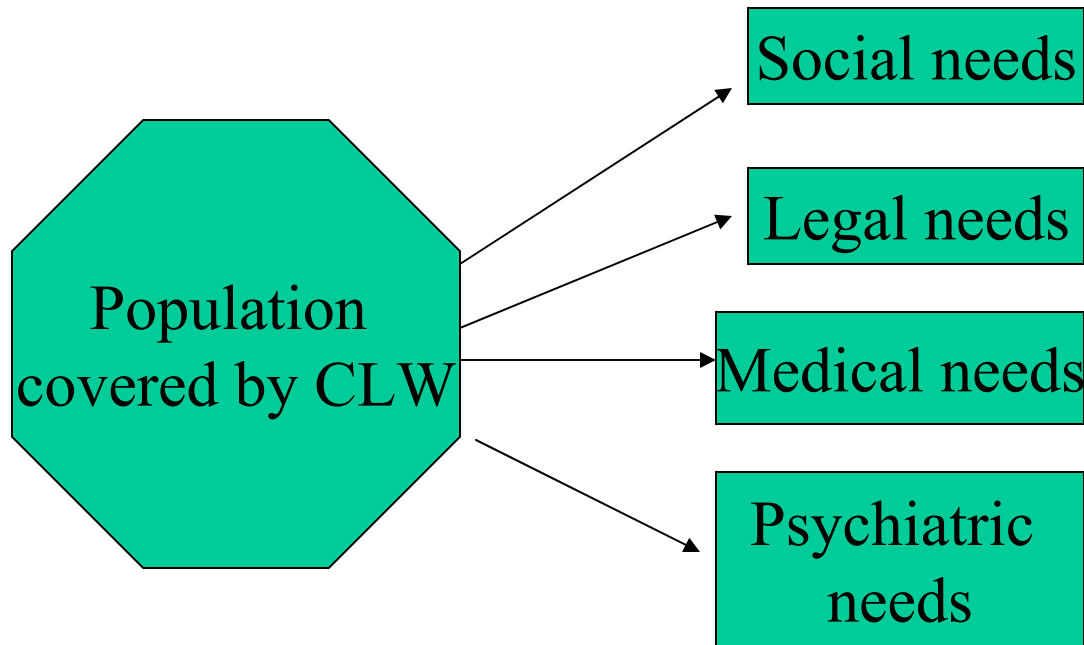
# Organization in the District





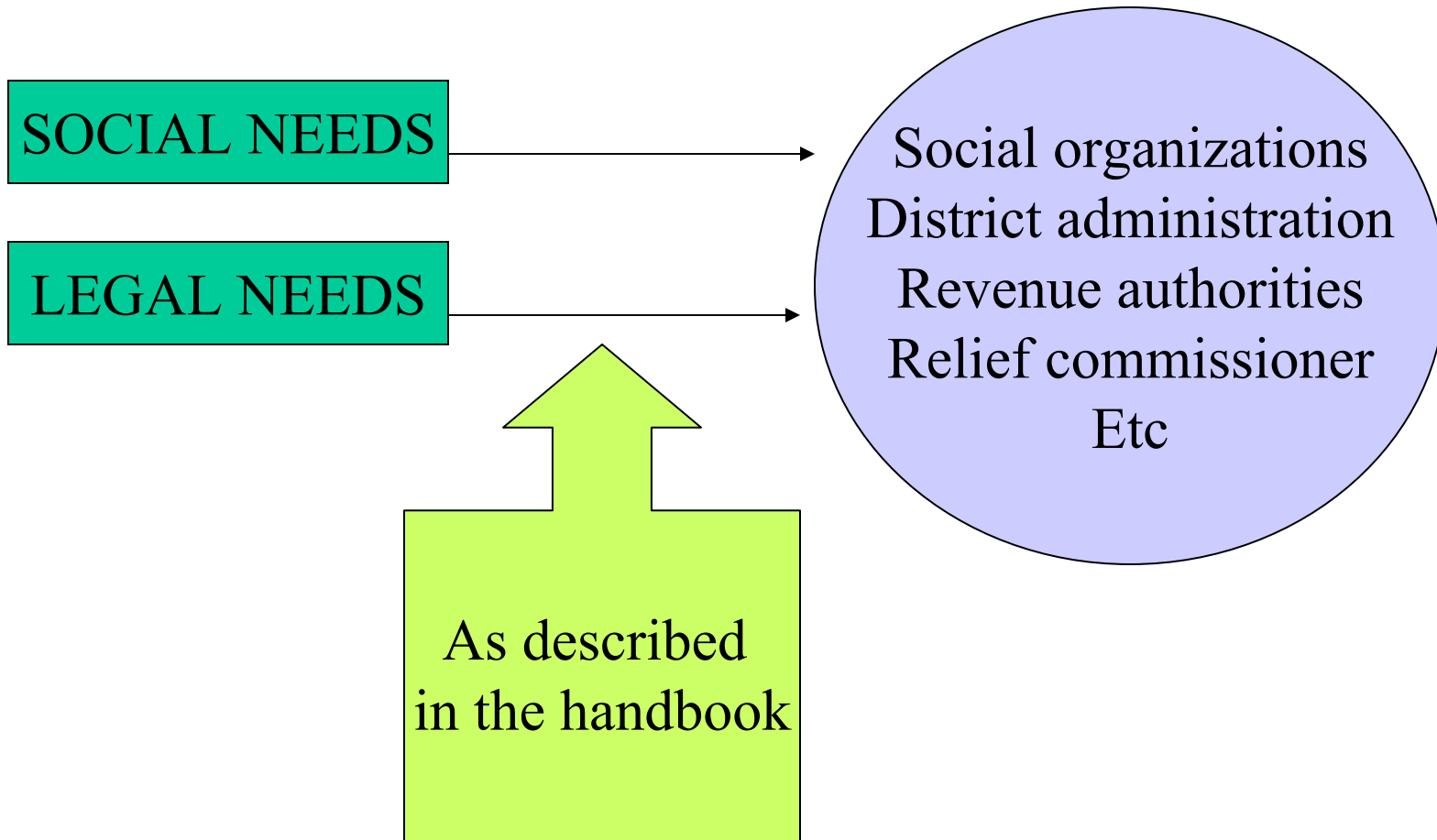
# Community Level Workers- identification of needs in the population

- CLW's will identify those people in the community who need further support.
- Further support may be in various areas



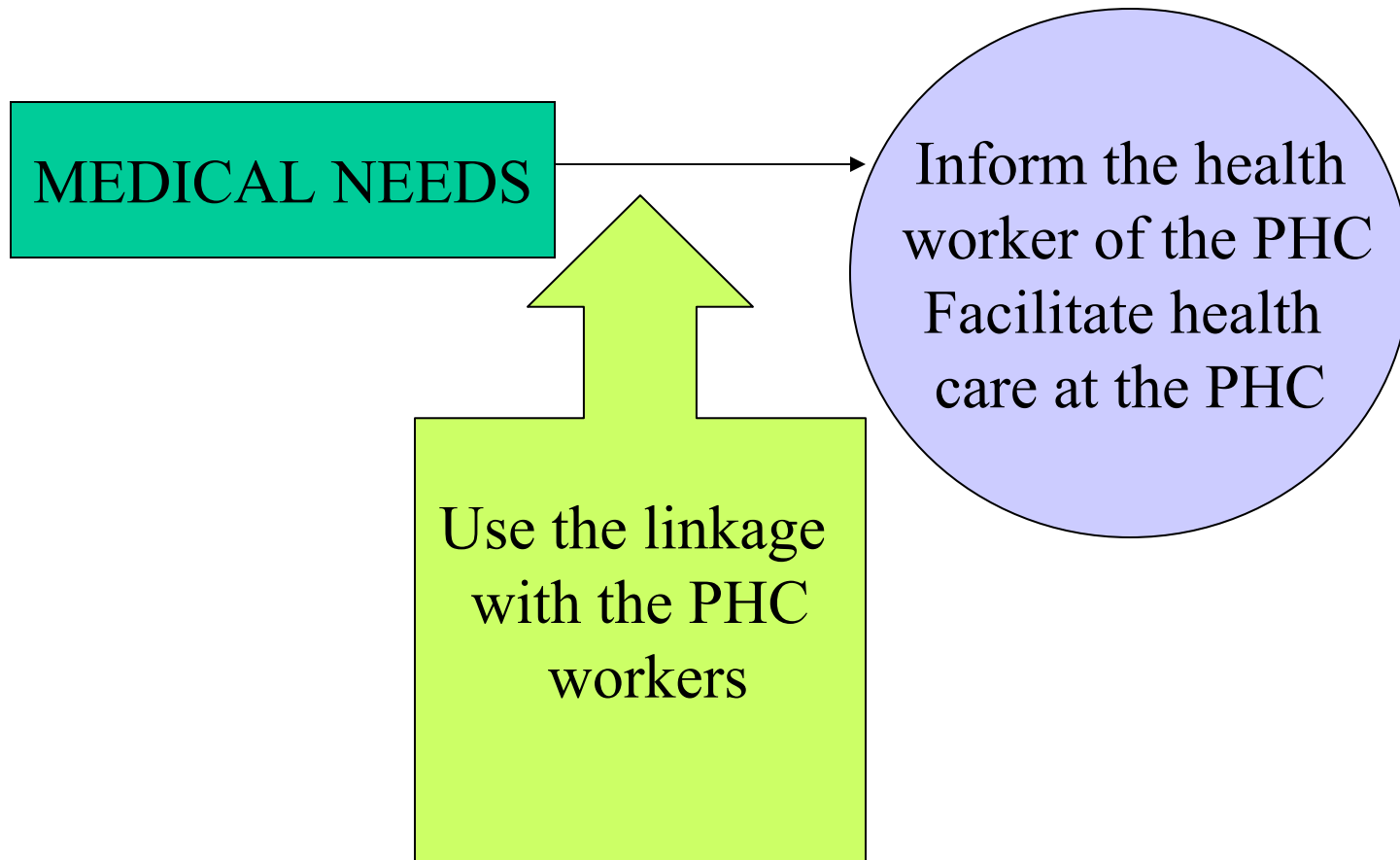


# Community Level Workers-Referrals





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# Community Level Workers-Referrals

