

Psychosocial Support in Humanitarian Crises

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Overview

- Sources of psychosocial vulnerability in emergencies
- What is psychosocial support?
- Critical issues
- Global standards

Multiple Sources of Vulnerability for Children in Zones of Armed Conflict

- Structural violence: social exclusion, discrimination, oppression, pre-existing problems
- Chronic poverty, unemployment
- Family separation, displacement
- Living and working on the streets
- Multiple losses
- HIV and AIDS
- Disability
- Sexual exploitation and abuse
- Trafficking
- Recruitment or use by armed groups



What is Psychosocial Support?

- Processes and practices that alleviate suffering and promote emotional, social, cognitive, and spiritual well-being.
- Every child's right under the CRC.
- An approach that is intimately linked with social justice, peacebuilding, and positive social transformation
- Children's own competencies are key—e.g., coping strategies
- Psychosocial supports may be natural (indigenous, self-help) or externally facilitated/organized.

Examples of Psychosocial Support

Natural supports

- Burial rituals
- Prayer
- Parental calming or reassurance of a child
- Participation in 'normal' activities
- Peer discussion or problem-solving
- Collective planning and action

Externally organized

- Child Friendly Spaces
- Psychological first aid
- Counseling
- NGO program on positive parenting
- NGO program on family tracing and reunification
- School-based supports
- NGO facilitated livelihood and group supports

Ecological Framework

- Child development occurs through interactions and relations with others at different levels of children's social ecologies—family, peer group, community, societal
- Psychosocial well-being depends on the dynamic interaction of risks and protective factors at micro-, meso-, and macro-levels
- Psychosocial supports occur at multiple levels

Critical Issues

- Do No Harm issues
- How to understand psychosocial impact?
- Deficits and/or resilience approach?
- Building ethical, comprehensive supports
- Strengthening the evidence base regarding which interventions work

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**Do No Harm?
Counseling in
Emergencies**

1. Sample Do No Harm Issues

- 'Instant' counselors
- Poor coordination
- Aggressive questioning
- Lack of follow-up support
- Raised expectations
- Stigmatization
- Undermining of local supports
- Increased protection risks
- Preventable through critical awareness, intentional management, & documentation

2. Understanding Psychosocial Impact: Key Questions

- What accounts for the range and diversity of responses to the same event?
- Is a Western, clinical lens comprehensive?
- What are the wider array of psychosocial impacts?
- Whose understanding matters?

Different Responses to the Same Event—Why?

- Temperament
- Pre-existing difficulties or problems
- Differences in coping strategies or responses
- Meaning making
- Risk accumulation—family, peer group, community, societal levels
- Differences in protective factors—family, peer group, community, societal levels

Trauma Focus: Post-traumatic Stress Disorder (PTSD)

- Latency—weeks to months following exposure
- Symptoms
 - Re-experiencing phenomena—intrusive memories, flashbacks, nightmares, reenactment behavior
 - Psychological numbness/avoidance—avoidance of thoughts, feelings, locations, situations; reduced interest in usual activities; restricted emotional range; feelings of being alone, isolated, estranged; changed future orientation
 - Heightened state of arousal—sleep disturbance, irritability/anger, difficulty concentrating, hypervigilance, exaggerated startle response

Limits of a Trauma Emphasis

- WHO estimates that a conflict or disaster increases the burden of PTSD by about 15%
- Inattention to other severe problems—depression, epilepsy, brain disorders, alcohol and substance abuse
- Fragmentation of the health care system
- Medicalization of problems that have complex political, sociohistoric, economic dimensions
- Focus on Western defined problems rather than the problems defined by affected people
- Great burden of suffering frequently arises from everyday distress—insecurity, disability, inability to meet basic needs, attend school, or fulfill an expected social role

Diverse Psychosocial Problems in the Midst of Emergencies

- pre-existing social problems
 - *E.g. discrimination, protection threats in marginalized groups*
- emergency-induced social problems
 - *E.g. family separations, loss of jobs, protection threats, collective problems such as social fragmentation, disrupted social networks*
- pre-existing psychological problems
 - *E.g. psychosis, severe alcohol use*
- emergency-induced psychological problems
 - *E.g. normal fear (past, present, future), depression*
- humanitarian aid-induced problems
 - *E.g. conflict between IDPs and host communities, anxiety about lack of information on food distributions*

Grounded, Contextual Perspective on Psychosocial Impact

- Variation in impact not only by ‘dose’ but by class, gender, age, culture
- Collective as well as individual impacts—e.g., social fragmentation and divisions
- Views of mental health and psychosocial support are culturally constructed
- Importance of young people’s own understandings and local categories
- Examples from rural Angola—burial rites and spiritual cleansing rituals, interweaving emic and etic approaches
- Value of an ethnographic, nonimpositional approach

3. Deficits or Resilience Approach?

Deficits Approaches

- Focus on problems and what is wrong
- Can lead to medical models that pathologize affected people
- Distract from existing assets and resources
- Underestimate resilience

Resilience Approaches

- Emphasize resilience, the capacity to adapt and cope in difficult circumstances
- Encourage empowerment, participation, and social mobilization
- Build on existing resources

What's in a Resilience Approach?

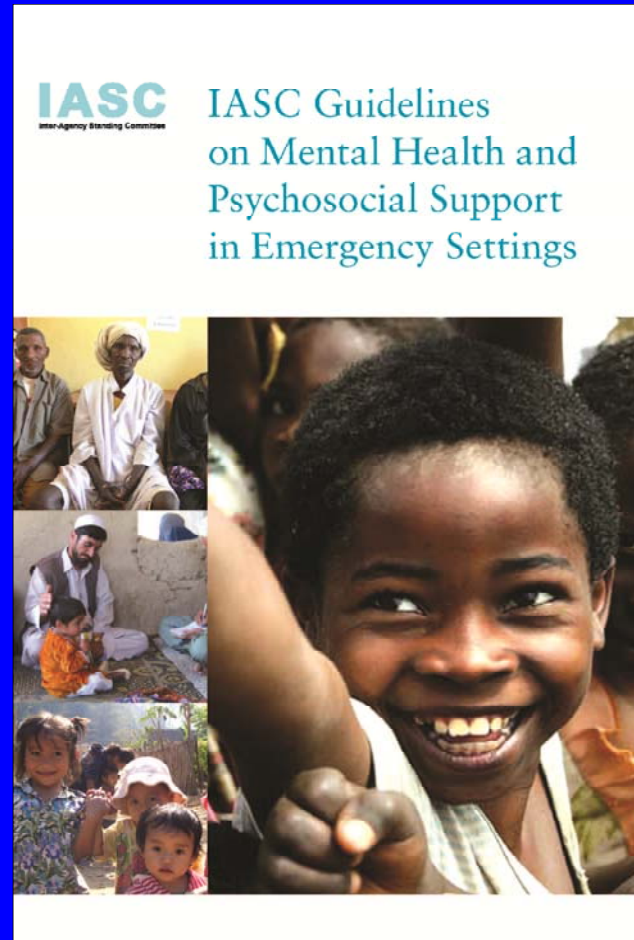
- Identification of assets, resources, change agents
- View of people as active agents of coping, adaptation, & making meaning
- Emphasis on self-help
- Focus on reducing risk factors *and* strengthening protective factors, prevention
- Dynamic, systems approach—multiple, interacting levels
- Support for skills of positive coping and adaptation
- Holistic approach (e.g., livelihoods, education, spirituality, community and family relationships, life skills)
- Contextual, cultural sensitivity

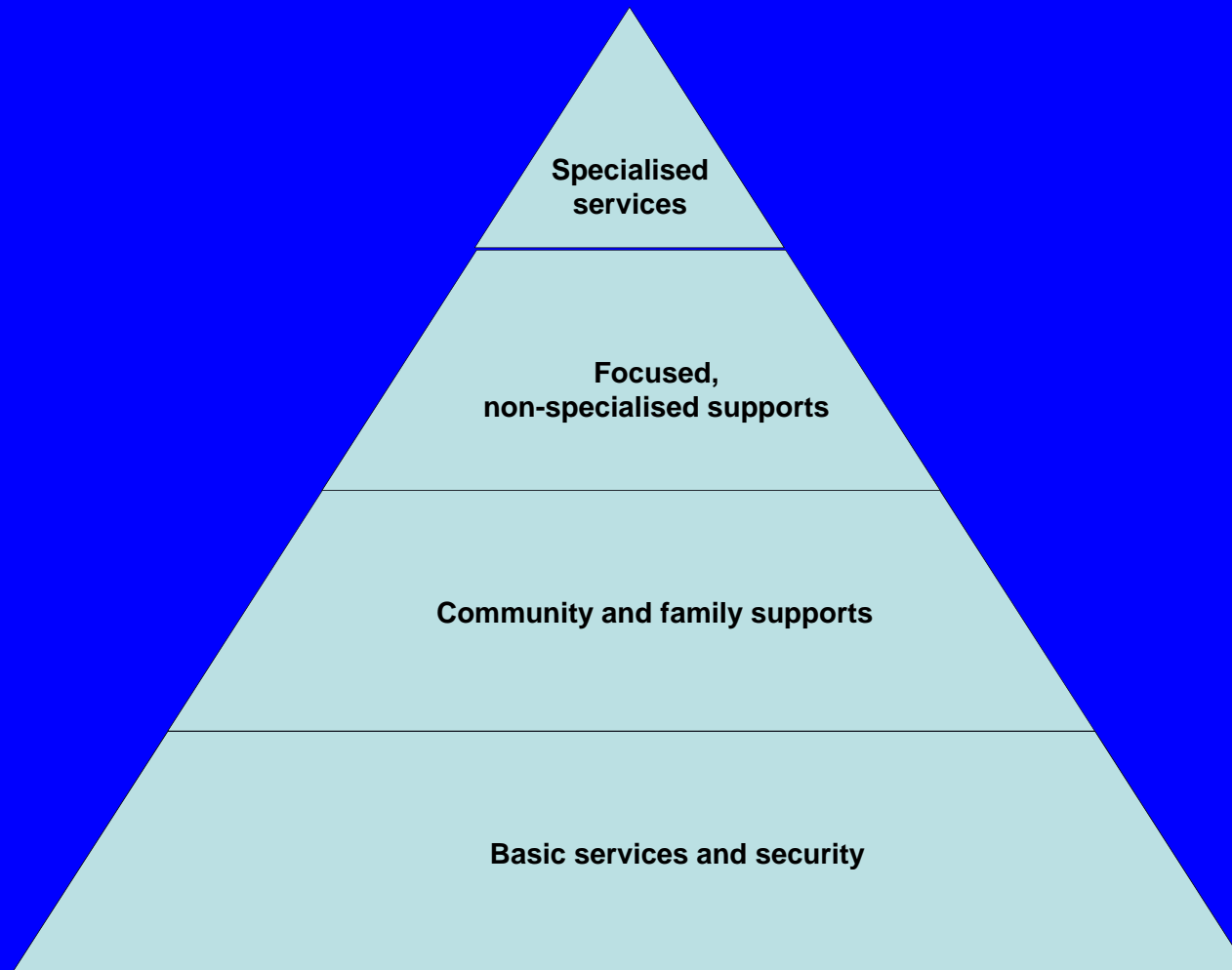
Building Community Resilience— Basic Elements

- Asset identification, mapping, mobilization
- Collective planning and action—local empowerment
- Building social capital—mobilizing local networks
- Holistic, community-based psychosocial supports for reintegration—spiritual, physical, cognitive, emotional, social, economic
- Value of religious and spiritual supports
- Nonviolent conflict resolution & reconciliation
- Truth-telling & transitional justice processes
- Increased capacities for protection and prevention
- Children & youth socialization, hope
- Participatory physical rebuilding
- Increased government capacities and responsiveness

4. Building Comprehensive Supports

- A polarized field
- Value of inter-agency guidelines





Intervention pyramid: From IASC Guidelines on Mental Health and Psychosocial Support in Emergency Settings.

Cross-Cutting Approach Toward Mental Health and Psychosocial Support: All Have Impact on Psychosocial Well-being

- Coordination
- Assessment, monitoring and evaluation
- Protection and human rights standards
- Human resources
- Community mobilisation and support
- Health services
- Education
- Dissemination of information
- Food security and nutrition
- Shelter and site planning
- Water and sanitation

Sample Topics

- Community mobilisation
- Psychological first aid
- Substance abuse
- Staff care
- Emergency education
- Care for people with severe mental disorders
- Early child development
- Cultural supports

Multisectoral Guidance

- Example: The design of sites and shelters often causes distress owing to over-crowding, lack of privacy, and lack of safety at latrines
- Key Actions:
 - organize shelters in ways that promote privacy and reduce overcrowding
 - provide adequate lighting around lockable sanitation facilities

How Can the Guidelines Be Used?

- Resource book and guide on specific interventions/actions
- Programme planning and design
- Coordinating tool
- Checklist to identify gaps
- Stimulus for collaboration between and across government, UN and NGOs to address diverse needs
- Lever for advocacy supporting better practice

5. Building the Evidence Base

- Make systematic evaluation a norm
- Get beyond process indicators to outcome and impact
- Use more robust methodologies
 - contextually validated measures
 - limits of T1-T2 comparisons
 - other useful approaches—appropriate comparison groups
- Assets as well as deficits
- Collective as well as individual changes
- Toward a more professionalized, accountable, ethical approach