

Mental Health and Psychosocial Support An Imperative in Disaster Preparedness



A Resource Booklet for
Community Disaster Management
Committees and Task Force Members



**ACTION
CONTRE
LA FAIM**

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Myanmar Consortium for Community Resilience (MCCR)

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What is the Purpose of this Booklet?

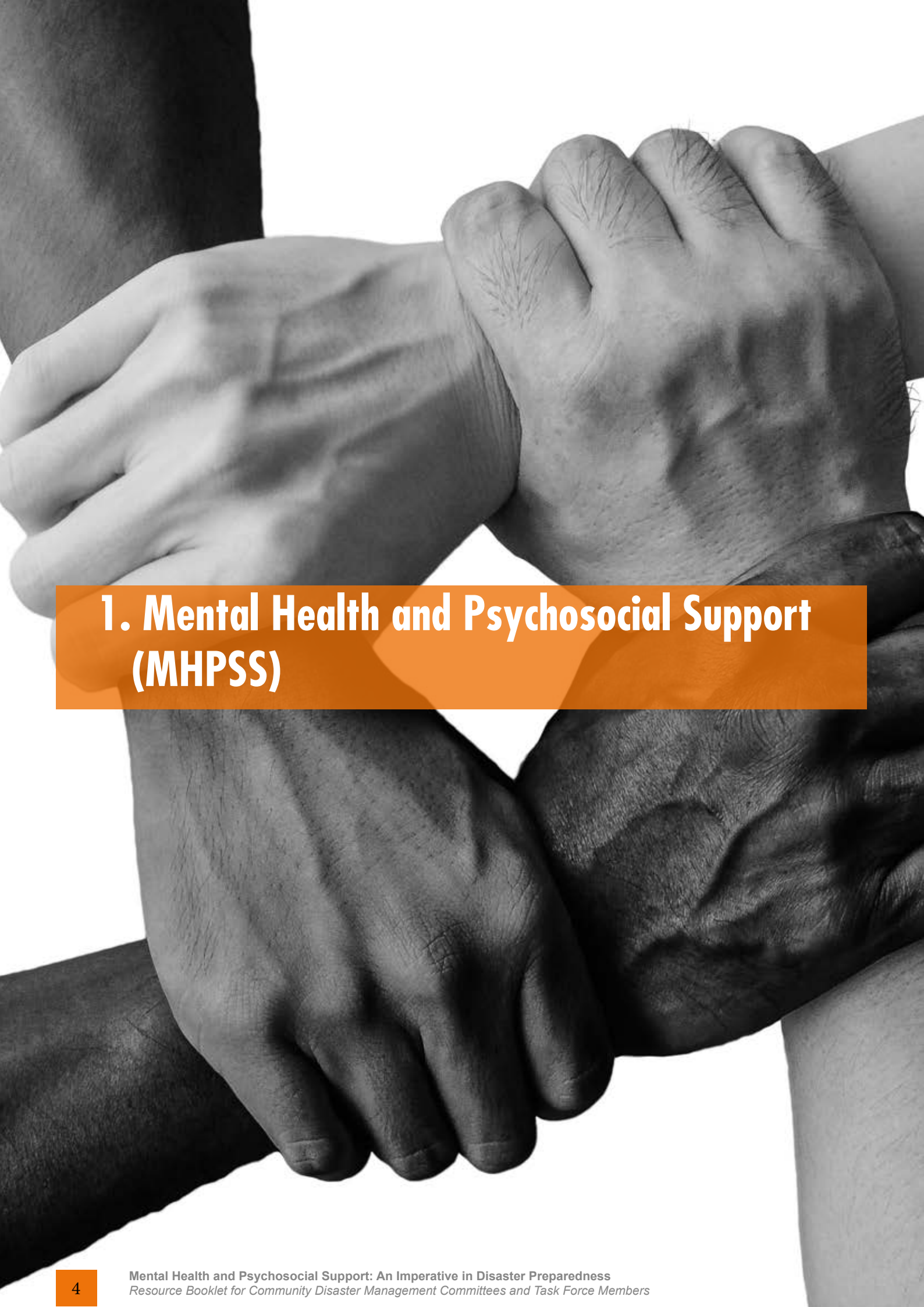
This Booklet is compiled as reference material for members of Disaster Management Committees and Task Forces organized at the community level. As part of the 9th DIPECHO Action Plan, this material is distributed together with the Training on Mental Health and Psychosocial Support for DMCs and Task

Forces conducted by ACF with the aim of:

- Increasing the knowledge of DMCs and Task Forces on the psychosocial impacts of disasters
- Helping the DMCs and Task Forces learn how to provide Psychological First Aid and how to help vulnerable groups
- Increasing their capacities to promote Infant Feeding in emergency, and
- Enhancing their skills to communicate adequately with affected population in a responsible way

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1. Mental Health and Psychosocial Support (MHPSS)

A. What is MHPSS?

- **Psychosocial** » is about emotional, psychological and social conditions that affect how we think, feel and act. It depends on the surrounding, the relationships with family and community.
- **Mental health** » refers to the state of mental well-being of a person and not only to the absence of mental illness or addictive behaviors.
- **Psychosocial support** » is about the care and support provided to an individual, a family or a community. To restore resilience, protect people, insure psychological well-being and prevent or treat mental disorders.

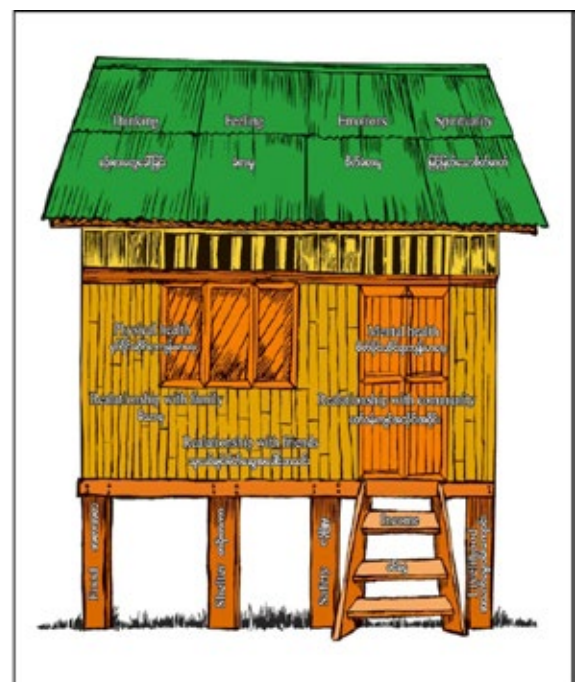
B. Why do we need to give psychosocial support in case of emergency?

- Give to children, women, vulnerable adults, families and communities in distress, the immediate conditions they need to face a difficult situation and recover a life routine.
- Help them to express feelings and emotions, to protect themselves, psychologically, affectively, relationally and socially.
- It's about how to REACT adequately.

C. The Psychosocial House¹

For better understanding, let's compare a house to a person: To build a house where people can live, we need different materials that we put together to make a complete structure, a good and strong house. If some elements are missing, taken away or destroyed, then the house can fall down, and it will not be longer a place for people to live in comfortably. It will need the help of everybody to re-build the house. Just like a house, a person needs different aspects of life to be strong and feel good like Food, Shelter, Safety, Income, Livelihood, Income, Thinking, Feeling, Emotions, Spirituality, Physical and Mental Health, and Relationship with Family, Friends, and Community.

- If a dramatic event happens in life, that means that a person may not be able to take care of himself or take care of his children, people feeling lost or unable to cope in the world, because the "psychosocial house" of their life has been disrupted.



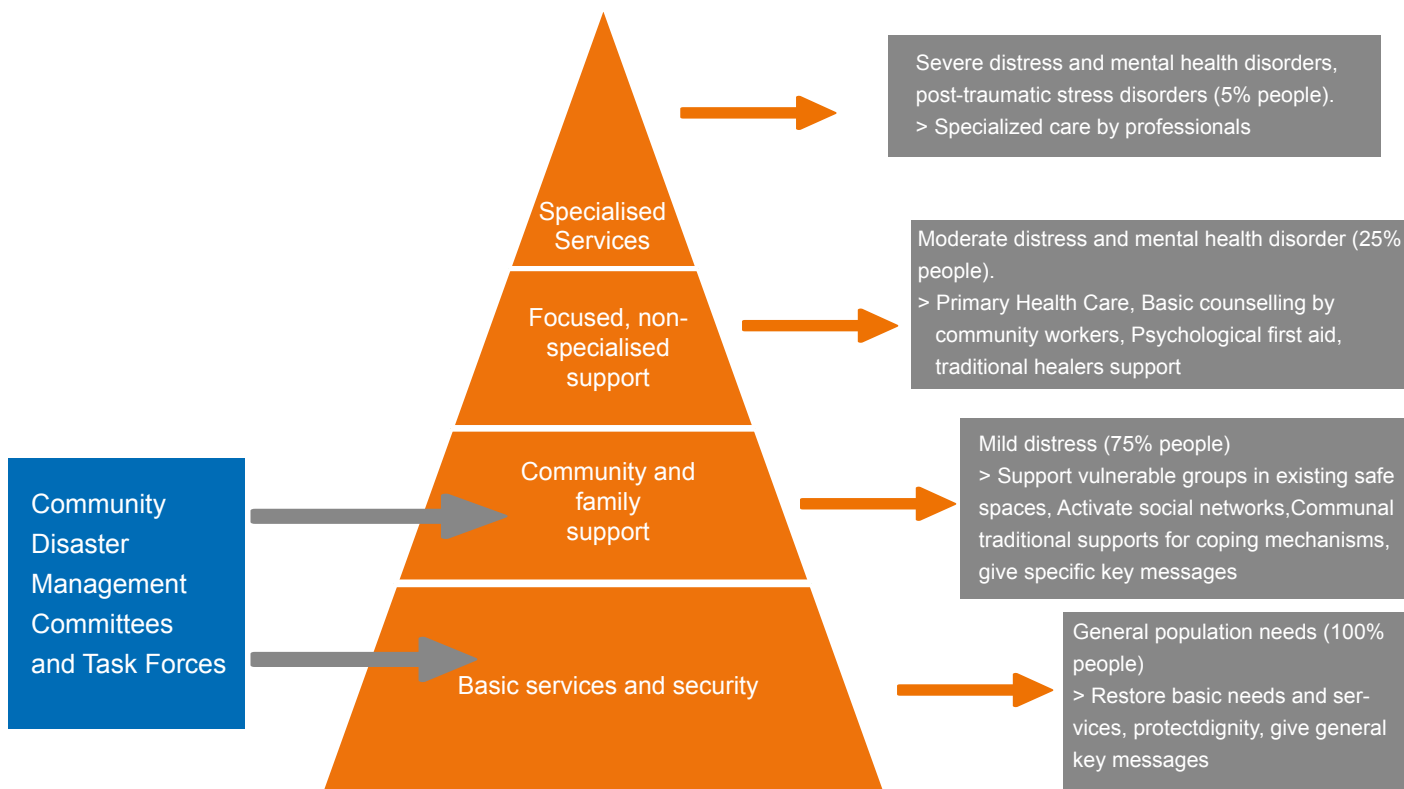
¹ Source: IOM Myanmar (2008) "After the Wind, Rain and Water. Community Level Handbook for Helping" (with support from UK Department for International Development)

- By helping each other, we can make sure that everyone has all the elements that they need to re-build a “psychosocial house” – which means, to re-build a person’s internal resources and sources of satisfaction. The house represents the psychosocial state of a person.
- In case of loss, despair, helplessness, uncertainty about the future and suffering, the psychosocial state of an individual can be restored through support given by family, neighbors, friends, local leaders, religious leaders, teachers, health workers, and volunteers.



D. Providing Psychosocial Support²

- According to the level of distress and level of mental health vulnerabilities, different services and psychosocial support can be provided, and described with a pyramid. **Everybody can help and give support.**



2 Ref: IASC (2007) “Guidelines on Mental Health and Psychosocial Support in Emergency Settings”



2. Psychosocial Impacts of Disasters and Ways of Coping

A. Disasters and Traumatic Events

- **Disasters** » The serious disruption of the functioning of society, causing widespread human, material or environmental losses, which exceed the ability of the affected communities to cope using their own resources.³

Some are nature included:	Some are Human-induced:
Earthquake	Violence
Cyclone	Crisis
Flood	Accident
Fire	Conflict
Collapse	Fire
Landslide	
Tsunami	

- **Traumatic Event** » A critical or violent event, generally sudden, powerful, representing a threat or a danger, with people losing control and strong emotional reactions, exceeding individual and group adaptation capacities (coping, resilience).

• Phases of Disaster

Before	During	After
Predictive phase: Warnings, alerts, threats, rumors, information which can be true or false	Damage phase: Social troubles and disorganization, human and psychological distress	Heroic phase Hopeless phase Reorganization phase
<i>Stay inform about what happens close to you. Anxiety and stress reactions to warnings.</i>	<i>Protect yourself and the others. Choc state, fear, panic.</i>	<i>Survival. Victims and witnesses waiting for help. Strong emotions, anger and depression. Beginning of reconstruction and new life after mourning.</i>

3 Ref: IASC (2007) "Guidelines on Mental Health and Psychosocial Support in Emergency Settings"

B. Individual and Collective Psychosocial Impacts⁴

- **Individual psychosocial impact**

- Personal drama, feeling of loss of identity, injustice, helplessness (why me?)
- Reduced capacities to fulfill the needs, to concentrate and to find solutions to daily problems
- Malnutrition
- A majority of the population recover fast

- **Collective psychosocial impact**

- Habits and social links are disrupted, family separation, movements, migrations, displacements, inter-group conflicts
- Violence, destructive behavior, alcoholism
- Community structures, resources and traditional mechanisms are weak and fragile. If
- absence of community leaders: delays for organization and reconstruction; If absence
- of religious leaders: delays or cancellation of rituals, funerals, more difficult for people

- **Groups with a particular psychosocial vulnerability**

- Women: pregnant and lactating women, Gender-based violence issues, trouble to take care of children if traumatized
- Children: children under 5 years of age, life danger because parents not available, lack of care practices, exposure to abuse and exploitation, orphans.
- Elderly, sick people, disable people, refugees, minorities

⁴ Reference: ACF-International (2014) "The Psychosocial Impact of Humanitarian Crisis. A better understanding for better interventions"

C. Signs of Psychosocial Problems

• Post-Traumatic and Stress Reactions

- Some people can develop specific symptoms in link with stress that you can identify in the table below.
- All these reactions to an abnormal situation are **NORMAL**.
- Children react differently: shaking, crying, isolating, enuresis, appetite change.

PHYSICAL	<ul style="list-style-type: none">- Headache- Appetite loss or gain- Insomnia- Tiredness- Palpitations- Stomach troubles	AFECTIVES	<ul style="list-style-type: none">- Fear- Sadness, Helplessness- Anxiety- Guiltiness- Irritability, anger- No emotional reactions
COGNITIVE	<ul style="list-style-type: none">- Beliefs, for protection- Difficulty to make decisions- Unable to remember an important aspect of trauma, forgotten- Concentration loss- Nightmares, flashback	BEHAVIORAL	<ul style="list-style-type: none">- Hyper vigilance- Easily afraid- Isolation, avoidance- Alcohol and drugs use

• About Stress

- Stress is a natural and normal process. It is an alert-signal produced by body and mind, when we are exposed to an upset situation. It is an adaptation mechanism facing a threat or a real danger.
- Stress can be perceived as positive: we use our energy to face the situation.
- Stress can be perceived as negative: we use our stress to escape or avoid the situation.

• Testing Your Own Stress

- This test is for personal use only, as an indication, and should never be used by any member of the community to “screen” people stress. Only stress specialists can diagnose stress and post-traumatic stress syndrome. This test is for training purpose about stress symptoms identification.
- If the YES answers for the questions below are more than 7, the person is confirmed to be experiencing stress.

Questions	YES	NO
Do you feel tired easily?		
Do you feel more tired than energized?		
Do you feel easily irritated?		
Are you working more and more with no results?		
Do you feel more and more cynical and disillusioned?		
Do you feel often a feeling of sadness that you can't explain?		
Do you forget meetings, appointments, issues?		
Do you have sleeping problems?		
Do you see not often your family and friends?		
Do you feel isolated?		
Are you too busy to fulfill regular tasks?		
Do you have regular or chronic pain (back, headache)?		
Do you feel disoriented when activity turns to calm moment?		
Have you changed your dietary?		
Are you unable to laugh about you?		
Is your love or affective life a problem?		
Do you have less things to tell to your colleagues or friends?		
TOTAL		

• **How to do a Relaxation Exercise?**

- Any relaxation exercise is recommended in case of stress. For example, try the following one, by taking your time:
- Sit down, relax your body, close your eyes
- Take 1 deep inhalation, then 1 deep exhalation. Do it 3 times.
- Count 1 to 10 very, very slowly and relax your body more and more.
- Visualize a peaceful environment or souvenir.
- Count 10 to 1. Then open your eyes.

D. Ways of Coping

- The ways of coping (also named coping mechanisms) are about the behavior that you adopt in order to defend yourself, to adapt yourself, to take care of yourself after a problem.
- **Positive ways of coping:** Trying to fulfill immediate needs, keeping family together, checking if everybody is fine, venting about feelings and discussing with other people, religion and spirituality, meditation, listening to people with compassion, respecting people wishes, including in decision making, participating in relief effort, try to restart normal activities, relaxation, get enough sleep, get enough food and water, focus on what you did well, do physical exercise.
- **Negative ways of coping:** alcohol, drugs, violent behavior, isolation, avoidance, acting without thinking, not seeking help.



3. Psychological First Aid (PFA)⁵ and What to Do to Help?⁶

⁵ Source: "WHO (2011) Psychological First Aid: guide for field workers"
⁶ Please refer to awareness sessions guidelines in annex ("How to help vulnerable people and others")

A. What is PFA?

- **Psychological First Aid** » refers to aid given to an individual who is suffering and may need support. PFA is intended for people who have recently been confronted by a serious crisis situation.

B. Preparing Yourself to Provide PFA

- **Knowing yourself**
 - Questioning yourself (emotions, sense of life, like-dislike, ...)
 - What are my limits?
 - Ask: during demonstrations in Sittwe in March 2014, how did you feel? Do you think you can control your feelings?
- **Helper reactions - rest**
 - Stress
 - Compassion tiredness
 - Burn-out
- **Protect yourself – feel secure**
 - Learn about the crisis event
 - Learn about available services and supports
 - Learn about safety and security concerns.

C. How to do the 3L Technique?

- **Look**
 - Check for safety.
 - Check for people with obvious urgent basic needs.
 - Check for people with serious distress reactions.
- **Listen**
 - Approach people who may need support.
 - Ask about people's needs and concerns.
 - Listen to people, and help them to feel calm.
- **Link**
 - Help people address basic needs and access services.
 - Help people cope with problems.
 - Give information.
 - Connect people with loved ones and social support.

D. Stabilization and Listening

- Approach and propose assistance. Quiet and calm.
- Ask : **what do you need** ? Propose water, tissue, blanket
- Show the nearest place where the person will feel secure. Propose to go there to **protect** from source of stress
- Ask to the person to sit, 2 feet on floor. Squat down (put a hand on the knees or shoulder, if culturally acceptable + gender). **Reassure** but stop the physical pain (steady).
- Get information about how to satisfy immediate needs of the person. Do a **family member** or a known person who can do it?
- Listen to the story of the person. **DO NOT FORCE** the person to talk.
- **Normalize reactions** in order to calm down the person. You have stress, this is normal, you feel confuse for now because you're under a choc, this will be difficult for a moment.
- Let the person recover at his rhythm. Invite to **breathe** quietly.

E. Tips

- Smile!
- Introduce yourself and explain your role
- Look the persons in the eyes
- Use simple words to explain
- Use preferably the language of the person involved.
- Always explain, in a short way
- Never give orders or instructions

BLAME →

PEOPLE OBEY BECAUSE THEY
WANTS TO PLEASE YOU OR DO
NOT WANT TO BE BLAMED AGAIN
NO MOTIVATION TO DO
SOMETHING FEELING INSECURE
AND STRESSED

NOTHING WILL CHANGE
YOUR INTERVENTION IS NOT
CONSTRUCTIVE

ENCOURAGEMENT
UNDERSTANDING →

MOTIVATION TO TRY
SOMETHING AND DO THE
BEST
FEELING SELF-CONFIDENT
IMPROVEMENT OF SELF
ESTEEM

SOMETHING WILL
CHANGE
POSITIVE
INTERVENTION WITH
GOOD RESULTS

F. Summary

- Do first contact
- Restore security feeling
- Stabilization
- Understand the needs
- Decrease despair
- Refer to NGO, hospitals, evacuation sites
- Reduce stress
- Take back a routine life for adaptation



4. Infant Feeding in Emergency (IFE) and Care Practices

A. Care Practices⁷

- **Care Practices** » are all what caregivers do daily for a child, like providing food, stimulation and emotional support, to help the child to feel well, by healthy and grow up in good condition. To do it well, it is necessary to spend time with the child and to provide quality care (answer continuously to the child needs).
- Care practices are about:
 - Infant and Young Children Feeding (IYCF)
 - Mother and child relationship, interactions, bonding
 - Children needs and development
 - Children and mother well-being
- In an emergency situation:
 - Care practices can be disrupted
 - Mother can be under stress or depression
 - Children can be under stress and need attention
 - Absence of family support
 - Isolation of the mother
 - Child separated from the mother



7 Source: ACF-France (2006, revised 2012) “Conceptual models of child malnutrition. The ACF approach in mental health and care practices.”

B. Infant Feeding in Emergencies (IFE)⁸

- IFE concerns the protection and support of safe and appropriate (optimal) feeding for infants and young children in all types of emergencies, wherever they happen in the world. IFE is a good way to take care of children under 5. The well-being of mothers is critical to the well-being of their children.
- **4 optimal Infant Feeding in Emergency**
 - **Early initiation of breastfeeding:** introducing breastfeeding within one hour of birth - colostrum.
 - **Exclusive breastfeeding:** only breastmilk for the first 6 months of life and no other liquids or solids, not even water, with the exception of necessary vitamins, mineral supplements or medicines)
 - **Continued breastfeeding:** sustaining breastfeeding to two years of age or beyond)
 - **Complementary feeding:** age-appropriate, adequate and safe solid or semi-solid food is provided in addition to breast milk. From six months to two years. Appropriate complementary foods are those that provide sufficient energy, protein and micronutrients to meet the child's growing nutritional needs)

Advantages of breast feeding

Breast milk

- Perfect nutrients
- Easily digested
Effectively used
- Protects against infection

Breast Feeding

- Help bonding and development
- Help delay a new pregnancy
- Protect Mothers' Health



- Cost less than artificial feeding

Source: ACF IEC material developed in Kayah and adapted to others contexts

8 Source: based on IFE Core Group (2007, revised 2010) "Infant and Young Child Feeding in Emergencies. Operational guidance for emergency relief staff and programme managers" and WHO recommendations

- **Risks of Artificial Feeding**

- Artificial Feeding is always risky and even riskier during emergencies due to contaminated water, bacterial contamination, limited supplies and poor resources.
- Artificially fed infants are highly vulnerable in emergencies
- Mixed fed babies lose protection and invite infection

No active protection

Infant formula powder is not sterile

Bottle and teats extra source of infection

Costly in time resource and care

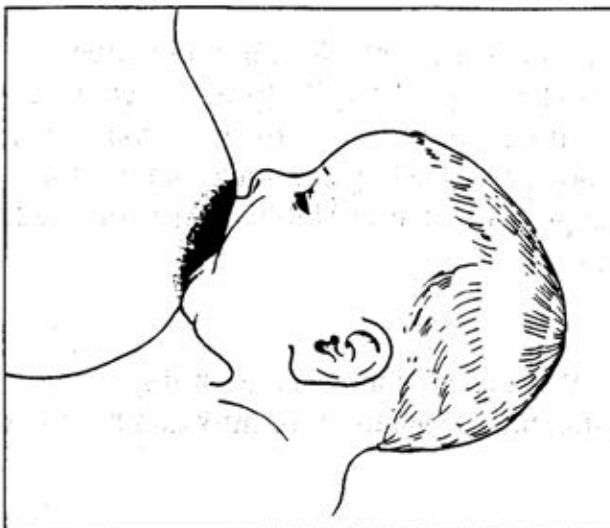
Increase food insecurity and dependency



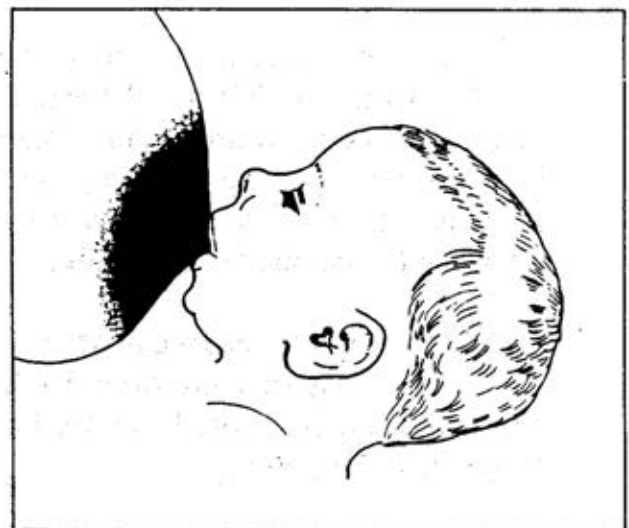
- **Breast Feeding**

- Breast feeding is about breast attachment. Good attachment means:
 - o The baby is well attached to the breast so that he/she suckles effectively
 - o He/she is fully turned to the mother (belly against belly)
 - o He/she has his mouth widely opened
 - o Lower lip turned out
 - o The baby's chin is touching the breast of his/her mother
 - o More areola visible above the baby's mouth than below
 - o The baby suckles as often and for as long as he/she wants (take time)

Good attachment

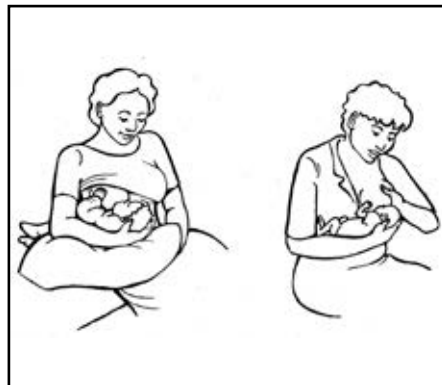


Poor attachment



- Breast feeding is about emotional bonding.
 - o The mother feels good about herself and breastfeeding (even if it could be painful)
 - o The mother and the baby are relaxed and calm
 - o The mother gives attention to her child (eye contact)
 - o The mother can breastfeed sitting or lying down
 - o The environment supports breastfeeding (quiet and peaceful, family support)
 - o Close, loving relationship between mother and baby
 - o The mother is more emotionally satisfied
 - o The baby cries less and feels secure

- Breast feeding is about good positioning



• Feeding Practices

- Children needs help to eat
- Children need to sit to eat for swallowing well.
- Children needs to eat in their own cup/plate (sharing pot means they have less possibilities than older children to grab the food and take their time).
- Children needs to eat at their own rhythm, caretaker has to spent time.
- Do not force feeding (closing his eyes and nose or forcefully opening his mouth will not help the baby to eat more; he will vomit most of the times. It is also a stressful experience for the baby and a risk damaging the mother-child relationship or has a negative effect on the baby's relation with food).
- If the child refuses to eat, let him/her tasting, smelling, and playing with food.
- Meal time should be a pleasant moment for the child (and the caretaker).



Source: ACF IEC material developed in Kayah and adapted to others contexts



5. Do No Harm, Human Rights, Protection and Conflict Sensitivity



Do's	Don'ts
✓ RESPECT	✗ ASK FOR FAVOUR
✓ HONESTY	✗ NO FALSE PROMISES
✓ HELP ATTITUDE	✗ FORCE OR PRESSURE
✓ ETHIC	✗ SHARE PERSON'S STORY
✓ PROTECT	✗ JUDGE
✓ RESPECT	
✓ HONESTY	
BE FOCUSED ON PEOPLE AND HELP IN A RESPONSIBLE WAY	



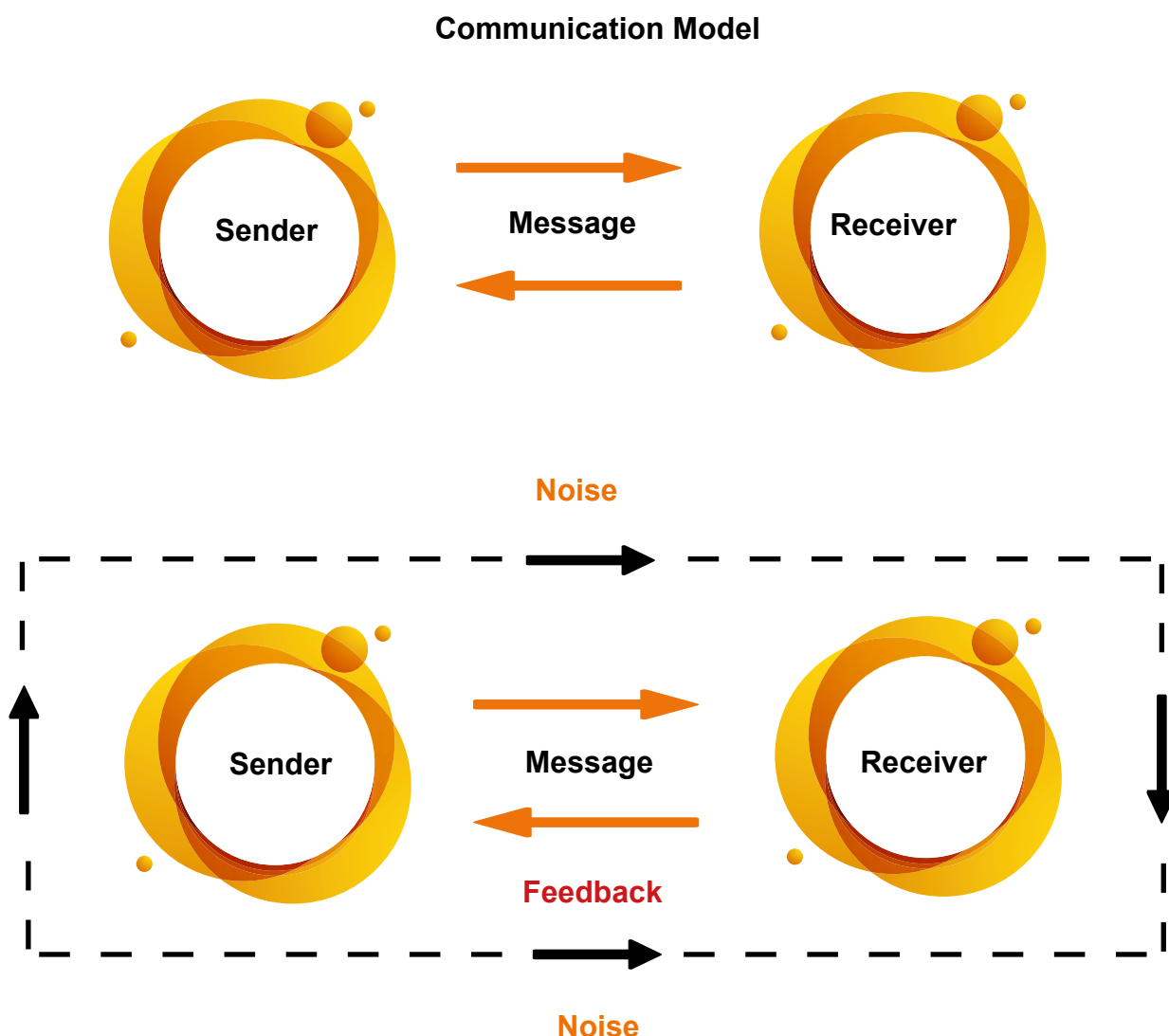
6. Communication with Affected Population

A. Why is it important to communicate with the affected population?

- In case of emergency situation, it is important for people to know exactly what to do and where to go if they have specific needs.
- Simple and clear key messages can be provided, in order to INFORM or to ADVISE.
- Example of information: « if you need assistance for breastfeeding your child, please go to ACF nutrition center located XXX »
- Example of advice: « to better breastfeed your child, you could sit down, relax, make sure that your child is well attached to the breast, watch him and take your time »
- **As seen previously, stay calm, use a friendly, empathic and non-judgment attitude, and be direct.**

B. Effective Communication

- Effective Communication is: when the receiver receives the right message and the when sender receives a feedback.



C. MHPSS Key Messages⁹

Mental Health and psychosocial key messages: examples	
Strong reactions and feelings are common	It is common to have strong feelings after a difficult event. Such reactions include loss of interest to daily life, feeling sad, irritable or confused, having difficulty to concentrate, physical reactions or vivid memories of the event. Recognize that this is a challenging time but one that you can work to manage. You have likely tackled hardships at other times in your life. With time and support we can overcome most or all of these difficulties.
Taking care of yourself will help you care for others	It is important that you take care of yourself, so you can help others. Focus on the things you did well and try to be patient with the changes in how you are feeling and reacting. Try to reestablish your daily routines such as sleeping and eating regularly and try to take time to do things that are satisfying. If you feel you can't cope or are not getting better, go to a health clinic.
By working together, we can cope better with this situation	Helping others and getting help from others is one of the best ways to cope with difficulties. Listen to others, provide them comfort, and participate in regular social activities. Don't hesitate to accept and ask for help from others. Talk with people with trust in the family and the community.
We can rebuild our community together	Work with others to organize community and social activities such as religious ceremonies, community meetings, sports, arts, cleaning and helping others in the community.
Pay particular attention and reach out to those who are most affected	We need to take particular care of and reach out to those that are the most affected or at the margins of our communities, including, possibly, injured people, older people, people with disabilities, widows and children that have lost their parents.
Adults and older people can help children cope with the situation	Children need extra attention and care after a difficult situation. You can help children by keeping them safe, listening to them, speaking kindly, reassuring them, playing with them and hugging them. Provide opportunities for children to share their concerns and hopes, play with their friends and to participate in daily life such as helping with family tasks
Gently face things that you continue to be scared of	Some people feel so upset about the emergency/disaster that they try to avoid places, people, conversations or activities that remind them of the events. They continue to do this even when it is no longer dangerous. This is understandable. Strangely, in order to feel better, it can be extremely helpful to visit places that you are avoiding, to talk to people that remind you of the events, and to continue to try to do the activities that you used to do. It can be difficult but try. Maybe you can ask a trusted family member or friend to help you and be with you when you approach things that you have been avoiding.
Avoid taking alcohol or drugs to feel better	It is very common to want to take alcohol or drugs when you feel bad. However, when you drink or use drugs it takes longer to overcome the painful feelings and anxiety. Also, when you drink or use drugs it is difficult to protect and support your family and to help your community to overcome the difficulties. It will take longer to rebuild.

Most people will feel better over the coming months	If your distress does not decrease or gets worse, then it is especially important to try to seek help from others who can support you. If possible, talk to a trusted family member, friend, or person in your community.
Child reactions to a disaster	Following a disaster your children may have trouble sleeping or show other reactions. Any reaction is common in a disaster. When children's reactions are severe and last for a long time they may need help from a counsellor.
Where to go for help	Taking good care of yourself is important if you want to help children. Try to find someone around you who can help you and who you can talk to about your problems. For help with dealing with you or your child's emotional, psychological and physical problems in the emergency, contact XXX for advice.
Why it is important to keep attending school or doing school work.	Support children in attending school. Encourage children to do school work (reading, math, writing) even if school is closed.
Protect your children even more than usual	Children need adults' love and attention during this difficult time, thus, watchfulness and comfort throughout the day is important in order to prevent further harm.
Children are best cared for by people they know and trust	Do not move a child from their community until you are sure that he or she has genuinely been lost or abandoned. If you are aware of children without parents living nearby you, you have a responsibility to notify as soon as possible XXX(e.g. helpline/protection working group) of where the children are. Report anything you feel maybe suspicious.
Why keeping your children with you is important	Your children will always be better with you. Do not give your child away to people who promise a better future elsewhere. If you think you can no longer care for your child and you need help, seek assistance from XXX (add name and contact info).
Availability of assistance	Help isolated older people who may be malnourished access the centers so that they can receive their food rations. Supplementary feeding programmes have been set up by XXX at XXX
Why is bonding important?	Breastfeeding can help mothers bond with their babies. Breastfeeding makes your baby feel safe and loved, helps the mother to deal better with stress and helps the mother to love her baby.
Availability of counselling	Breastfeeding women can get help and advice on breastfeeding and related issues at XXX
Ways to cope as a family	Being caring and telling children that you love them will reassure them. Encourage children to interact with other children. This will help them cope as a family. Allow yourself and your family, including your children to mourn the losses you have experienced. Try to have and keep a positive outlook. This will help children have hope for the future. Encourage children to help if it will not harm them. Children cope better and recover sooner when they help others.
What to tell your children	Comfort your children and say you will do anything you can to provide and care for them. Be careful not to promise what you cannot provide as you need to retain their trust. Talk to the children. Pay attention to them, listen to them and let them explain their concerns and fears. Children may fear further XXX (crises), so talking about, deciding on and practicing a family preparedness plan can help increase their sense of safety. Try to give children appropriate information about what is happening.



7. Annex: Pocket Guide for MHPSS Awareness Session

Mental Health and Psychosocial Report (MHPSS)

Disaster Risks Reduction in Sittwe, Rahkine State, Myanmar

GOALS OF AWARENESS SESSIONS

FOR GENERAL POPULATION AND VULNERABLE PEOPLE TO BE PREPARED EMOTIONALLY IN CASE OF DISASTER OR CONFLICT

- What is Mental Health and Psychosocial Support?
- What are the psychosocial reactions to a disaster?
- How to take care of yourself?
- How to help emotionally in case of disaster?
- How to take care of children and breastfeed adequately in emergency?

Psychosocial support

- Mental health is about well-being and good relations
- Care practices is daily care given to the children (food, love, attention and education)
- Psychosocial support is about helping vulnerable people when they are suffering or in case of emergency situation.
- Vulnerable people are: pregnant and lactating women, children under 5, people with disabilities, elders.

The Psychosocial house : compare a house and a person

To build a house where people can live, we need different materials that we put together to make a complete structure, a good and strong house. If some elements are missing, taken away or destroyed, then the house can fall down, and it will not be longer place for people to live in comfortably. It will need the help of everyone to re-build the house.

If a dramatic event happens in life, that means that a person may not be able to take care of himself or take care of his children, people feeling lost or unable to cope in the world, because the “psychosocial house” of their life has been disrupted.

By helping each other, we can make sure that everyone has all the elements that they need to re-build a “psychosocial house”, meaning to re-build a person’s internal resources and sources of satisfaction. The house represents the psychosocial state of a person.

So, in case of loss, despair, helplessness, uncertainty about the future, suffering, the psychosocial state of an individual can be restored through support given by family, neighbors, friends, local leaders, teachers, health workers, volunteers.

Reactions to a disaster

A disaster is a traumatic event (sudden, violent, unexpected, losing control, strong emotional reactions)

- Shock
- Anxiety, worried, guilt
- Panic, confusion
- Fear
- Sadness, hopelessness
- Grief
- Flash back, unpleasant memories
- Hyper alert, vigilance
- Body feelings
- Missing loved ones
- Social links disrupted (social disorganisation, like ants)
- Care practices disrupted (mothers have difficulties to take care of children)

All these reactions to abnormal situations are normal.

How to take care of yourself

- **Positive ways:** try to fulfill immediate needs, keeping family together, checking if everybody is ok , venting about feelings-disucssing with other people, religion and spirituality, meditation, listening to people with compassion, respecting people wishes, including in decison making, participating in relief effort, try to restart normal activities, relaxation, get enough sleep, get enough food and water, focus on what you did well, do physical exercise.
- **Negative ways:** alcohol, drugs, violent behavior, isolation, avoidance, acting without thinking, not seeking help.

How to help others and children

For Adults:

- Emotional first aid: looking for safe places and needs-listen to vulnerable people-link to religious leaders, village leaders, women representative, health workers, teachers, volunteers.
- Garher family members.

For children:

- Children signs of distress: crying, nightmares, anger, thumb-sucking, bed-wetting, fears.
- Children must stay close to mother and family.
- Insure adequate nutrition.
- Talk to children about what happened and what will happen next- use simple words.
- Make sure you understand them and do not criticize their reactions.
- Be sure that children are safe and secure.
- Let children express their feelings through drawing, painting, talking.
- Try to restart normal activities as soon as possible (school).

How to help others and children

- **For women, disable people and others:**
 - Organize group disussion
 - Pay attention to pregant and lactating women
 - Protect them from all forms of abuse and violence
 - Fulfill basic needs (eat, drink, sleep)
 - Give individual assistance if needed

How to breastfeed in case of emergency

- 4 optimal Infant Feeding in Emergency
 - Early initiation of breastfeeding
 - Exclusive breastfeeding
 - Continued breastfeeding
 - Complementary feeding
- Breastfeeding protects children from diseases, infections.
- Good breast attachment, bonding, positioning



**ACTION
CONTRE
LA FAIM**