Responding to National and International Disasters Through A Multicultural-Social Justice Frame

Introduction by Dr. Gargi Roysircar
Presentations by
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What is Disaster Shakti?

- Disaster Shakti consists of disaster response volunteers in the Department of Clinical Psychology of Antioch University New England.
  - Shakti in Hindi means “Being Empowered, Strong, and Resilient.”
  - The Antioch team was named Disaster Shakti in Summer 2005 by community counselors who served tsunami survivors in the fishing villages of Nagapattinum, Southern India.
Portrait of Empowerment, Strength, and Resilience

A “Shakti” drawing by a tsunami orphan done during our play activity in Nagapattinam, Southern India
The Mission of Disaster Shakti

Disaster Shakti designs and implements social justice outreach to disaster-affected communities. Prior to project implementation, volunteers engage in discussions regarding the needs of people impacted by disasters. The discussions are related to the culture, social class, race, and resource access of a destroyed community. Training and scholarship provide preparation for a particular project and for outcome assessment.
What Does Disaster Shakti Do?

- During the academic year, Disaster Shakti develops a global outreach program and trains for its execution during semester breaks, as in the following instances:
  - Tsunami Recovery in Tamil Nadu, India, 2005
  - Hurricane Recovery in the Gulf Coast, U.S.A., 2005-2008 ongoing
  - HIV/AIDS Recovery in South Africa’s Cape Town and Johannesburg as well as in Botswana, 2007
  - Flood Recovery in Tabasco, Mexico, 2008
- Disaster Shakti volunteers call themselves Shaktis.
Tsunami Recovery Shaktis in Tamilnadu, India, 2005
Psychiatrists at Stanley Medical College trained Disaster Shakti team members in tsunami trauma interventions.

June 19th, Soweto Township or squatter shacks where Black South Africans live. Shaktis served at the Parents and Children’s Counselling Centre outpost in a Soweto township.
Flood Recovery by Shaktis in Tabasco, Mexico, 2008
Flood Recovery by Shaktis in Tabasco, Mexico, 2008
Shaktis’ Outreach and Psychoeducation

- Outreach to community has three goals: release of emotional steam, education about trauma, and installation of hope.
- Psychoeducation of community provides descriptions of normal reactions to trauma, ways of coping with trauma, risk factors associated with more significant problems, and protective factors preventing trauma.
- Psychoeducation of community provides a venue for individuals to ask and receive answers to questions and concerns.
What Else Does Disaster Shakti Do?

• Psycho-education training in self-care and resilience for first responders and caregivers
• Disaster response workers in Mississippi continue to help survivors in coastal towns nearly two-and-a-half years after Hurricanes Katrina and Rita.
• Disaster Shakti’s current training in self-care in Mississippi coastal towns is made possible by a 2008 grant from the Foundation of the Mid South in partnership with the American Red Cross Hurricane Recovery Program.
• Empowers disaster-stricken communities, particularly those with less privilege (women, children, low SES individuals) to regain their well-being in a disaster’s aftermath
Shaktis’ Here-And-Now Narratives

- Shaktis write journal entries during their outreach and post these on the internet:
  - http://www.multiculturalcenter.org/shakti/katrina/gargi.cfm
  - http://www.multiculturalcenter.org/shakti/tsunami/tsunami721.cfm
  - http://www.multiculturalcenter.org/shakti/southafrica/gargi.cfm
  - http://www.multiculturalcenter.org/shakti/mexico/journals.cfm
Philosophy of Shakti Training

Traditionally, psychology students provide psychotherapy to clients with individual traumas. They do not provide interventions to communities for grief and loss responses that do not constitute psychopathology. As professional psychology provides leadership in cultural diversity and social justice, training and practice in multicultural trauma work is a must. Members of a community (e.g., racial and ethnic minorities, underprivileged classes) who can least cope with a significant stressor are often those most affected. They have the fewest resources with which to escape danger, to rebuild, and to seek help. The purpose of Disaster Shakti training is to enable student volunteers to integrate their core training in clinical psychology with their new training in community disaster work so that they can effect lasting social change.
Online application forms are completed by students to join an outreach project. If accepted, Training on:

• Multicultural competencies
• Social justice advocacy
• Community collaboration
• Knowledge about communities to be served
• Resilience conceptualization and strategies
• Self-care conceptualization and strategies
Shaktis and Vicarious Trauma

- Shaktis’ journal contents suggest risks for vicarious traumatization, secondary trauma, compassion fatigue, or traumatic countertransference (e.g., the blurring of survivor-provider boundaries). Journal contents also suggest protective factors of resilience, hopefulness, confidence, and advocacy to prevent these negative reactions.
Risks for Vicarious Trauma

- Responders, caregivers, as well as psychologists are not immune to trauma because
  - Setting boundaries and practicing healthy self-care do not come naturally for most mental health practitioners.
  - Bearing witness to an event, having to listen to explicit accounts of a traumatic event, repeatedly listening to trauma narratives, or even having explicit knowledge of an event have been shown to cause serious, prolonged anxiety in varying degrees.
Vicarious Trauma Symptoms

- Responding to a disaster can have effects on the body and mind
  - Physical effects
    - Lack of sleep, rush of stress hormones, somatic symptoms, fatigue, low energy
  - Psychological effects
    Negative cognitive appraisal
    - Overwhelmed, Helpless, Low Sense of Achievement, Negative Self-talk, Distrust
    Negative coping strategies
    - Avoidance of Stressful Situations, Aggression, Alcohol Abuse, Excitement-seeking
A Shakti’s Journal Excerpt: A Stress Response

- “I felt a profound nausea and sadness that is still with me as I write this. I felt and still feel like going somewhere and laying my head down because it seems almost too heavy to hold up. My heart aches with the knowledge that an entire city has been destroyed in a way that will take years to repair even part of the way.”
A Shakti’s Journal Excerpt: A Stress Response

• “During our “tour” of the lower 9th Ward, I found a fallen fence that held a bunch of silk flowers; it was the only color I saw there. At points I walked over people’s property, feeling like a trespasser, searching for anything that would reveal human life, but all I could find was rotted objects. It was surreal. I felt that I could not take it all in. I was angry that the clean-up was not done, that this neighborhood now looked like a junkyard, that the local government and federal government had not done their job.”
Stress Prevention in Disaster Response

• Not everyone who witnesses a traumatic event or participates in disaster response work will have vicarious traumatization.

• Factors related to positive coping in disaster response:
  - The presence of a supportive organizational environment
  - Personal meaning and satisfaction derived from disaster work (internal resilience resources)
  - Social and family support networks (external resilience resources)
  - Adequate training prior to disaster response work
Characteristics of Resilience

• Definition of Resilience
  • Effective coping and adaptation in the face of major life stress

• Assumptions of Resilience
  • There is an obstacle or traumatic event
  • Resources that are both internal and external are called upon when responding
Internal and External Resilience Factors

- Individual Characteristics, some examples:
  - Optimism, Intelligence, Humor, and Creativity
  - High levels of Self-esteem and Self-efficacy
  - Internal locus of control
  - Empathy (with detachment from personal distress)
  - Cognitive Hardiness
- Environmental Resources, some examples
  - Absence of additional life stressors
  - Strong social and family support network
  - Education, Employment, and Material Resources
  - Health and Property Insurance
Shaktis’ Journal Excerpts: Resilience Responses

• “I have since made it my ambition to place myself in linguistically vulnerable situations, whereby I might improve my Spanish speaking abilities. Admittedly, fumbling over words is humbling, but I openly recognize that much character growth occurs in moments of humility, vulnerability, and discomfort.”

• “I was extremely upset and I needed to unwind. I couldn’t sleep at all, and turned to humor as a coping aid. This was my first time doing any volunteer trip; I had never seen a disaster area. As much as I wanted to embrace every aspect of everyone’s story, I needed to take care of myself as well. My best advice for future volunteers is to always engage in some form of healthy self-care. A simple joke, smile, song, or call to a family member can easily help you out.”
A Shakti’s Journal Excerpt: A Resilience Response

- “Blair and I encourage this young woman to participate in strength building exercises. We emphasize her many positive qualities, attempt to empower her, and hope that after we leave, she will continue to be able do this for herself. During this visit she asks many insightful questions such as, “Why are you white and I am black?”, “Why do so many people in Africa have AIDS?” Blair and I were taken aback by her honesty, took a few moments, and did our absolute best to answer her questions. I will never forget this brave young woman and feel honored to have come across her path.”
A Shakti’s Journal Excerpt: A Resilience Response

- “I have learned so much from taking this trip, and feel fortunate to have done so. Yet, I still grapple with so many emotions that I’m still unsure about how I am going to deal with them in the next few days, What I do know is that I, as well as the rest of the Shakti team, plan on telling the real story to not only our families and friends, but the larger community, such as our school, local politicians, etc. And, I know that I have come back as a different person, looking at life in a different view, and not taking what I have for granted-appreciating my family, friends, and peers, the life that I lead. I just wish more people could go down and see for themselves the real story, the story that has not been fully told and to realize the life long experience of being in such a unique city that continues to remain optimistic and strong after such a disaster. I will surely never forget this trip nor the people I met.”
Outreach in the Gulf Coast

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Shakti’s Gulf Coast Efforts

- March 2006 - 6 months post-hurricane
  - New Orleans, Louisiana
  - Pass Christian, Mississippi
- August 2006 - 1 year post-hurricane
  - New Orleans, Louisiana
- 2008 - Self-care & resilience grant
  - Workshops for Mississippi first responders and caregivers
- January 2009 - Relationships continue
  - New Orleans, Louisiana
Shakti’s Outreach Process

- Preparation
- Providing Services
- Reflecting on the work
- Evaluating, Revising, Planning
Preparing for Gulf Coast

- Assessing community needs
- Applications for potential volunteers
- Assembling the team of volunteers
- Training volunteers
- Developing materials to meet needs
- Continued correspondence with stakeholders in the Gulf Coast
Volunteer outreach services

- March 2006
  - Clean-up efforts
  - Women’s shelter
  - Hotel staff
- August 2006
  - School supply drive
  - Support for Nelson Charter Middle School
  - Hotel staff
Gulf Coast - March 2006
March 2006 Reflection

“The sky was ominously black, a reminder of what had happened to this community. When we first exited the van, my sights were set on work trucks in front of us. I walked toward them with an eerie feeling that something was not right, and in fact what I saw made me even more numb. The work trucks were actually cadaver dog teams searching for human remains. From that point on I was not sure what to think as I passed by debris. How could people still not be accounted for?”
New Orleans
August 2006
Gulf Coast - August 2006
Gulf Coast - August 2006
Gulf Coast - August 2006
Self-care & Resilience Grant

- 2008, Dr. Roysircar awarded 1-year grant to develop and conduct workshops for Hurricane Katrina first responders and caregivers
- Grant awarded by the Foundation of the Mid South in partnership with the American Red Cross
- Workshop Objectives
  - Minimize psychological effects of witnessing others’ trauma narratives, thereby minimizing burnout & compassion fatigue
  - Maximize potential for ongoing self-maintenance of physical, psychological, and spiritual health
  - Maximize positive self-perceptions of resilience
  - Maximize the multicultural applicability of training
Future Directions

- Return to New Orleans in 2009
- Follow-up support for hotel staff
- Continued refinement to outreach work
- Volunteer work in Africa…
Disaster Recovery SHAKTI Outreach in South Africa and Botswana 6/18/08-7/5/08

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**Shakti’s Partnerships for South Africa Outreach**

Antioch University New England's (ANE) Multicultural Center partnered with the University of Florida Counselor Education Department, University of Florida Center for African Studies, and the University of Botswana to implement a South Africa and Botswana community outreach (June 16-July 7) and a one-day conference in Johannesburg (title: *Extending Advocacy, Global Outreach, Critical Consciousness, and Praxis*). This became a national outreach team because we were also joined by faculty and mental health professionals from the University of Missouri-St. Louis, Mississippi State University, and Governor’s State University, Chicago, as well as a retired fire fighter from New York City, who was a 9/11 first responder in NYC.
Through their 21-day outreach in Southern Africa, Disaster Shakti members began to unpack the sociopolitical history that underlies South Africa’s forgiveness of apartheid and its people’s resilience and fortitude to bring relief to poverty and to HIV/AIDS-infected and -affected mothers and children.
Tim Gillespie, Gargi Roysircar, and Amanda Blanchard of Disaster Shakti with Mr. Sparks, our tour guide, who was an African Nationalist and imprisoned in Robben Island along with Nelson Mandela. Our sociopolitical education in the history of apartheid reinforced our advocacy for community outreach in South Africa.
Our trip began in Cape Town where we came in direct connection with South Africa’s beautiful landscape and painful past and present. In Cape Town, we spent time with the Philani Nutrition Project, a women’s empowerment group and its day care center. In Soweto, at the Care Project, we trained volunteers involved in community work with children and also provided emotional and psychosocial support to orphans. Again in Soweto, we interacted with community counselors and social workers at an outreach post of the Parents and Children’s Counselling Center. In Cape Town and Johannesburg, we engaged in dialogues with university health officials about the HIV/AIDS pandemic and the educators’ impressive efforts to provide resources and support for college students.
June 19th, Philani Nutrition Project. The Director of Philani and a colleague are introducing us to the empowerment activities set up for women.
Philani Nutrition Project crèche for infants 2 - 4 years of age
HIV/AIDS public health announcement on a wall in a Soweto township served by community counselors from the Parents and Children’s Counselling Centre.
In Gabarone, Botswana, Disaster Shakti did outreach in a crisis center, called the Life Line Ekuphileni Counselling Center, a women’s shelter, and in elementary, middle, and high schools. At the University of Botswana, they formed lasting relationships with faculty, students, librarians, and counseling center professionals.
The townships consist of rows of tin-roofed shacks and outhouses, very cold in the winter and very hot in the summer, with no city-distributed electricity. Here Black South Africans were moved to from Cape Town during apartheid and where they continue to live. The township dwellers have ingeniously pulled into their homes pirated electric lines. However, when one of these unauthorized lines catches fire, fifty or so shacks are burned down immediately. The townships are located in the city’s outskirts and some touch the borders of lush golf courses of private golf clubs. The third world meets the first world in improbable ways.
“...I am extremely impressed with how HIV/AIDS prevention and treatment programming is widespread, openly talked about, and announced in public billboards and building walls in urban slums. I have not seen such public acknowledgment of HIV/AIDS in the United States. While the South African government offers some financial support, most of the HIV/AIDS work is being conducted by non-profit or religious organizations, including Catholic as well as Jewish charities. The community counselors told me that they need sturdy shoes to do their door-to-door HIV/AIDS counseling services in the townships. On paper they mapped with pen and ink their foot sizes, which I am taking back to Antioch. I will do fund-raising to send sneakers to the counselors and, hopefully, also a check to the Centre, so that shoes can be bought for the township children that the Centre serves....”
June 19th, Soweto Township or squatter shacks where Black South Africans live. We served at the Parents’ and Children’s Counselling Centre outpost in a Soweto township.
June 27th Disaster Shakti Outreach in Johannesburg
Timothy Gillespie - student volunteer journal entry excerpt

We had the opportunity to spend two days at Sithand’izingane Care Project which provides services to the Black townships of Tsakane, Geluksdal, and Langaville. The project provides many services to these communities, including a drop-in center for HIV/AIDS-infected children and mothers, orphan aftercare, a feeding program, and sewing, beadwork, and literacy classes for HIV/AIDS-infected mothers and young adults. Sister Mary, our contact at the Care Project, had requested that part of our cultural exchange include providing some training for the professionals and paraprofessionals working at the site. After meeting with the whole group of care providers (approx. 35 workers), our team divided to meet the discrete needs of the professionals and paraprofessionals.
As an ice breaker, we offered a song we felt had some symbolism in the moment—“Lean on Me.” In admittedly dubious pitches we began only to be joined by nearly every person from the project. The paraprofessionals, in turn, offered us a song (and dance) in exchange. Their song was sung in Zulu and carried the message that “we open the gates and welcome you in.” Our team was then invited and to some degree we succeeded to learn a part of their song. A second Zulu song, “I will never give up” was then sung by the whole group. This song would be repeated many times throughout our time for the outreach service and it became a salient theme.
Much laughter and rejoicing followed our singing, testifying to the rapport that had so quickly been established. Consistent with our culturally sensitive approach, our team then sought to learn more about the paraprofessionals’ experiences, perceptions, and needs. What followed was story after story of paths of pain and suffering that had led these individuals to the sanctuary that was this place we were in. The evolution of this process lead to the description, many times over, of the space that we had collectively created as “holy ground.” The natural progression of our work led us to the topic of self-care and our outreach team members led psychoeducational and experiential exercises in diaphragmatic breathing and progressive muscle relaxation.
Our second day with the paraprofessionals opened in a similar fashion to how we had ended, with “I will never give up” spontaneously being sung. In response to the paraprofessional’s requests, our second day was focused on specific interventions that they could use with the children they work with.
June 27th, in Soweto, orphaned children at the Care Project, whose paraprofessionals, called community counselors, we trained for two days.
June 27th Disaster Shakti Outreach in Johannesburg
Timothy Gillespie - journal entry excerpt continued

Our team provided a strength based series of experiential exercises focusing on bolstering feelings of self-worth (through drawings, e.g., the morning sun), utilizing narratives to reframe and restory trauma laden histories as a vehicle for fostering hope and possibility; and interpreting proverbs. Consistent with the previous day, our experience was a true exchange as the paraprofessionals engaged in the exercises offering their own sources of strength, stories, and interpretations. The day ended with a ritual closing in the form of a communal scarf dance and meal.
June 27th Disaster Shakti Outreach in Johannesburg
Timothy Gillespie-student volunteer journal entry excerpt continued

These two days at Sithand’izingane contained some of the most personally impacting moments for me since our arrival in South Africa. The warmth and strength exuded during our time there has truly transformed and heightened my appreciation for the human capacity for resilience and connection. For me this was a place of healing achieved through human relationships and I felt honored to have been invited to participate in this very thing on what I truly experienced as holy ground.
I attended Marang Junior Secondary school in Gaborone, Botswana, today. I was amazed by the overwhelming duties of one guidance counselor. She was responsible for the physical and mental health of over eight hundred students. Mrs. Reginah Gaorengwe counsels students upon requests from teachers, makes referrals to outside agencies, and even serves as acting school nurse. Using an office the size of a small closet, here she conducts her work.
July 4th Gabarone, Botswana
Amanda Blanchard–student journal entry excerpt continued

I and Blair chose to spend the day at this school. We began the day by having a three-hour session with a girl who is HIV positive and is extremely neglected by her caregivers. Both parents have passed away, and her maternal uncle has assumed the responsibility of raising her. She is given her ARV’s at 5 a.m. and then gets violently ill, as she does not have adequate food in her system. Mrs. Gaorengwe is very concerned about this child, but also feels uneasy about making waves contacting the uncle. This girl is very small for her age, and developmentally looks about eight years younger than she really is. She speaks English as a second language, so I feel that some of our work is lost in translation.
Later in the afternoon I met with another girl who had lost her mother earlier in the week and now had the sole responsibility of raising her younger siblings. This girl was rather withdrawn and did not engage. She was able to draw us a picture of what her dream would look like if it came true. She drew a picture of herself in a nurse’s uniform graduating from college.
A poster on Mrs. Gaorengwe’s office captured my eye. It read as follows:

**Aims and Objectives of the Guidance & Counseling Department**

- We exist to bring reality to the young people by providing information on life skills.
- By sensitizing our pupils on HIV/AIDS issues, we spread the AIDS message.
- What is the point of our students doing well in Math and Science if they die of AIDS a few years later because of ignorance?
- AIDS is a killer, it’s a fact!
Sithand’izingane Orphanage

eric's africa pics 612.AVI
Project Preparation and Implementation: Partnership with the People of Villahermosa, Tabasco, Mexico

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Choosing a Destination

- Initially, Shaktis had discussed a 2008 trip to the Yucatan Peninsula in Mexico.
- Hurricane Dean had devastated this part of Mexico in early 2007.
- Flooding took place in November ’07 in Villahermosa, Mexico.
- Thousands of people were displaced from their homes.
- Through discussion, Shakti concluded that there was a more pressing need for outreach in Villahermosa.
Planning For The Trip

- Setting the dates for the trip
- Figuring out the best travel plan
- Researching the estimated cost of the trip
  - Trying to keep expenses low
  - A cost estimate was crucial so that participants could commit their time and money to the project.
    - Plane tickets
    - Hotel expenses
    - Translation services
    - Transportation costs
    - Cultural immersion activity expenses
    - Vaccines
    - The estimated cost of food
Working as a Team

- **Collaboration takes time but is vital!**
- One person cannot do all the planning alone.
  - However, there is one point person who coordinates and is accountable so that things don’t fall through the cracks.
    - A paid research assistant is beneficial.
      - Expect to devote at least 8 hours a week for about 6 months.
      - Time for planning and coordinating by all volunteers is necessary.
- Training together as a team.
- **ACCEPTING THAT MANY ASPECTS OF THE TRIP CANNOT BE PLANNED** (Flexibility and openness for the unexpected)
  - Fate seems to help all Shakti teams have a successful trip.
- Completing research surveys and process notes.
Other Important Tasks

- Reviewing literature on working with the Mexican culture and flood victims
- Connecting with stakeholders despite a language barrier
- Having a safety plan
- Researching possible tourist and cultural immersion activities
- Collecting donations in our communities and at Antioch.
  - Collaborating on how donations will get to the outreach settings
- Having an appropriate application form
- Booking the airplane tickets and hotel
- Creating a team directory, trip itinerary, helpful contact list, and a list of necessary items to bring and vaccines
- Internet outreach and updated information
- A CHECKLIST IS CRUCIAL!!!!
Disaster Shakti in Tabasco, Mexico
A Tripartite Intervention Model for Disaster Relief Work

- **Level 1: Bolstering the Community’s Hopefulness and Resilience**
  - Facilitated by Professor Martin Aguilar of the University of Juarez, Tabasco, we were invited for an on-air interview at a popular radio station in Villahermosa.
  - The radio hosts asked some provocative questions.
    - Mostly, they were curious to know what Villahermosa’s quick recovery says about its citizens.
  - Through this on-air interview, Shakti members were able to share with hundreds of listeners their observations of the strength, perseverance, and resilience of the people of Villahermosa.
  - Further, we discussed how cultural and political contexts lead societies to respond differently to disasters.
    - Villahermosa’s quick recovery may be related to the cohesive, collaborative, and hopeful nature of their local culture.
Level I: Bolstering Community Level Hope and Resilience
A Tripartite Intervention Model for Disaster Relief Work

- **Level 2: Aligning with Governmental Officials and Relief Workers in Their Efforts to Care for the People of Tabasco**
  - Our first day in Villahermosa began with a breakfast meeting with a powerful political leader, Mrs. Gloria Herrera de la Cerna, the president of one of the most influential political parties within the state of Tabasco (The National Organization of Women).
    - She invited Dr. Roysircar and Disaster Shakti to offer a lecture on self-care at the official meeting of the National Organization of Women. There were over 100 citizens and politicians at this meeting, each longing for strategies to cope with the aftermath of disaster.
  - Later in the week, Dr. Roysircar offered a more elaborate lecture on self-care and resilience to human service providers.
    - The workshop participants (about 75 individuals) were comprised mostly of emergency room doctors, EMT’s, rehabilitation specialists, social workers, psychologists, nurses, experienced volunteers, and university faculty.
Level 2: Empowering Governmental Officials and Relief Workers
Level 2: Empowering Governmental Officials and Relief Workers
A Tripartite Intervention Model for Disaster Relief Work

- Level 3: Empowering the Next Generation of Villahermosa
  - In total, Disaster Shakti members offered brief, supportive services to over 200 children and adolescents in Villahermosa.
  - For two full days, Shakti members met with large groups of middle school children.
    - The children participated in group activities designed to instill hope and a sense of achievement in the face of disaster.
  - Shakti members also visited two local orphanages.
    - We brought both orphanages a host of supplies donated by supporters of Disaster Shakti.
    - For an entire day, we offered stimulating activities that fostered creativity, positive peer interactions, and hope.
Level 3: Empowering the Next Generation
Level 3: Empowering the Next Generation
Linguistic Competence

- Importance of access to a bilingual speaker(s)
  - Cultural consultant
  - Role of translators
Challenges of Translation

• Bilinguals vs Professional Translators
  – Working relationships
  – Experience
  – Compensatory arrangements/understandings
• Conversationally fluency vs Professionally fluency
• Regional cultural and linguistic nuances
Importance of Connecting with Community Stakeholders

- Acknowledging community members as the “experts”
- Empowering the community from within
- Greater sense of teamwork
Summer 2008 Mexico Outreach

- Universidad Juarez Autonoma de Tabasco
  - Professor Martin Antonio Aguilar
- Friends, family, colleagues
  - Well connected and involved community members
Conclusion with Brief Research Findings
Dr. Gargi Roysircar
Presentations by:
Nathaniel Thorn, PsyD ‘12
Sheeba Thomas, PsyD ‘14
Self-Care Training

- Learn the role clients' traumatic stories play on the caregiver who bears witness to such stories
  - Recognize signs of compassion fatigue, vicarious traumatization, and burnout
- The multidimensionality of self-care
  - Emotional well-being
  - Physical well-being
  - Intellectual well-being
  - Spiritual and Religious well-being
  - Moral and Ethical well-being
  - Social well-being
  - Relational and Family well-being
  - Safety, Security, and Preparedness
The self-care training involves self-assessment, which has three research goals:

- Identifying specific self-care practices that make disaster responders resilient
- Developing self-awareness of positive personal characteristics
- Learning multicultural-social justice practice
Research on Resilience and Self-Care of Disaster Shakti Volunteers

- Participants
  - Shaktis consisted of students in an APA-accredited doctoral program in clinical psychology as well as two doctoral-level female professionals.
  - Shaktis ($n=16$) were matched with students ($n=16$) from the same program who did not join the Shaktis.
  - Shaktis and non-volunteers were matched on age, sex, education, class, and self-reported race, ethnicity, or national origin.
  - Shaktis received training in self-care and resilience, whereas non-volunteers did not.
Research on Disaster Shakti Volunteers

- Instruments Measuring Internal Characteristics (only select subscales)
  - Cross-Cultural Adaptability Inventory
  - Maslach Burnout Inventory-Human Services Survey
  - Coping Resources Inventory
  - Multicultural Counseling Inventory
  - Attribution Style Questionnaire
  - Interpersonal Reactivity Index
  - State Hope Scale
  - Multicultural Social Desirability Scale
Research on Disaster Shakti Volunteers

- Procedures
  - Shaktis and non-volunteers both received four packets of self-assessment measures. The measures were administered to both groups at four times:
    - Prior to the trip
    - Halfway point of the trip
    - Conclusion of the trip
    - One month after the trip
Results

- Group profiles were created for Shaktis versus non-volunteers on subscales of interest to the study.
- Similar multicultural social desirability scores were observed in both groups and suggested normal levels of defensive responses.
- Significant difference ($p < .05$) was found for all measurements, as hypothesized. The directionality in Empathic Concern (see Fig 6) for the two groups was unexpected, with Shaktis scoring lower than non-volunteers.
Profiles for Shaktis Versus Non-volunteers

Figure 1:
CCAI – Emotional Resilience

Figure 2:
MBI-HSS – Emotional Exhaustion Subscale
Profiles for Shaktis Versus Non-volunteers

Figure 3: MBI-HSS - Personal Accomplishment Subscale

Figure 4: MCI-Multicultural Awareness and Relationship
Profiles for Shaktis Versus Non-volunteers

Figure 5: Attribution Style Questionnaire-Positive Attributions

Figure 6: Interpersonal Reactivity Inventory-Empathic Concern
Profiles for Shaktis Versus Non-volunteers

Figure 7: CRI – Spiritual and Religious Beliefs

Figure 8: State Hope Scale
Study Implications

- Information on the welfare of relief workers is useful for grassroots volunteer and organized relief agencies that offer services for disasters.
- Only healthy responders can provide effective relief services. Effective self-care and resilience practices can ensure that responders provide competent services.
- There is a paucity of research on self-care and resilience in disaster responders. Given the stressors of disaster response, the ongoing self-care and resilience assessments of Disaster Shakti volunteers can provide response agencies with strategies for ensuring the health of responders and caregivers.
Study Implications

• Assessing the increased, decreased, or sustained well-being of Disaster Shakti volunteers provided information to conceptualize disaster responders’ self-care and resilience practices and to develop a psychoeducational training model for responders. This training model, being presented currently to Mississippi first responders, is funded by a 2008 grant from the Foundation of the Mid South in partnership with the American Red Cross Hurricane Recovery Program.
Disaster Shakti Wins Award

- 2006 United States President's Higher Education Community Service Honor Roll with Distinction for Hurricane Relief Services

- 2008 Nominated for the same
References for Training

