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SCIENCE AND ARTS FOUNDATION (SAF)

Final report

PSYCHOSOCIAL INTERVENTION IN SCHOOLS

PSYCHOLOGICAL REHABILITATION PROGRAMME FOR BAM TEACHERS

Introduction:

In the aftermath of the tragic Bam earthquake, the Science and Arts Foundation planned and implemented a number of programmes aimed at the psychosocial rehabilitation of children in Bam (see <http://bam.schoolnet.ir>). Dr. Kamran Saedi, a consultant child and adolescent psychiatrist based in London, made a fact finding trip to Bam on behalf of SAF in February / March 2004, and participated in the Ministry of Health (MoH) mental health screening and intervention programmes, including the psychosocial workshops for teachers, funded by UNICEF. During this and a subsequent visit to Bam in October / November 2004, it became clear that while teachers had to provide schooling as a consistent environment for children, they themselves were traumatised and unable to deal effectively with the demands of their work.

As a result, a project was planned in order to address the needs of the teachers themselves and to support their efforts to help children with their traumatisation. The project was supported by SAF and funded by CISCO and World Vision.

Original proposal:

Following a fact finding trip to Bam in February / March 2004, a proposal was made to SAF and funding was subsequently obtained.

The proposed plan aimed:

- To enhance teachers' skills in psychosocial intervention in schools.
- To address teachers' own traumatic experiences.
- To provide support and advocacy for teachers within the Ministry of Education (MoE).

The proposal was based on the assumption that it would be difficult for teachers to accept trauma counselling directly, as they were not asking for such intervention. It was proposed to offer a programme that supported psychosocial intervention in schools but included topics that enabled teachers to address their own traumatisation.

In September, two meetings were held with colleagues from the Royal College of Psychiatrists' Overseas Group in London to discuss the proposed plan. The general view was that it would be difficult to be clear about the needs of Bam teachers, given the time lapse between the fact finding trip in February / March and obtaining the funds for the project.

Modified proposal:

In October / November 2004, Dr Saedi made further fact-finding trips to Bam. It became clear that a large number of teachers continued to suffer from anxiety and fear, sleep disturbances and poor concentration, which interfered with their work. Grieving their families lost in the earthquake, and preoccupation with the scenes of the disaster were still experienced by many. Their psychological plight was compounded by considerable social and economic problems e.g. overcrowded housing in temporary prefabricated rooms, financial hardship and lack of hope for a stable existence within a foreseeable future. Approximately 1,800 teachers have survived the earthquake and they must work extra shifts to teach more children in temporary classrooms while school reconstructions are in progress. A large number of teachers expressed a wish to receive help, and volunteered to join therapeutic groups.

Following these findings, it became clear that the teachers needed and were seeking help to deal with their own traumatisation. Therefore, the following changes were made to the original proposal in order to accommodate the above findings:

1. A programme of counselling using group intervention methods was specifically designed for Bam teachers.
2. Two facilitators were allocated to each group (instead of one) to enhance the quality of intervention and deal more effectively with teachers' mental health problems.
3. As a result, there was a quantitative change in the number of counselling groups, covering a total of 250 teachers instead of 500 originally proposed.

Implementation:

During the visit in November 2004, twenty schools (primary, guidance, secondary and pre-university) were visited and meetings held with teachers during extended break times to explain the aims of the project. A group session on impact of the disaster was held with the teachers in each school, and issues raised in these meetings were recorded. The original proposal was modified to take into account the new information, and was operationalised for implementation. Those opting to join the groups were enlisted for therapeutic intervention.

Negotiations took place with the MoE to ensure that the attendance of group counselling sessions be counted as continuation of service. The list of volunteered teachers was then passed on to the MoE for official assignment to the project. An official permit was issued to carry out the programme in schools within a specified time. Negotiations also took place with the MoH to recognise the training programme as Continuing Professional Development (CPD). A Memorandum of Understanding (MOU) was drawn up between the MoH and SAF, which allowed for close collaboration between the two mental health programmes.

The project was organised as follows:

- Phase one: recruitment and training of mental health professionals.
- Phase two: group counselling of selected teachers.
- Phase three: setting up of a school support network for Bam teachers

Phase One:

An advertisement was sent to Mental Health Departments of various universities and an announcement was made at the Annual Symposium of Iranian Psychiatric Association, 22nd – 25th November 2004.

40 Mental Health Professionals (MHPs) responded to the advertisement, none from the province of Kerman, as it had been hoped. Some of the MHPs who had worked with the MoH psychosocial interventions in Bam during the visit in February / March 2004 were also asked to apply.

23 were short listed and interviewed, using a set of standard questions. A total of 10 MHPs (3 qualified psychiatrists, 2 psychiatrists in training, 2 social workers, 2 clinical psychologists and 1 general psychologist) were appointed. A counsellor was also appointed to act as the project coordinator.

A training team was established in Tehran, consisting of Dr Lynette Rentoul, Consultant Clinical Psychologist (UK), Dr Shiva Dolatabadi, Consultant General Psychologist (Iran) and Dr Saedi. One of the MHPs, Dr Kamal Maxoodi, also contributed to the training programme. A participatory approach was adopted by inviting all the MHPs to offer their experiences during the training.

The training programme on both the impact of disaster and group work started on the 27th November and was completed on 2nd December 2004. This was based on findings from the school visits made during the fact finding trips. The first day was allocated to knowledge-based presentations on psychiatric morbidity, disaster

work, and group intervention. Day two to five were aimed at skills development on these topics. It was highly participatory, involving MHPs in running practice groups.

At the end of the training, the nationally approved evaluation forms were used to obtain feedback from the MHPs.

Phase Two:

The teachers who had enrolled for the programme were divided into twenty groups of up to 13 members. Each group was offered three hours of group counselling per day, five days per week, over a two week period, totalling thirty hours of face-to-face contact. Due to the teachers' work commitment, the groups were run daily from 2 – 5 and from 5 – 8 pm. One half of the groups were held from 4th to 15th December 2004; the other half from 18th December 2004 to 2nd January 2005, with a break of four days coinciding with the first anniversary of the disaster.

It had originally been planned to offer places to 250 teachers in twenty groups. In practice, only 222 teachers could be included in the programme and 170 actually attended the group sessions. The timing of group sessions created a major inconvenience for some teachers due to family commitments, especially for the groups that took place in the evening. Therefore, two groups had to be amalgamated and one cancelled, and only 17 groups were established consisting of 6 to 13 members.

The teachers in one of the groups did not wish to attend before the end of anniversary ceremonies but insisted on attending the remaining

sessions. Hence, they were offered a modified programme for one week only (five days), and were not included in the evaluation.

Baseline assessments: General Health Questionnaire (GHQ 28 questions – Goldberg 1972), Beck's Depression Inventory (BDI – Beck 1967) and Post Traumatic Stress Disorder Interview Schedule (PTSD – Watson 1991), all available in Farsi, were administered during the first group session. Impact of Events Scale (IES – Horowitz 1979) was added to the questionnaires for the second set of groups (18th December 2004 – 2nd January 2005).

Post-intervention assessments: BDI, PTSD, IES questionnaires and a 5-point self-administered Improvement Scale were administered during the last session. The 5-point Improvement Scale was also rated independently for each participant by the MHPs.

Ten participants who showed high scores on baseline questionnaires were interviewed and assessed by one of the MHP psychiatrists who completed the above questionnaires, for comparison with the self-rated questionnaires.

Both the questionnaires and clinical observations during group sessions were used to assess the degree of psychological disturbance, and to recommend appropriate intervention including medication if indicated. At the end of the programme, those needing further psychiatric attention and follow-up were referred to the Mental Health Team of the MoH.

Information on participants and groups:

Group No.	Gender	School Name	School Type	Enrolled No.	Attended No.
Group 1	F	Shahed / St Fatemeh for Girls	Secondary / Pre-university	12	11
Group 2	F			12	9
Group 3	F			13	11
Group 4*	F			12	10
Group 5	F	Shahed for Girls	Guidance	10	11
Group 6	F	St Zeinab for Girls	Secondary	14	9
Group 7	F			13	6
Group 8	F	Shahid Khajeh for Girls	Guidance	13	9
Group 9	F	12 th Farvardin for Girls	Guidance	12	12
Group 10	F	Hakim Farabi for Girls	Guidance	12	13
Group 11	F	Ohod & Foroumand for Boys; Sajadieh for Girls,	Primary	11	8
Group 12*	F	17 th Shahrivar for Girls	Secondary	12	2
Group 13	F			13	8
Group 14	F	Enghelab Islami for Girls	Primary	11	10
Group 15	M	Ohod & Foroumand for Boys	Primary	9	8
Group 16	F	Hakim Farabi & Mahdieh for Girls	Guidance & Secondary	13	12
Group 17	M	Salman Farsi for Boys	Guidance	11	11
Group 18	M			10	
Group 19**	M	Sheikh Sadough	guidance	9	10

* Groups 4 & 12 were amalgamated after session 2, due to the low number of attendances.

** Group 19 was offered one week group intervention, and was not included in the evaluation.

The first two days of group counselling course focused on group formation and cohesion, and the last two days on resilience building and closure. The other sessions were allocated to disaster work. Therapeutic activities included Engagement, Brainstorming, Psycho-education, Coping skills, Exposure, Cognitive restructuring techniques e.g. 'Best friend' and Trauma narratives, Relaxation, Breathing retraining, Resilience building and Closure. Handouts and diaries were provided, and homework assignments were used to facilitate therapeutic work.

The MHPs recorded an account of each group session, which they presented daily during two-hour supervision sessions. The progress in group work was discussed and difficulties were addressed. All discussions in supervision sessions were also recorded.

Phase Three:

The aim of this phase is to utilize Phase Two of the programme:

- To provide continued psychological advice and support for the teachers who participated in the project.
- To help teachers manage stress, related to both the disaster and the demands in their workplace.
- To encourage teachers to create a supportive environment that promotes the wellbeing of staff and pupils.

The possibility of self-help groups with a view to developing school support network was discussed with the teachers in each group, as part of resilience building exercises prior to the group ending. A number of teachers were identified by the MHPs as having the qualities required to facilitate the process: knowledge about the impact of

disaster on general functioning; an understanding of the methods employed during the group sessions to enhance coping skills and resilience building; familiarity with the education system in Bam; wanting to help others; etc.

An informal meeting was arranged with selected teachers from two schools, Shahed / St Fatemeh and Sajadieh. Following the success of the Phase Two, the teachers themselves had planned to set up support groups in their respective schools. Therefore they welcomed the proposal for Phase Three and further support from SAF.

A preliminary discussion with the Department of Education in Bam did not result in the MOU necessary to carry out the Phase Three in the participating schools. However, it was agreed that a fresh proposal be put forward for approval by the MoE in order to allow SAF to assist teachers in the formation of a self-help organization.

Results:

The data entry for Phase Two has been completed and Dr Patrick Smith, Research Psychologist at the Institute of Psychiatry, London, has kindly agreed to carry out the analysis of the data. Preliminary results showed clinically as well as statistically significant improvement on measures for depression and general health. There was a reduction in PTSD symptoms but this did not reach statistical significance. Dr Saedi is planning to visit Bam in March / April 2005 to assess the effect of the intervention three months after the completion of the programme. A more detailed analysis of these data as well as the qualitative data collected on the nature and effect of therapeutic tasks in each group will be carried out and used for planning future interventions.

Verbal feedback from the teachers themselves was encouraging. A 5-point self-administered Improvement Scale showed equally encouraging results: 97 % of teachers scored 3 or above (1 = no improvement; 5 = great improvement). The level of improvement assessed by the MHPs using the same scale was lower, 75% scoring 3 or above.

The intensity of the programme required high level of commitment on the part of the teachers and meant that not everyone was able to participate when selected. For those teachers who attended the group sessions, the intervention helped create group cohesion, marked by extremely low level of dropouts.

With regards to the training programme, the MHPs' feed-back showed almost unanimous agreement (125 'agreed' or 'strongly agreed' responses and 5 'disagreed' responses) on measures relating to relevance and quality of the teaching materials and methods.

The MHPs (without the trainers being present) met with Professor Edalat in Tehran after returning from Bam. Their feedback on the project was as follows:

- *"The group therapy training and the group experience itself were both very rewarding, and several went as far as saying that these were the most fruitful experiences of their professional career and their personal life.*
- *The project has greatly helped the teachers including those teachers who had been skeptical in the beginning.*

- *The MHPs' views on how vital psychological rehabilitation is for the teachers (and people generally) in Bam, given their other needs such as housing, sanitation, etc, assessed on a scale of 1 to 10 (1=very vital need, 10=least vital need), was between 2 and 3".*

Conclusion:

The Phase Two was considered a pilot project. When the evaluation is complete, it will become apparent whether this new approach, combining group therapeutic techniques and disaster work, is an effective method of intervention and worth pursuing. If the results are positive, there is scope for improving the methodology and cost effectiveness with a view to carrying out a programme for all teachers in Bam.

The longer-term objective of Phase Three, the school support network, is to promote emotional literacy, through which both teachers and pupils can develop self-awareness, manage their emotions more effectively, empathise with others and establish positive relationships. The planning for Phase Three has been delayed, as it was not possible to negotiate a satisfactory agreement for the continuation of the project beyond the termination of the official permit. However, the Department of Education in Bam has agreed to consider a further application by SAF for extending its work with teachers.

Future considerations:

At the end of Phase Two, there was continued demand for extending the project and more teachers wished to participate. Further funding will enable SAF to extend the project in order:

- To offer this vital disaster work to all teachers in Bam.
- To establish a school support network for teachers to cope with the impact of their own and their pupils' traumatisation.
- To develop emotional literacy in schools to enhance coping, learning and positive relationships.
- To explore the possibility of SAF establishing a support service for psychosocial interventions; this sustains the above goals in Bam and can be extended to other parts of the country.

Kamran Saedi MD, FRCPsych

Consultant Child & Adolescent Psychiatrist (UK)

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List of Appendices:

1. MOU with MOH
2. Advertisement
3. Interview Questions
4. MHPs List
5. Training Programme Timetable
6. Evaluation Forms 1 & 2
7. Mental Health Questionnaires
8. Handouts & Home Assignments