

# Chernobyl Humanitarian Assistance and Rehabilitation Programme (CHARP) psychosocial support service

## Contact information

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## Background/history

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In April 1986, the fourth reactor of the Chernobyl Nuclear Power Plant in Ukraine exploded, producing the world's worst nuclear accident and contaminating huge areas in what is now Belarus, Ukraine and the Russian Federation.

The consequences of the Chernobyl catastrophe affected more than 4 million people. Many are still traumatized by the stressful events following the disaster. Although some 400,000 people have been relocated, many still live in the zone contaminated with radio nuclides in areas with a high radiation level.

The breakdown of the former Soviet Union caused a further deterioration of living standards and a reduction in health and social welfare programmes. Because of the scarcity of resources, initial interventions were confined to the provision of basic medical care and rehabilitation, and psychological needs were neglected.

The absence of well-functioning basic health services, forced displacement or relocation and the perceived threat of radioactive contamination are among the psychological problems faced by the region's inhabitants. Other problems frequently encountered include depression, hopelessness, anxiety, lack of self confidence, social and psychological apathy, mistrust in communities, indifference to the danger of radiation and other risk behaviour.

The National Societies of the three affected republics requested assistance and, in January 1990, an initial needs-assessment mission recommended that a psychological support module be included in the assistance programme to the affected communities. At that time, however, the programme could not be implemented because of both the need for more accurate information on the actual effects of health and the lack of adequate resources. In February 1996, the second external evaluation mission highlighted mental health needs as a priority. Although there were very few real psychiatric illnesses, including post-traumatic stress disorder (PTSD), the people interviewed had repeatedly expressed their anxiety about their health and that of their children, and complained of many physical aches and pains.

The Chernobyl Humanitarian Assistance and Rehabilitation Programme (CHARP) was launched in 1990. Six mobile diagnostic laboratories, CHARP's operational core, work in remote areas affected by the Chernobyl disaster in Belarus, Ukraine and Russia. In 1997, a psychosocial support service (PSS) was included in the programme and, since 1999, in other programmes run by these National Societies (for example, the visiting nurses and population movement programmes).

## Objectives

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- To decrease stress and stress-related diseases in the affected populations.
- To restore the communities' self-confidence.
- To build the capacity of the National Societies of Belarus, the Russian Federation and Ukraine to respond to the psychosocial needs of their populations.
- To train Red Cross staff and volunteers in psychological support.
- To organize psychological services in the affected communities.
- To teach the affected people self-help techniques in stress management.
- To collect and distribute reliable, clear information on the consequences of the Chernobyl disaster.
- To organize regular supervision and guidance on PSS for Red Cross staff.
- To incorporate PSS in the local programmes run by other National Societies.

## Brief description of activities

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More than 14 years after the Chernobyl disaster, people are still affected by its consequences. Psychological support and reliable information on the effects of radiation help the region's inhabitants to reduce their anxiety and to cope with stress.

Trained Red Cross staff and volunteers work at the community level to raise the population's awareness and understanding of the causes of stress and mental trauma and to help communities to overcome them. The programme also uses local community doctors, teachers and social workers to disseminate as widely as possible information on psychosocial support and radiation.

In all, the programme involves more than 200 Red Cross staff and volunteers, who work in the visiting nurses and mobile diagnostic laboratory (MDL) teams, at medico-social centres (run by local health authorities or the Red Cross) or in Red Cross city and district committees. At the local level, volunteers trained in psychological support help integrate the programme in the communities. The National Societies' capacity to cope with the consequences of Chernobyl has improved in seven regions of the three countries.

About 200,000 people are targeted by the programme; priority is given to children and adolescents with pathologies induced by radiation; Chernobyl migrants; lonely, elderly people; and the unemployed.

From 1997 to 2000, according to CHARP's statistics, the 200 Red Cross staff and volunteers trained in psychosocial support assisted about 32,000 people living in contaminated areas of Belarus, Ukraine and the Russian Federation. Another 20,000 have been informed or educated on topics related to reducing stress and anxiety.

## Major elements of the programme

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- **To assist National Societies to provide the affected communities with psychosocial support.** A core group of trainers is set up who can then train their Red Cross co-workers and volunteers on how to respond to the psychological needs of the affected population. The second step involves holding one-day workshops to teach Red Cross staff, nurses and community social workers to use the psychological support tools available to them in their daily activities. This should enable them to provide adequate support to their target population.
- **To provide the affected population with psychosocial services.** Follow-up training is given to Red Cross staff and volunteers to help them develop PSS at Red Cross centres, MDLs, etc. With the necessary training equipment and materials, they will be able to improve the service given to communities, for example by setting up self-help groups. The programme also aims at better informing the local population about available PSS. Trained staff and volunteers contact the target population through Red Cross and ambulatory centres or visit people in their homes, and provide support through simple methods like active listening, conversation and presence. They also organize lectures, discussions and stress-management workshops, and distribute leaflets.
- **Monitoring and expanding psychosocial services.** The complexity and changeable nature of psychological conditions and the needs of the affected people means that helpers should be offered ongoing training in new psychological subjects. Monitoring is necessary to ensure that the training is appropriate and the support given to the local communities is adapted to their needs.

## Partnerships and alliances

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From the beginning, the International Federation Reference Centre for Psychological Support and the Danish Red Cross have supported the programme with funds and human resources. The German, Icelandic and the Netherlands Red Cross Societies funded psychological support services from 1997 to 1999, as did ECHO.

Training sessions organized by the United Nations' Chernobyl Programme (UNESCO-Chernobyl Project N 64) were held for Belarus Red Cross staff.

In Belarus, the Dutch foundation *Helpt Slachtoffers van Chernobyl Helpen* trained more than 100 local schoolteachers, psychologists and Red Cross workers in stress management.

## Monitoring and evaluation

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Experts from the International Federation and its Reference Centre have evaluated the programme.

In May 1998, an assessment mission re-examined the technical aspects of the psychosocial support service pilot project. The mission assessed the programme as sufficiently developed, and recommended that it be expanded to affected regions of Ukraine and the Russian Federation.

In January 1999, an evaluation was carried out by the International Federation. The results were generally positive. It concluded that the programme addresses real needs, has been able

to mobilize resources both inside and outside the National Society, and has initiated and developed new skills at community level.

## The future

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The future goal of the psychosocial support service is a geographical extension to the other affected regions of Belarus, Ukraine and the Russian Federation, as well as further development within the National Societies. The Red Cross Societies of Belarus and Ukraine drafted projects on PSS as separate programmes for the period 2001-2002. They plan to develop PSS for the population affected by natural and man-made disasters.

Incorporating PSS into other Red Cross programmes will continue by increasing the activities aimed at rehabilitating victims and preventing physical and mental disease.

## Lessons learned

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- Chernobyl. Within a few days in April 1986, the name of this small Ukrainian town became a synonym for a major catastrophe. More than 14 years later, it still inspires fear to many people. Not all the lessons have yet been learnt from Chernobyl, including its psychological consequences.
- Setting up a culturally acceptable programme was a major challenge. Mental health was associated with neuro-psychiatry and many people were afraid of anything beginning with “psy...”. The psychosocial support programme relies heavily on the community network and a few basic principles. Among these, the dissemination of clear, simple, consistent and easily understandable information to the community by a group of trained volunteers was the most important. Identification and training of these volunteers became the first task, with a view to creating a “critical mass” that could significantly influence other community members.
- In order to establish programme credibility, trustful relationships must be developed, the most important one being between beneficiaries and the people carrying out the programme. Staff and volunteers come from the affected communities themselves and therefore understand its objective of improving the situation of the local population. It is also important to develop links with the relevant international organizations to get recognition and support for the programme.
- Keeping abreast of and disseminating the most up-to-date information available has been of paramount importance since the beginning of the programme and remains important in the rehabilitation stage.
- Although the initial needs-assessment mission mentioned psychological needs as area of interest, the first psychosocial support pilot project started in Belarus only in February 1997. Four years on, the programme is facing several major challenges. To sustain it, both financial and human resources need to be assured. There are many demands from local communities and other affected countries to extend the programme. With sufficient resources, this would be possible.
- Psychological support programmes differ from material assistance in several ways. First, since they do not deliver goods, they have a much lower visibility. Second, their pace is much slower: they must organize the training of volunteers, strengthen local capacity and diffuse their message verbally. Therefore, it is of the utmost importance to get the full commitment of the organization’s senior management to ensure proper funding and long-term sustainability.<sup>1</sup>

<sup>1</sup> *Meeting Psychological Needs after Chernobyl, the Red Cross Experience*. Dr. Jean-Pierre Revel. Paper prepared for the conference, “Operational Impact of Psychological Casualties from Weapons of Mass Destruction”, Washington DC, USA, 25-27 July 2000.