

FIRST AID FOR THE SOUL

Emergency Pedagogy with psycho traumatized children in the earthquake zone in west Sumatra/Indonesia

On the 30th of September 2009 in the Indian Ocean near Indonesia, the earth shook. The earthquake registered 7,6 on the Richter scale and caused serious damage, mainly in the Indonesian province of West Sumatra. In the province's capital, Padang, roughly 50% of all houses were destroyed. According to official statistics, 1115 people lost their lives and 2200 were injured.

At a plea from the Indonesian department of health and with the support of the foreign office, the "Friends of Waldorf Education – Emergency Pedagogy" sent an eleven-man crisis intervention team into the catastrophe zone. The team, consisting of pedagogues, therapists, psychologists and a doctor, was to help psycho traumatized children to process their experiences, using the methods of Waldorf Education[1]. The locations allocated to our team by the disaster management in Padang and Agam were the mountain villages Sungghais Batang on the Maninjau volcanic lake and Malalak.

Psychological wounds can become infected

Psychological trauma causes psychological wounds. In the case of a physical wound, the boundary between an organism and the outer world is injured. A feeling of pain arises along with the desire to express this feeling. Then a scab forms and the organism produces new skin. After a certain period of time, the wound will usually have healed. A scar may remain. However, complications can arise in the healing process. Improper care of the wound can lead to an infection. In the worst case, this can end in a fatal blood poisoning. Psychological wounds are similar. With appropriate care the results of the trauma can be processed independently. It is, however, possible that complications - in the worst case of life threatening proportions – arise.

The development of psychological trauma

The concept of Emergency Pedagogy is based on the model of the typical development of a psycho trauma. The 1-2 day shock phase after a traumatic experience (e.g. an Earthquake) is followed by the post traumatic stress phase, which lasts several weeks. During this time an array of symptoms can appear: fears, nightmares, disturbed sleeping patterns, anger and aggression, sadness and depression, hyperactivity or paralysis, involuntary flashbacks and loss of memory, avoidance behavior, over-excitability, eating disorders, rhythmical disorders, self destructive and suicidal behavior, as well as psycho somatic reactions of all kinds. All these symptoms are the natural effects of unnatural events. The psycho trauma only becomes a sickness when the symptoms of the post traumatic stress phase fail to subside after 4 -8 weeks, but rather continue or become worse. Then one speaks of a post traumatic stress disorder, which requires therapy. If the symptoms become chronic they can cause permanent changes in the personality of the affected person. The biography is threatened to disintegrate.

Emergency Pedagogy: First aid for the soul

Emergency pedagogy is not the same as trauma therapy. It should start as soon as possible after the traumatic event and aims to stabilise the psychological state of the child or teenager. Through creative and artistic forms of expression such as drawing, painting, modelling or playing, the affected person is given the possibility to express their feelings non-verbally. The daily rhythm (rituals, eating

patterns, sleep), which was disturbed by the shock is restored and maintained. Rituals create new security and provide orientation. Movement games help to release the paralysis caused by the traumatic experience of powerlessness. Outdoor adventure pedagogy exercises aim to strengthen the trust in oneself and also to restore the trust in others.

Concentration problems can be solved through games and flashbacks be averted by specifically applied Emergency Pedagogy exercises. Emergency Pedagogy aims to strengthen the child's own ability to heal in such a way, that a post traumatic stress disorder may be averted. Crisis intervention through Emergency Pedagogy can however, help to stabilise the affected person in the case of a post traumatic stress disorder, when used in addition to the necessary trauma therapy.

The methods of Waldorf Education, which are based on a holistic view of the human being accompanied by anthroposophical therapy forms, e.g. art and music therapy, curative eurythmy and rhythmical massage, are particularly well suited to help children to work through their traumatic experiences and to integrate them into their biography.

When paradise falls apart – in the tented camp for the homeless in Sunggai Batang

“I was working in my restaurant on Lake Maninjau when the earthquake began. High waves formed on the lake. A few minutes later I heard the sound of huge landslides. This continued the whole night. The next day at dawn I evacuated over 300 inhabitants of the village with my small ship. The people had left their houses immediately as the earthquake began and had fled to the shores of the lake or onto the floating fish farms. Many houses were buried by the landslides. All inhabitants were able to escape.” (Zal, 46, Sunggai Batang)

The camp for the homeless in Sunggai Batang lies on the Maninjau volcanic lake.

Before the earthquake the now no longer existent villages nestled on the steep walls of the crater along the shores of the lake. The inhabitants of the four destroyed communities now live in close confines in the camp. 705 people have to live in 94 tents. Fawaaz, the UN camp coordinator tells of serious social tension between the inhabitants.

Together with the Indonesian aid organization, “Muhammediyah”, we began to work with the children in the camp. After rhythm and movement games in a big circle, the children were separated into groups. The younger children danced to flute music, modeled animals out of beeswax, made little dolls out of fairy wool and were overjoyed when they were allowed to cradle a bigger doll in their arms. Meanwhile in the art therapy group, the children used wax block crayons to draw lemniscates, painted with water colours and could also draw what they chose. One girl left the middle of her picture empty. On being asked, she filled the space in the centre with motives of the earthquake. Another group worked with outdoor adventure pedagogy. The children passed a ball around the circle with great concentration, using a large and colourful parachute.

During this time, a group of adults met in one of the communal tents. The psychologists and therapists offered them psycho social assistance in the form of conversation, which they gratefully accepted. Dede, a 45 year old English teacher said, *“When the earthquake began, I was very worried about my family. I only found my 14 year old daughter the next day. No one was injured. Nevertheless, I now suffer from stomach problems and vomiting.”* The 74 year old Batu Nangai has been a widow for 40 years. Until the earthquake she made a living growing cinnamon and nutmeg. Now everything has been destroyed. She said, *“I don't know how I am going to be able to make a living. Since I have been living in the camp I have leg and back pain. My eyes also hurt.”* The 49 years

old Yunizar comes from Batu Nangai. He told us, *"I fear for the future of my five daughters. I am particularly depressed about the fact that I can no longer afford to pay the university entrance fees for my daughter. But at least the work on the fish farm distracts me."*

In another tent two children received curative eurythmy and at the same time the team's doctor inspected the camp. Many children were suffering from infections. Traumatized persons are particularly prone to infections due to their weakened immune systems.

Difficulties caused by cultural differences also had to be overcome. In an isolated mountain region where supernatural ideas and practices are part of daily life, rumours can spread easily and fear of strangers finds fuel. Even the UN camp coordinator from North Sumatra was regarded as a stranger who didn't understand the culture. Then the drop of baby oil in a child's hand can only too easily be interpreted as a Christian ritual or the woolen doll with the form of a cross be seen as Christian symbol. In this way a vague fear of a Christianization of the children arose. During a two hour long frank discussion all such misunderstandings could finally be resolved.

Left alone – in the mountain village of Malalak

The mountain region of Malalak, home to 2227 people, was devastated by the earthquake and the landslides that followed. The catastrophe cost 62 people their lives. Of the 808 houses, 545 were destroyed and a further 21 completely buried. Many inhabitants, including 12 children, had gathered in the Mosque for prayer when the earthquake started. Joru is 30 years old. She was nursing her 14 month old daughter on the veranda when the earthquake began. In a quiet and monotonous tone she said, *"I saw my 12 year old son Boy fleeing out of the collapsing mosque and running towards our house. About 3 metres before our veranda he was entrained by masses of rubble and buried. We still haven't found him."* Boy is one of the 9 missing children of Malalak.

After the catastrophe the village was left on its own for weeks. According to the non government aid organizations, the first help from the provincial government arrived only four days before our crisis intervention operation. To this day most of the dead have not yet been recovered. The tented camp for the people of Malalak who lost their homes had neither running water nor sanitary facilities. The untrained medic from the local health office was doing his best, but wasn't coping with the distribution of medication. Most patients received the same medication. A man who had been bitten by a green snake received medicine for diabetes. Fortunately he survived. The medic gratefully followed our doctor's advice.

The local primary school was also seriously damaged. Out of fear of further tremors large tents were erected on the school playground. The headmaster Kaidir Zein described significant trauma related behavioral problems amongst the pupils: *"During the day many children are aggressive and hyperactive. They oppose their parents and teachers. At night they are very fearful. They are afraid to fall asleep or wake up in the night crying and shaken by nightmares."* Aggression and fear are typical responses to trauma. The teachers told of a lack of concentration and motivation to learn, as well as an increase in disciplinary problems: *"They no longer listen to their teachers, run out of the classrooms screaming in the middle of lessons and are rebellious."*

Kaidir Zein asked after our presents for the pupils, claiming they would be absolutely necessary *"in order to motivate the children to take any interest at all in the work."* Not long afterwards he stood in amazement within a circle of 130 children. They had all stayed after school to take part in the games and activities. *"You made the children laugh again. You have opened their hearts and made their eyes shine,"* said Kaidir Zein as a summary of his impressions on that afternoon. Joy too can heal.

Working through a psychological trauma – protection and risk factors

Many children with whom the pedagogical crisis intervention team worked, showed signs of serious trauma. At the same time, one had the impression that most of them had sufficient potential to process their traumatic experiences to a large degree. How can this be explained?

Trauma research has shown that the ability to overcome traumatic events depends on an array of factors within a person and also in his or her environment. In addition to individual protective factors, e.g. physical and mental health, other factors, such as a stable relationship to a caregiver; sociability; religious practice and the experience of the meaning of ones own life and deeds, also play a role. Social support is also helpful when working through traumatic events and their consequences.

On the other hand, there are various risk factors which can retard the processing of trauma and increase the likelihood of developing a post traumatic stress disorder. The risk factors are, among others, the degree of traumatization, lacking social support, general stress and negative childhood experiences.

The children from the mountain villages of West Sumatra grow up in an environment which is- at least to a large degree – healthy, live in intact social networks and with secure religious affiliation. These are all important protective factors which are helpful in overcoming traumatic experiences.

“From the bottom of our hearts” - Thanks from the cooperating partners

The work of the crisis intervention team of the “Friends of Waldorf Education – Emergency Pedagogy” in the earthquake zone in West Sumatra found recognition and was held in high regard. The mayor of Sunggai Batang, Ashin Datuk Bandaro Kayo thanked us in the name of the whole village for *“all the positive deeds you performed”*. The head of the health service in the region of Agam, Dr. Indra Rusli expressed his thanks on the behalf of the regional government and the head of the health office in Padang, Dr. Lily, presented us with a letter of thanks from the Ministry of Health of West Sumatra, expressing great appreciation *“from the bottom of our hearts”* for the Emergency Pedagogy operation. Through the German Embassy the team was invited to the Kempinski Hotel in Jakarta to give a report and receive thanks.

Bernd Ruf

Notes

[1] The members of the Emergency pedagogy crisis intervention team were: Noemi Boeken (eurythmist), Vina Bunyamin (psychologist and translator), Dr. Matthias Lohn (medical doctor), Lukas Mall (outdoor adventure pedagogue), Kristina Manz (coordinator), Yoko Miwa (psychologist), Bernd Ruf (remedial pedagogue and head of the team), Warja Saarccke (psycho - therapist), Carsten Troll (curative eurythmist) and Carmen Will (art therapist).