Psychological support and social reintegration for landmine survivors

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People behind landmine accidents

153 survivors: 137 - m, 16 - w, 23 -children;

Level of education:

- · high, incomplete or middle professional 26 %
- · secondary 56 %
- primary school & uncompleted secondary 18%.

Professional status before incident:

- · Engaged in physical labour 66,7%
- · Engaged in intellectual labour 22,2%
- · Unemployment 11,1%.

Survey results

- Didn't get psycho-social support – 72%
- Received psycho-social support in the disabled people organization - 2%;
- Received psycho-social support during summer camp – 26%;
- None are involved in sport or have a hobby.



Quality of Life for survivors

| # | Items | Norma | Survivors |
|---|---------------------|-------|-----------|
| 1 | Physical mobility | 90 | 48,51 |
| 2 | Emotional wellbeing | 96 | 52,23 |
| 3 | Sexual functioning | 100 | 87,50 |
| 4 | Social functioning | 90 | 72,32 |
| 5 | Cognitive function | 100 | 80,00 |
| 6 | Economic condition | 100 | 26,79 |
| 7 | Integral index | 93 | 63,99 |

Psychological and psychiatric impact of landmines

- · Acute stress (four group symptoms);
- Post Traumatic Stress Disorder (PTSD);
- · Prolonged Depression;
- · Neurotic disorder;
- · Sub depression;
- · Somatoform disorder;
- · Chronic Personality Disorder.

Risks for PTSD

- Intensity of the stress factors;
- Duration of the stress exposure;
- Absence of social & emotional support;
- Late psychological support;
- · Introvert personalities;
- ·High level of personal expectation;
- •People with antisocial behaviour:
- ·Loneliness:
- •Impact in respect of Age in time of accident;
- Social context (low socioeconomic status).

Socio-economic condition

- · Economic hardship & Unemployment;
- · Poor living conditions;
- Lack of psychologists in cities and their total absence in rural areas:
- · Absence of rehabilitation centers;
- · Villages are far from each other and big cities;
- Low level of pensions for disabled persons;
- · Access to the rehabilitation services

Protective Factors

- · Extended family;
- · Low level of personal expectations;
- · Enthusiasm;
- · Disabled Persons Organizations;
- · High level of intellect can facilitate coping process;
- · Occupation / Significant activity;
- · Groups of self-support.

Survey Results

- · Are working 26,8 %;
- Have willingness to go to Russia (labour migration) -24,8 %;
- Do not work, need assistance in finding work 32,7 %;
- · Need in improving professional qualifications 10,5%;
- Need to continue education 7,8 %;
- Psycho-social support more than 70%.

Psychological Rehabilitation

- Psychology sessions (individual & group);
- · Family therapy;
- Training of communication;
- · Role plays;
- Creative Activity Therapy;
- · Peer-to-peer support.



Creative Activity Therapy

- ✓ library therapy;
- ✓ art-therapy;
- ✓ therapy by music;
- ✓ vocal-therapy
- √ dancing therapy.



Recommendations to Experts

- · Early beginning of psychological rehabilitation;
- · Complex rehabilitation;
- · Individual approach to rehabilitation;
- Psychological assistance throughout recovery;
- Survivors should act as constructive partners of program (peer-to-peer support).

Psycho-social Rehabilitation What to Do?

- · Implementation of the WHO recommendation;
- · National and local capacity building;
- Providing assistance devices / learning equipment for social adaptation;
- · Career guidance and professional training;
- · Support in providing employment opportunities;
- · Integration with other projects;
- Education for survivor's families in post-accident recovery and care.

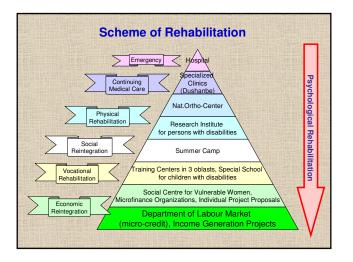
What to do? Cont'

Survivors as partners

- · Have better understanding of challenges
- · More trust between fellow survivors
- · Positive example of rehabilitation and prosperity

Survivor participation:

- in NGOs, associations
- in VA activities, VA Coordination Group, meetings and International Conferences
- in support groups, peer-to-peer support
- in mine awareness activities



THANK YOU FOR YOUR ATTENTION! Dr. Reykhan Muminova VA Officer Tajikistan Mine Action Centre