

Activity report on camps for parents and children in the disaster area ～ Effects and issues gleaned from questionnaire survey results ～

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1. Introduction

It has been five years since the Great East Japan Earthquake, but affected families even now continue to live in temporary housing such as container type temporary housing, and children must endure educational experiences in schoolyards and fields that have been used for disaster efforts. These conditions, which impose stressful lifestyles on both families and schools, are thought to induce a variety of problems including the exacerbation of health in the mind and body as well as communication isolation.

The Miyagi Disaster Mental Health Care Center (henceforth, “Center”) has established the “camp project for parents and children in the disaster area” (henceforth, “project”) so that parents and children may find recreation in an emergency environment, increase their awareness of mental health and improve their self-care capabilities. The project was started as one of the disaster support initiatives of Tohoku Fukushi University in FY 2011, with the center inheriting the project in FY 2012 and conducting it once a year. Here, we report FY 2014 initiatives as well as effects and challenges from its implementation until now.

2. Summary of activities

(1) Purpose

The project was implemented with the objectives of allowing for affected families to maintain and recover their health, providing recreation in an emergency environment, and increasing self-care abilities.

(2) Date and location

Date October 4th, 2014 (Saturday)

Location Children: Minamizao Campsite, National Hanayama Youth Outdoor Learning Center Parents:
HUMOS 5 rented conference room

(3) Subjects

Subjects included elementary school students in the coastal regions of Sendai and Natori cities and their parents. Participants were limited to under 30 individuals to ensure that staff can provide one-on-one support for children.

(4) Staff

The staff comprised specialists registered in “Supporters’ clubs” which included specialists agreeing to center activities and teams of various professions including university students affiliated with medical welfare in Miyagi Prefecture, in addition to center staff. Furthermore, we received cooperation from the Miyagi Council of Japanese Boy Scouts Association in Sendai District for planning operations.

(5) Methods

① Questionnaire survey

We conducted a questionnaire survey with children and their parents regarding their disaster situation and mental/physical condition before and after the project. Additionally, indicators for mental/physical conditions comprised a psychological rating scale for children (PTSSC-15) and the K6 scale for parents, both of which were conducted before and after the project. Furthermore, parents and children were asked to fill out a freeform questionnaire survey regarding their program participation.

② Program

We conducted programs for children and parents at different venues to ensure that both groups can have a pleasant time during the project. Children were taken to a campsite away from the disaster area, and parents were taken to a venue nearby the meeting point. Parent program participation was only for those who explicitly chose to do so.

A. Children's program

The children's program involved outdoor activities and psychological education. Outdoor activities involved cooking rice outdoors, fire-starting experiences, and recreational activities. Psychological education was entitled "study of the mind", which included relaxation such as breathing techniques and muscle-relaxing therapy. Toys such as a blowing pipe were used to ensure that children retained an interest in breathing techniques. We had children inhale deeply and practice blowing the ball with steady breaths and had them practice abdominal breathing. Additionally, we allowed children to take home the blowing pipes so that they can continue to practice breathing exercises at home. Muscle relaxing therapy constituted repetitions of tensing up muscles in both hands or the shoulders and then suddenly releasing them.

Photograph 1 Study of the mind



Photograph 2 Breathing techniques with a blowing pipe



B. Parent program

We set up a "café corner" at the venue to ensure that participants can freely communicate. Relaxation included "yoga" and "aroma hand massages". Additionally, we conducted mini-lectures on "stress" and "parent-child communication" as part of psychological education.

3. Results

(1) Participation status

A breakdown of the number of participants in FY 2014 is shown in Table 1. Eight children out of the 20 total participants had previously been involved in the program.

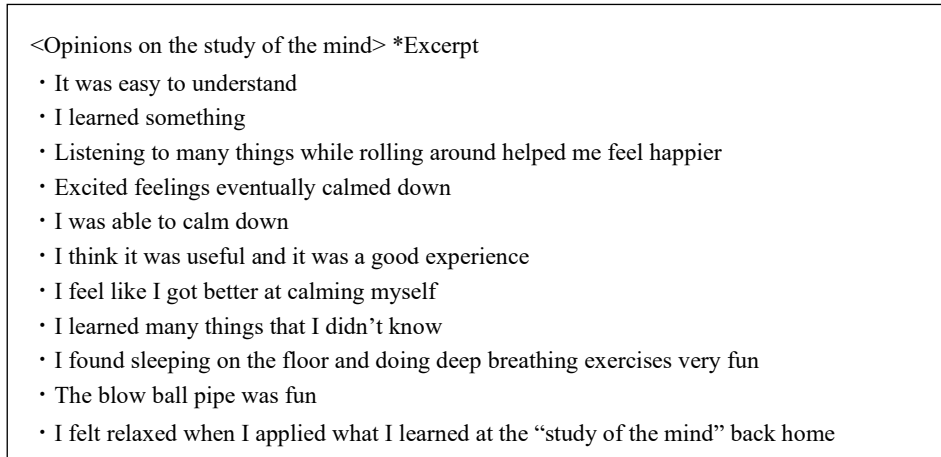
Table 1 Details of participants

Subjects	Number of participants	Note
Children	20(12 boys, 8 girls)	Average age 9.5years
Parents	5 (1 man, 4 women)	

(2) Questionnaire survey

Questionnaire survey results for children after the camp project were received from 19 out of 20 of the participating children. The majority of responses about the program included, “it was very fun” and “I was happy to meet my friends from the last time I participated”. Additionally, responses to the “study of the mind” activity included, “I feel like I can relax my feelings with the breathing techniques and it was a help”, “I can be kind to others”, and “I learned something”.

Figure 1 Questionnaire survey results: “study of the mind” freeform content



Questionnaire survey results for parents after the camp project were received from 15 out of the 16 of the participating parents. Responses to the program overall included, “it was good to have my child participate in the program” and “it was good because it wasn't only fun, but also taught children how to relax”. Additionally, responses to the parent program included, “I was able to have time for myself, and it was a good diversion” and “I hope that more opportunities like this arise”.

4. Discussion and future challenges

(1) Achievement of activity objectives

① On refreshing effects

We hosted a children's program in campsites within the prefecture far away from the disaster area and a parent's program within indoor facilities near the gathering point so that victims who have been forced to live in container type temporary housing after the Great East Japan Earthquake, whose schools have been affected, and who have to have educational experiences in cramped schoolyards and fields so that they can have even one day of mental refreshment.

For the children's program, we collaborated with the Boy Scout Association, which has extensive outdoor activities experience, for planning operations to ensure that children of all grades can enjoy the activity while keeping in mind their safety. As a result, we found that the children's program was a place for fun experiences, as is evidenced by their responses which included, “I found the recreational and fire-starting experiences very fun”, and “it was fun to cook food with everyone”.

Additionally, we incorporated “yoga” and “aroma hand massages” in a separate venue from the children for the parent's program. As a result, we found that the parent program also resulted in a relaxation of anxieties, as evidenced by their responses including, “I was relaxed”, “I was soothed by hobbies such as aromatherapy and yoga”, and “I was relaxed because I usually never have an opportunity to be away from my children and to have my own time”.

From the above, we believe that we were able to relieve stress and create a diversion by putting some distance between the victims and their daily lives and engaging in relaxation such as outdoor activities, yoga, and hand massages.

② Improvement of self-care ability

We provided measures for addressing anxiety or nervousness during the “study of the mind” psychological education session in the children’s program. Responses of participating children in the muscle-relaxing therapy, where they conducted abdominal breathing with a blowing pipe and lay on their back, included “it was fun”, “it was easy to understand”, “I learned how to calm down”, and “I enjoyed deep breathing”, which highlight the fact that the children learned self-care while having fun. Parents also had positive responses to psychological education and they felt happy that their children were able to learn self-care (ways to relax themselves) through the program.

Parents of children who have participated multiple times gave responses including, “I felt like my children have grown since participating in this project, and they actively engage in any project” and “by participating each year, the children incorporate the breathing techniques that they learned during psychological education and are at a point where they teach their family members”. The fact that these self-care methods which incorporate relaxation such as breathing techniques have spread to families through the participating children indicates the positive influences on the mental health of their surrounding and the possibility of resulting in long-term improvements in mental health in the disaster area.

(2) On the cooperation and operation of other organizations and professions

This project was facilitated not only by the center staff but also by teams composed of various institutions and occupations, such as specialists from other organizations and student volunteers. We were able to learn about care workers that provide victim support and regional specialists through this project, which lead to the establishment of new networks. Additionally, participants were able to learn about the existence of the center as a consultation site for when they encounter future problems in their life or when they have mental/physical problems. As various care workers withdraw from the region five years following the earthquake, we felt the necessity of supplying and continuing this project in the future as an opportunity for providing an opportunity for care workers and social resources in the disaster area to connect.

(3) Future challenges

One challenge faced was the small number of program participants the three times we have implemented this project. This time, we conducted the parent program at the end of the day and allowed for partial participation or withdrawal to ensure that the project can be held at a convenient time. Additionally, we set up “childcare services” to allow parents who have pre-school children to participate. As a result, participation has slightly increased and fathers have also joined. In the future, we would like to set up program content that encourages more male participation.

5. Conclusion

Participants were able to alleviate their stress and create diversions through the implementation of this project. Additionally, the project provided an opportunity for teaching relaxation methods and implementing self-care in daily life.

Project results over time showed the spread of self-care methods to participants and their surroundings and the possibility of favorably influencing overall mental health. Furthermore, we anticipate that our connections among care workers will allow us to function as a consultation site for when participants feel unwell, and thus result in early prevention of health problems. For these reasons, it is thought that continuing this project in the future in disaster areas will be necessary.