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# CHERNOBYL HUMANITARIAN ASSISTANCE AND REHABILITATION PROGRAMME -CHARP- BELARUS PILOT PROGRAMME FOR PSYCHO-SOCIAL SUPPORT -PSS-REPORT FROM ASSESSMENT MISSION

FOR THE INTERNATIONAL FEDERATION OF RED CROSS AND RED CRESCENT SOCIETIES

Belarus, from May 28<sup>th</sup> to June 6<sup>th</sup> 1998.

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# 1- Context and objectives assigned to the evaluation mission

#### 1-1 Context of the evaluation

In 1990, the Belarussian, Russian and Ukrainian Red Cross National Societies asked the International Federation of the Red Cross and Red Crescent Societies to bring them assistance in order to help them solve the problems caused by the 1986 Chernobyl nuclear disaster. From then on, the question of the psychological support to the affected populations was raised.

The Federation has developed the CHARP programme (Chernobyl Humanitarian Assistance and Rehabilitation Programme) in the contaminated areas. In February 1996, an evaluation mission recommended a psychological support programme to be put in place, suggesting the establishment of a pilot project in BELARUS.

In November 1996, a psycho-social training delegate was assigned to the MINSK Regional Federation Delegation in order to train a the local co-ordinator, organise the first training seminar for training officers and make recommendations on this pilot programme of psychological support to the populations.

#### 1-2 Objectives of the evaluation in June 1998

#### 1-2-1 General objective

This evaluation aims at re-examining the technical aspects of the pilot project, its relevance as well as its achievements and aims at making recommendations in order to become a complete programme that could be applied to the other two affected countries. In this evaluation mission, both the technical and administrative aspects will have to be reviewed.

1-2-2 Specific objectives

#### 1-2-2-1 Technical aspects

- To study the work made in the framework of the pilot project and to make recommendations in order to develop its efficiency.
- To study the strategy initially adopted for the training period for training officers and the MDL's team in order to see if the strategy is adapted to the stress management and the psychological support of the victims and all the persons who have been affected by the situation.
- To make recommendations in order to increase the impact of the CHARP/PSS programme and develop its practice at national levels.
- To make recommendations for a development of the training and documentation. programmes.

#### 1-2-2-2 Administrative aspects

- To examine how the programme was operational through the MINSK Regional Federation Delegation with the support of the COPENHAGEN Reference Centre, to identify the strength and the weakness of this operation.
- To make recommendations for further adaptation and improvements as needed.

We hope this mission will give a report and make proposals in its recommendations that allow the programme impact intensify as well as reinforce its administrative structure.

# 2- Review of the psycho-social support -PSS- programme of the <u>« Chernobyl Humanitarian Assistance and Rehabilitation Programme » -</u> <u>CHARP- operation</u>

#### **2-1 Characteristics**

In the framework of the contribution to alleviate the disaster consequences, the operation of the MDL's provides a medical assistance to a population who needs to be informed, checked and treated if necessary because of its location in areas contaminated by radioactive pollution. The function of the laboratories staff is not only to screen people but also an indirect function of psychological support because of the information provided to the population and because of this follow-up care for patients.

However, regarding the huge task they have (about 70 examinations a day) and their working structure that can be considered as being a chain, it is difficult for them -not to say impossible- to structure further this other function that would be of psychological support.

This psychological support pilot programme is supposed to be based on the structure of these MDL's. It is to be noticed that the team working conditions require that these teams also benefit from a psychological support in order to help them do their task at best.

#### 2-2 Achievements of the CHARP/PSS programme

#### 2-2-1 Implementation of the operation

#### 2-2-1-1 From the general information point of view

Presentation of the programme by the local co-ordinator to the media, newspapers and local radios on the occasion of the April 26<sup>th</sup> disaster anniversary.

## 2-2-1-2 from the material point of view

- Translation of Uffe Kirk's booklet entitled *Psychological First Aid, and other human* support that was published in Russian by the Danish RC, this publication being distributed during the seminars.
- Documents and text compendium in English with some Russian texts.
- Constitution of a list of tests in order to better know the people working for the RC and the MDL's.

#### 2-2-1-3 in terms of training

Summary of the training periods implemented by PSS.

Methodological remark :

For the local co-ordinator, the training standard of the RC staff is not sufficient and anything that can contribute to their further training can only be beneficial for them and should lead to better results.

Before the local co-ordinator's arrival :

Galina Abramova had organised with the BREST team the training session for the local MDL's.

Elena Ademchouk organised in December 1997 a three-day training period in MINSK area for

the RC workers, volunteers and teachers.

- Andrei Dorozevetz and the local co-ordinator : about child grief.
- Galina Abramova : about Professional Burn Out, the meeting of May 29<sup>th</sup>, 1998 was the second meeting of the training programme.

Themes covered :

- Stress management.
- Active listening and communication.
- Psychological crisis.

- Counselling.

- Self help group with a method called the « aquarium method » -the local co-ordinator explains its functioning : sat down on the middle of the group, the person explains the case which he/she had a problem with, the others members of the group react, telling how they would have behaved (although it may only be an interpretation).

The training officers team is composed of the local co-ordinator and people who were trained during the previous training session, which took place in BREST during the winter 1997-1998.

In April, training sessions were organised by the local co-ordinator : « I had to organise them quickly because the ECHO funds were only available at that time ». ECHO funded the « one day workshop ».

BREST, April 1998 : from 12 to 14 people, nurses, local heads of the district committees.

PINSK, April 1998 : 19 participants, nurses, members of the local RC (from STOLIN which is the district centre with 400 inhabitants, IVAKOVA, LUNINEC).

GOMEL.

RETCHITSA.

Mozir.

BARANOVICI with people coming from BARANOVICI, GANTSEVIC, IVATSEVICHI, BERYOSA.

MOGIL'EV, two one-day sessions.

And the ToT1 in GOMEL in May 1998 where there were 22 participants.

The future :

July, BELARUS, Stress Management Workshop, 5 days in STOLBEY with Mr Bakker<sup>1</sup>. The local co-ordinator's project is to develop and strengthen the training programmes<sup>2</sup>, and to continue the one-day seminars for the rural areas.

November 1998 : ToT workshop in UKRAINE with Mette Sonnings and Jean-Pierre Revel in RAVNO or ZITOMIR during five days with 5 or 6 foreign training officers.

<sup>&</sup>lt;sup>1</sup> The local co-ordinator says that « Mr Bakker is consultant and business adviser. He has developed a training especially for BELARUS. I met him in 1993, during the conference on the psychological consequences of the Chernobyl disaster. His foundation co-operates by training volunteers, teachers... Mr Bakker works with colleagues and friends. He deals with humanitarian aid and in order to finance their travels, he proposes to create funds ».

<sup>&</sup>lt;sup>2</sup> The local co-ordinator's project : « I have the project to ask the people who have just been trained to train the others. In order to do that, I encourage them to study, prepare training sessions, develop programmes... It is also necessary to update the knowledge of those who have already been trained  $\gg$ .

# 2-2-1-4 Implementation of the operation in terms of organisational

#### structure, further development of

- relations with national, regional and local levels and with the International RC Committee (seminar of June  $2^{nd}$  1998 in BARANOVICI) from the formal point of view and from the point of view of mutual information.

- formal and informal relations with these different levels in terms of the CHARP/PSS project functioning.

- relations with the Republic Committee BELARUS RC Society.
- relations with the OBLAST committees MINSK, GOMEL, MOGIL'EV.
- relations with the city committees.
- relations with the district committees such as the GOMEL RC Railway.
- relations with the medico-social centres.

2-2-1-5 Implementation of the operation in terms of political contacts (national, regional and local authorities)

The local co-ordinator has initiated this work but for the moment he has only managed to take very few appointments.

2-2-1-6 Implementation of the operation in terms of contacts with psychology and professional assistance

- with university structures where there is a teaching in psychology and in social work : in MINSK, with professor Kolominski, in the Psychology Department.

- in BREST, with Galina Abramova, in the Psychology Department.

- with the « Cognitive and Behavioural Therapy Association of BELARUS » whose vicepresident is professor Korotkov, a psychiatrist.

- in GOMEL with the Belarussian/Dutch Health Information Centre.

2-2-1-7 Implementation of the operation in terms of contacts with associations, foundations and volunteer

Mr Bram Bakker's foundation, the Association To Help Victims of Chernobyl, a Dutch association which also gives support to those who need help (help for helpers). Volunteers come to participate in the programme.

#### 2-2-1-8 System in operation, administrative point of view

➢Positive points :

One of the main assets of this programme is its close link with CHARP. It helps organisers in reaching easily the population who suffers from the nuclear disaster consequences.

Inputs from the COPENHAGEN Reference Centre are extremely important to give a conceptual and methodological framework to the operation.

≻Points to be improved :

Professional texts need to be translated from English into Russian.

Because the local co-ordinator cannot play all the roles, a help is necessary.

The update on references about this theme requires particular qualities from the interpreter who could work in this field.<sup>3</sup>

 $<sup>^{3}</sup>$  A link with universities could be established so that they could benefit from this bibliographical progress and from the progress made in theorising.

# 3- Reflection on theoretical and methodological aspects

In the operation implementation, two parameters must be taken in account :

- what directly depends on the catastrophe, and therefore affects populations living in contaminated areas, the displaced populations and those who were affected during the first stage of this nuclear accident because they were located in an exposed place.

- what depends on the social destructuration which followed the Soviet Union collapse : pauperisation, increase in violence rates, unemployment, precarious situation of old people...

#### 3-1 General framework and implications of the PSS programme

- The work developed by the PSS programme relates to the social work category on one hand, and to the psychological support category on the other hand. Next to that, one will find in terms of psychology a few interventions related to the therapy field.

- It is necessary to help people not only by material and health assistance but also by psychological assistance in order to cope with the grief that these troubles cause.

- It is also necessary to help people who work with this population, whatever their function is. This includes : heads in the RC organisation, visiting nurses or nurses working in medicosocial centres, home helpers, members of the MDL's. Their tasks are extremely difficult and because these persons live with economical difficulties in contaminated areas, they need support.

#### **3-2** Theoretical background

In the societies of the ex-Soviet Union, most of the theoretical references in the fields of social and human sciences are not coherent and readable if one takes as references the western standards. In the field of psycho-social support, it is therefore necessary to clarify these theoretical points and these methodologies upon which the actions are going to be based.

#### 3-2-1 Theoretical references

It is necessary to define what psychological support is as if there exists a consensus to say that psychological support is not a practice depending on (or assimilated to) therapy. There is a confusion between support and a sign of consideration of a human being towards another human being.

During the medical screening by the MDL's, staff often say :

« Yes, we do psychological support... », giving examples of situations such as :

« The woman talked to me about her family. She told me her husband had left her.. »

« This man told me he was afraid of the results, that his son was ill.. » ".

All situations that I could observe in their work.

However, these talks last from 3 to 5 minutes and they cannot be considered as « Active listening » of one person, leaving aside any objective of taking into account the expression of

#### a difficulty or of a suffering.

It is necessary to propose the development of « psychological support » agreements in order to clarify these notions for the organisers.

#### 3-2-1-1 The notion of stress and of post-traumatic stress

It is necessary to specify the fundamental concepts on which are based the helpers' practices, the concepts of stress or post-traumatic stress used in the belarussian context for example. This specified information about theory is necessary and will allow to legitimate the practices on one hand, and will participate in the elaboration of a scientific corpus on the other hand.

#### 3-2-1-2 Cognitive approach of the situation

During the previous mission, it was proposed to rely on the cognitive psychology capacities in order to give a theoretical support to the psychologist's work in the framework of the operation and this can be done from the « Cognitive and Behavioural Therapy Association of BELARUS » whose vice-president is professor Korotkov, a psychiatrist.

The local co-ordinator has got in touch with this association (but he doubts about this professor's abilities to bring help in the operation).

#### 3-3 An updated analysis

An updated analysis of the situation of the population is necessary to identify the groups to help. The intervention fields which had been privileged for the belarussian contaminated areas were defined on the basis of the needs detected during the setting of the help : as a matter of fact, a part of the stress from which this population was suffering was linked with the dis-information they were victim of. The programmes set then came out from this established fact and the psycho-social support is partly articulated around the information.

It is necessary to establish that 12 years after, the datas of the problem had changed. To efficiently help the population affected by the catastrophe, its expectations, its needs, its cultural habits must be re-examined as scientifically as possible in order to centre the psychosocial support.

#### 3-4 Methodology

List, description and evaluation of the tools.

3-4-1 Methodologies linked to the work of the teams who implement the PSS

Objective : the acknowledgement of these employees.

Local co-ordinator's (psychologist) point of view :

Since his arrival and in order to make his action, the local co-ordinator wishes to rely on the knowledge of the RC groups with whom he is going to work in order to know how these workers act to overcome the difficult situations in which they are.

He quickly makes a list of tests that are used during training days.

The list of tests includes:

GHQ : General Health Questionnary.

SELF-EFFICACY : Generalised Self-Efficacy Scale.

BECK<sup>4</sup>: Test to measure depression state.

The local co-ordinator wonders about the MISSISSIPPI Scale : it may be a scale for the VIETNAM veterans.

He also wishes to reflect upon anxiety with the Taylor scale « Level Anxiety ».

The time needed to the signing of this list is, according to him, of about fifteen minutes.

The local co-ordinator uses the questionnaire of Generalised Self-Efficacy of U. Walliser, R. Schwarzer and M. Jerusalem. He hasn't chosen the R. Schwarzer and M. Wegner's Self-Efficacy Towards Helping because he thinks that many RC workers have problems and that it is no use bringing them out now as he doesn't know how to deal with them.

It is noticeable that he made about twenty lists of tests been signed during the training sessions, and particularly by nurses, district heads and volunteers.

His objective is to collect about 150 questionnaires from staff living in contaminated areas but also living in non contaminated areas.

In order to finish the study, he thinks about introducing elements dealing with ages, rural/urban dividing up, male/female.<sup>5</sup>

To process data collected, the local co-ordinator has at his disposal the Statistics For Windows Release 4.3 1992. His computer is equipped with Windows 95.

3-4-2 Proposal of tools improvement for the population

The local co-ordinator could think again about the method of active listening because if this method is sometimes interesting, it could be completed by another approach in other situations by a more classical listening method.

#### 3-5 Evaluation of some points of the operation

3-5-1 Evaluation of the working conditions of people with reference to their mission

The local co-ordinator :

▶ Positive points :

Capacity to make proposals and reflect upon his mission, and to look for tools in order to make his point of view clearer.

« My role is to initiate, accompany, plan, give books and accompany the social work. It is a work in the field of the emotional and psychological support ».

« I have to develop relations with Ukrainians and Russians as well as with the foundations and my colleagues ».

« I'm going to see the MDL's technicians, as well as the population, and see with them how it is possible to bring support to the population ».

« I should also meet male and female teachers and see how it is possible to co-operate in the villages ».

<sup>&</sup>lt;sup>4</sup> Beck is a psychiatrist who has developed a test about depression.

<sup>&</sup>lt;sup>5</sup> During a talk, the question about statistics elements that can help him make this information list is asked as well as remarks about the sampling method are made.

>Points to be improved :

A very organisational approach based on a hierarchical conception of society, with top-down implementation of procedures : leaders, teachers, doctors and health leaders are to be trained first. And it is in that way they can form the « basis ». He is not familiar with the conception of a direct work with the community.

A real difficulty exists in dealing through the direct contacts with any kind of population - whether they are workers or farmers, young or old people, men or women... This is similar with the medico-social staff who often think that farmers are not able to give their opinion.

3-5-2 Local potentials and establishment of networks

Training officers :

- Galina Abramova.

- Cognitive and Behavioural Therapy Association of BELARUS.

- Collaboration with the GOMEL Belarussian/Dutch Health Information Centre : used as a training structure for the different OBLAST RC's, through the CHARP programme developed by the International Federation Delegation.

For the Information Centre, it is an opportunity to complete its operation system in the places where its truck cannot go because of its weight (MDL's are smaller).

The team -the psychosocial work team- of the Health Information Centre is composed of a psychologist, a nurse, a dosimeter, a driver and sometimes a doctor.

The local co-ordinator proposes to use the collaboration possibilities with one of his ancient professor of the State Pedagogical University, professor Jakov Kolominski, who can establish a training programme and who has a very positive network of psychologists at his disposal in BELARUS and in AMERICA.

Among the volunteers, there is also the UNITED STATES ambassador's wife, who is a psychologist and who proposes to help.

To develop co-operation with the Unesco community centres with knowledge exchanges, by organising jointly training sessions and by working on complementarities.

#### **4-Recommendations**

#### 4-1 From the organisational point of view

- To reinforce the relations with the organisations of the health and social sectors, with non governmental organisations, foundations, universities and professional structures...

- The efficiency of the MDL's system needs to be checked, by putting it in relation with the \* other structures in charge of doing mobile detection (governmental organisations, private foundations...) or by health examinations in establishments run by the State.

- To reinforce the organisational aspects of the operation, to make the PSS programme officially recognised by BELARUS RC so as to guarantee the life of these services that are ran for the moment in a quite informal way. Agreements with the BELARUS RC direction should be reached in order to organise co-operation between local branches. Training programmes about psycho-social themes should be included in these agreements for the RC employees.

In order to transform the pilot project in full project, more training officers and psychologists must work in this programme, which has impacts on financing, as in the case where MDL's and RC employees are requested to work more in order to co-operate with the PSS, which implies a system of allowances or increases in salaries.

To have an interpreter for the programme.

To remain in the framework of a Chernobyl programme, which will be useful for the rest of the population, and to centre the actions on a programme applied to the Chernobyl victims. However, it is noticeable that the entire population can benefit from such a programme.

#### 4-2 Actions to the population living in contaminated areas

Further knowledge on this population is needed :

To consider the characteristics of this population who is not affected in the same way according to their age and whether they moved or not. There must be specific messages and specific advises for the people who live in contaminated areas.

Necessity to a updated knowledge on the target population to be helped in the contaminated territories.

A study should be made, a quantitative study by questionnaires distributed by the MDL's with instructions for the constitution of a representative sample. The objective of this study would be to know the difficulties met by the population, and if they have particular problems as far as psychology is concerned, and see how they treat them, what their wishes are... How K relate

#### 4-3 Training

The helpers who live in difficult circumstances must know how to manage their stress level and their time organisation. This stress management learnt during seminars organised by the PSS must see its practice level reinforced during regular training periods that are also led by western specialists.

It is necessary to propose during the « psychological support » training to clarify these notions for the organisers.

The helpers are :

- psychologists to be trained in a community psychology approach.
- social workers to be trained.

the basic health staff to be trained in a basic psychological approach and to be attended in control groups.

- pedagogical staff: to intervene the teachers' training.
- community leaders' training.

#### 4-4 From the theoretical and methodological points of view, there is a need

To reinforce the methodological aspects of the training.

To reinforce the theoretical contents, insisting on paradigms in order to avoid the confusing and contradictory approach between theories.

- To introduce the systematic critical thought upon each action that is made, bringing out the strong and the weak points of each operation.
- To have an overall view of the project :
  - In the development of programmes, or even the project cohesion that underlies them.
- To give more importance to the strong projects within structured programmes rather than to a dissipation of actions, the tendency being often that of an activism in order to prove that the programme exists and that the donors are right to give money to the concerned organisation.

# 4-5 For a long term development and in the choices, there is a need to organise into a hierarchy objectives and actions, and to plan the following stages of the programme

4-5-1 The various stages from crisis management to community development

- To rely on schools, youth clubs, groups in the villages, to work with the population for the medical examinations, and to organise afterwards a meeting with the inhabitants. The place of these meetings can be rooms in the villages, or Unesco Centres, or Centres run by the State or by local communities.

- Another possibility could be the establishment of an experimental Centre, a structure similar to the Unesco Community Centres, in a contaminated area where the inhabitants of many villages could meet each other.

This centre could have a mobile team of psychologists whose function should be advising, organising meetings, meeting local authorities, groups of young people, teachers... and training.

Within this system, a «hot line» could possibly be established in order to offer another social presence to the disturbed individuals.

- A co-operation with the Unesco Centres could be developed through joint organisation of training sessions.

#### 4-5-2 To make the actions more efficient

The MDL's have an important action in the population, but it is difficult for them to intervene more. They can meet their patients from human exchanges points of view but they cannot allow them more time in order to advise them and listen to them.

However, a psycho-social support development can be organised from their action :

The MDL's can have more information about the PSS : brochures or simple leaflets about the notion of what a psychological problem is, with simple proposals in order to treat these psychological difficulties.

With the brochures brought by the MDL's, the population could meet in places within each village that would be converted into temporary psycho-social centres and be given advise by the psychologist and the social worker who would give consultations.

#### 4-6 Conclusion

Considering the situation in the contaminated areas, there exist two approaches in terms of training and help to the population :

The overwhelming approach inherited from the previous political system. It is therefore very present in mentalities : it is based on the hierarchical structure in a top-down movement. Leaders, educational and health heads...

A second approach would require to think again the action as regards community, going from this latter and training contributors able to communicate with the community, help its working powers to take the initiative, going out from power delegations and giving back to each individual his autonomy, his capacity to make choice and be determinate.

# CONCLUSION

As a conclusion, I would like to underline the huge interest of developing this project of psycho-social support to the belorussian populations affected by the Chernobyl catastrophe and extending it to all the concerned areas of RUSSIA and UKRAINE. It is sufficiently developed in the reflection and the setting to change from its experimental aspect to a global aspect. In the same time, while keeping in mind the evolution of the situations and the fact that this catastrophe has long range effects, it is necessary, to fund an efficient action, to examine the evolution of the needs in the time, leaving intuitions to work on the basis of scientific studies.

It is noticeable too that the local resources in terms of help have a good level of education and that the point is to develop their training and help them with a regularly repeated psychological support.

The community psycho-social support dimension must be developed, on the basis of the community itself, and not on the basis of a top-down hierarchy. The helpers' attitude concerning this point is to be modified. This attitude shall allow the populations treated an access to autonomy. Each person's ability of initiative shall be developed, so this psychosocial help may allow each one to take care of oneself.

# AGENDA

## May 29<sup>th</sup>, 1998

GOMEL, Belarussian/Dutch Government Health Information Centre, ToT workshop that was organised in the context of PSS of IFRC from May 26<sup>th</sup> to May 30<sup>th</sup> 1998. Mr Vladimir Yarmolik, 1<sup>st</sup> vice-president of BELARUS RC, welcomes us.

Visit of the Mobile Health Information and Control Laboratory and discussion with the technician who shows us how device work.

Observation of the training course of Mrs Galina Abramova, a psychology professor in the University of BREST, about professional burn out.

Discussion with Galina Abramova. Theme : training, appraisal of the trainers, which characteristics should have a standardised training module about this theme of burn out?

Discussion with the local co-ordinator : which approaches are to be given priority in the helpful relationship with the people, for him, what is the psychologist's work?

#### May 30<sup>th</sup>, 1998

Discussion with Tamara Sharshakova, Chair of the Belarussian/Dutch Health Information Centre.

Discussion with the group. Object : what they have got out of this training, what projects they can propose for the future training periods, does the situation of the contaminated areas pose particular problems for their work?

Visit of the Medico-social Centre of the GOMEL RC, with Galina Yemelyanchicova, Chairperson of the Railway Region RC Committee. (She is a doctor but she also manages the three Medico-social Centres that she runs.)

Departure to MINSK.

## May 31<sup>th</sup>, 1998

Study with the local co-ordinator at the Federation Delegation.

Study on the questions asked by Jean-Pierre Revel.

Study of documents.

Reminder of the historic of the project.

## June 1<sup>st</sup>, 1998

Mr Kronenberger, Chair of the Federation Delegation, welcomes us.

Discussion with Lise Lehongre, department of logistics.

Discussion with the CHARP programme heads : Nicolai S. Nagorny, administrator, and

Alexander D. Komov, co-ordinator doctor.

Discussion with the local co-ordinator.

## June 2<sup>nd</sup>, 1998

BARANOVICI, a training period given by the RCIC, the KIEV Regional Delegation.

Welcome made by Mrs Zinaida Pavolvich, vice-president of the BELARUS RC.

Discussion with the training organisers : François Zen Ruffinen, Deputy Regional Delagate and Eugène N. Tsybulenko, Dissemination Assistant.

Interview between the group and the nurses of the MOGIL'EV area, BREST and PINSK about the characteristics of their work in a contaminated area.

Visit of the Unesco Community Centre in PERSHAI. The manager and the psychologist welcom us.

Discussion : the characteristics of their structure working, what is the psychological support in their work, the role played by the Community Centre in July 1997 during the natural disaster caused by a tornado in the area and in northern UKRAINE.

Discussion with the local co-ordinator on the operation of psychological assistance in the framework of the contribution to the decrease of the consequences of the disaster, operation which could be established from its professional network.

# June 3<sup>rd</sup>, 1998

Discussion with Mr Kronenberger, head of the MINSK Regional Federation Delegation.

Discussion with the local co-ordinator and study of the documents he uses for his surveys; development of expansion projects.

Discussion with Yakov Kolominski, psychology professor, Psychology Department.

## June 4<sup>th</sup>, 1998

Discussion with Mr Anton Romanovski, President of the BELARUS RC.

MOGIL'EV, BELARUS RC.

Observation of the study made by the MDL's in the village of KRASNAYA SLOBODA (a hundred inhabitants), next to KOST'UKOVICHI. Tatyana Sergeevna is the name of the woman who accompanied us and who runs the RC of this little town.

Discussion with : Alexandra Petrovna Potapenko (who is more than 70 years old), Larissa Nikitickova Rakhmotina (74 years old) and another old woman. Group discussion with the MDL's members.

Back to MOGIL'EV.

# June 5<sup>th</sup> 1998

MOGIL'EV, BELARUS RC.

Discussion with Nina Bukova, Head of MOGIL'EV RC.

Training seminar in one of the RC Medico-social Centres for home cares given by the department of health protection. Theme : psychological support and stress.

Visit of three Medico-social Centres in MOGIL'EV.

Observation of the studies made by the MDL's on the sanitary control carried out to the staff of plant in MOGIL'EV.

Back to MINSK.

## June 6<sup>th</sup> 1998

Discussion with the local co-ordinator. Aim : check up of my understanding of all the procedures he puts on, and development of an expansion project for the PSS.