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MaviKalem's Report on The Situation of Caregivers' and Children's Well-Being in Hatay





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After the February 6th earthquakes, MaviKalem implemented a project with the aim to support the well-being of children and empower caregivers in Hatay province. The project "Protection and Empowerment of Children in Hatay" funded by Acted was implemented from April 15th to June 30th. Earthquake affected populations living in tents outside of the container cities and camps were the main target group since the container cities and camp sites receive stable support from AFAD (Ministry of Interior, Disaster and Emergency Management Presidency). Three districts of Hatay province were selected for the implementation: Antakya, Defne and Samandağ. A mobile team consisting of one psychologist and two social workers carried out the project in the field.

Within the scope of the project, a total of 20 psychosocial support sessions (PSS) were conducted with the participation of 263 women. Child friendly activities were also organized for the children of the women taking



part in the psychosocial support sessions. A total of 444 children participated in the 20 child friendly activity sessions implemented during the project. The child friendly activities took place at the same time as the psychosocial support sessions for caregivers for two specific purposes: to encourage the participation of caregivers in the PSS sessions and supporting the well-being of their children.

Implementation of the PSS sessions with mothers and female caregivers

"As a woman, you made us feel that women can be one heart!"

The psychosocial support sessions started with an introduction about MaviKalem Association, its goals and interventions, and a presentation of its staff. The aim of the PSS interventions was specifically explained to the mothers selected by MaviKalem as participants to the sessions. It was explained that the purpose of the PSS interventions is to empower and promote the psychological wellbeing of the caregivers affected by the earthquake and to help them to support their children's wellbeing as well. Children's reactions are strongly influenced by how their parents cope themselves with the current situation.

The PSS sessions were conducted by a female experienced PSS specialist. The content of the PSS sessions for mothers and women caregivers were semi-structured and responsive to the participants needs expressed during the sections.

The first session aimed at acknowledging the participants experience of the earthquake and

difficulties to cope with the ongoing hardships specially to keep their children safe and sound. Throughout the session, the PSS specialist emphasized the importance of sharing thoughts, emotions, and reactions between the participants. Sharing emotions and reactions helps to understand that these emotions and reactions are often common for all individuals who experience traumatic events and that these emotions can be regulated. It was also explained that these two hours sessions should be seen also as a break time to reflect on themselves and their children's feelings, behaviors, and reactions.

Sharing between participants in a group may also help them to share tips on positive coping mechanisms and bring them a new solidarity system with other mothers/caregivers.

In the following session, the caregivers were asked how they were going through this difficult process in general and how they felt about it. After the mothers/caregivers' conversation



on their feelings and thoughts, they were asked to find out if they felt any changes in their bodies, like aches, muscle tensions, changes in eating habits, sleeps, etc. The aim was to identify common physical, emotional, and behavioral reactions most of people can experience after a distressing event, and what are the negative coping mechanisms they may also have been using in reactions. Tips on how to cope better and adopt new coping strategies were presented by the PSS Specialist at the end of the session.

The last session focused on the wellbeing of their children and how caregivers are supporting their children to cope with the traumatic experience

and their new living conditions. More specifically, the guiding questions of this session were: How their children feel, how do they cope with the situation, how as mothers and caregivers they communicate with their children, how they deal with their problems while caring for their children. This section allows the caregivers to share difficulties of caring for their children in the current context. The caregivers shared about the anxieties they feel regarding their children. Psychological First Aid brochures specially prepared for them as caregivers was distributed and explained to the participants with the provision of additional tips and examples on how to care for themselves and their children.

Feedbacks from the mothers during the sessions

At the beginning of the session, the mothers and female caregivers mentioned that they did not have time to participate since they have a lot to do for their families. They were however encouraged to participate as this will be two hours sessions only for themselves, a precious break, and that may learn a lot and feel better afterwards. All of them agreed to join the group sessions and were content to be there.

During the session, they mentioned that sparing some time for themselves bring

them a feeling of being valued and that they may need to take more time for themselves. They also stated that it was the first time since the earthquake that someone asked them how they feel, what they think and how they deal with the situation and it made them feel very good. They also stated that it gave them hope. As one participant said “We feel very special because you came and shared something with us. This support feels like a therapy to us. We will wait for you to come again!”



Emotional reaction

A large range of emotions and thoughts were shared by the mothers during the sessions. Among the emotions and thoughts most shared by the mothers were mainly related to worry, feeling of being constantly in alert, high level of anxiety, anger, fear of losing their children, fear of earthquakes and their aftershocks, fear and uncertainty about the future, hopelessness, helplessness, giving up on their self-care, giving up on social relations, opinions of others, and underreckon others thoughts and feelings. Nearly all mothers stated experiencing at least three

of the emotions and thoughts listed above. More concerning, few mothers also presented severe symptoms of depression and were referred to a psychologist for specialized support. Almost all of them mentioned that the only thing that connects them to life and keeps them going is their children.

Fear for the future: It was observed that the participants were generally worried and anxious about the future. For those who have houses damaged they have an uncertainty on how long they will stay living in tent and they are constantly worried about whether they will be able to live in their house this winter. Some expressed worries regarding





the interruption of education and the uncertainty on when education will start and in which condition.

Impossible mourning

Some mothers discussed about their loss during the earthquake and the impossible mourning. They stated that when usually you lose someone and you have a funeral, and you start mourning. With the earthquake, they stated that they could not even live their mourning. First, they tried to save their family and people out of the rubbles, then buried them. Afterwards they searched for tents, water and food for their children and families. They did not have time to mourn for the lost ones and this brings to them a strong feeling of guilt.

Physical reactions

Insomnia, frequent interruption of sleep, loss of appetite, overeating, distraction, forgetfulness, panic, heart palpitations, aches, muscle tensions were the most mentioned physical reactions experienced by the mothers and shared by them during the PSS sessions. There were women who said that they did not speak for a whole week or ten days after the earthquake. During the sessions, some women were introvert and need time to feel comfortable for speaking and sharing their emotions but all of them manage to do so. Most of mothers stated that they have troubles for sleeping. They said that they did not manage to sleep normally and deeply



since the day of the earthquake. They are for all of them in continuous alert and hypersensitivity to sounds even when they are sleeping. They explained that they startle suddenly, often get lost in thought during the day or stare at something, have difficulty sleeping at night, waking up around 4am (time when the first earthquake happened) or to the slightest sound during their sleep and cry whenever they talk about the earthquake. While difficulties of sleeping could be a normal reaction, some of the participants stated at the opposite sleeping more recently and it was identified by themselves as a mechanism helping them to forget about everything.

Coping mechanisms

As positive coping mechanism, all of them mentioned that chatting together made them feel good. Some of them mentioned going for a walk, planting

flowers, gardening, doing their favorite hobbies like knitting or crocheting as a coping mechanism to their stress. As negative coping mechanism, they said that they reflect their anger to their children. They were aware that doing this was injustice to their children and they felt guilt afterwards. They stated that their tolerance level has decreased a lot. Some of them said that their alcohol and cigarette use had increased after the earthquake.

Mothers and female caregivers' concerns about their children

All mothers and caregivers stated that their children were also very affected in this process and their attitudes and behaviors were negatively affected. They observed various new reactions and behaviors displayed by their children such as irritability, aggression, temper, hitting to someone



or something, shouting, crying and hyperactivity. Several caregivers said that their children had enuresis after the earthquake. They also reported that all children had attachment problems, and they could not even go to bathroom alone. They also mentioned that this was reciprocal since they do not want them to be away of sight.

Another common problem mentioned by mothers/caregivers was about education. One of the mothers summarized it as “The children started school. Then the pandemic occurred and just when the pandemic was not anymore, a problem, the earthquake happened. My children no longer want to go to school or change of schools, they do not want to change schools, either”. Other women also stated that children are reluctant to go to school and it made them worried.

Mothers/caregivers said that they

were generally very worried about children: the psychology of the children deteriorated after the earthquake and during the recovery process, they became more aggressive, they did not want to go to school, they did not want to study, they did not study at all. Since mothers/caregivers only motivation for living was their children, their children's situation increases their anxiety. They also shared that they had communication problems with their children and would like to have a session on this topic.

Mothers/caregivers were very happy to see their children enjoying their time during the children's activities. They said seeing them laughing and playing all together elevated their mood, and made them happy as well. Some of the mothers/caregivers videotaped them while playing to keep their happy faces in their phones.





Implementation of activities with children

While the PSS sessions were conducted with mothers, MaviKalem implemented in the same time activities with their children.

In each of the activities, there were an introductory session aiming at supporting children to get to know each other and games such as improvisation and physical games were also implemented as an icebreaker. The sessions ended with the activities that children liked the most. Depending on the locations, children choose either to listen to music, dance, play games, play football, or drawing.

The purpose of these activities is to support children's well-being, to have fun and to support the socialization of children in the same age group. While



the activities were planned for the design of the project for children from 8-12 years exclusively, MaviKalem was also obliged to include in the activities children from younger age group. Many of the children registered came with their younger siblings and MaviKalem included them. Therefore, the age range change to 4 to 12 years. The groups were divided into two: preschool and school aged children.

In all the activities there were seven goals:

1. To socialize: The children not only lost their homes but also their social environment. They lost their siblings, cousins, and friends. They needed new friends in their new environment. Each activity planned to serve this goal. So-



cialization is a major part of the child development since children learn about themselves and society by interaction.

2. To have fun and feel better: Children in the earthquake region had lost family and friends. They are mourning as well. One of the goals was to make children be happy again.

3. To be able to make a choice for themselves: During the activities, children decide whether to repeat the activity or go to a new one. Also, at the last part they choose what to do next. Almost all their request were met during the activities. They were happy to be able to make choices.

4. To be creative: Children were encouraged to be creative and try new things during the activities.

5. To have a space for themselves: Since they were mostly living in tents, they

have limited space to play. They used to play at home or in the garden or at the park or at the school garden and they have lost all these options. By presenting child safe environment for them to play in an open space made them very happy.

6. Having toys one more time: Children lost their toys during the earthquake. Having toys like ball, rope, maraca/rumba shaker and tambourine made them happy. They especially liked to use the musical instruments.

7. Discharge their energy: All the activities were planned to discharge the children's energy built up in them which relaxed them afterwards. The activities were planned in a way that all children could use their fine and gross motor skills.



Children between 4-6 years old

Children from the pre-school age group liked to share rhythm activities with the older children and enjoyed it. In their choice of games, they also choose games involve movement such as Aram zam zam, sculpture, camel and dwarf. They especially liked games with repetitions and rhythm. They liked the use of musical instruments in their games. The mothers/caregivers felt more comfortable and less stressed being able to see their children while participating to the PSS sessions playing in their presence right in front of their eyes, which was what we planned it for. It would have been very difficult to conduct the sessions if the mothers could not have an eye on their children. Children preferred and enjoyed group activities more. They had new friends to play with.

Children between 7 to 12 years old

Children from the school aged group liked to do group activities using their bodies. They even had a football match in one of the groups for which they followed the rules of the national football league and played the National Anthem at the beginning of the game. Games with balls and jump ropes were among the most popular games. They show creativity in reinventing styles and rules. For this age group, it was observed that children liked to play energetic games with rules and in groups. They also enjoyed games more that involved competition and cooperation. By this way they could compare their abilities, rank themselves in different abilities and get to know better themselves and others. Considering that these children live in new living place, having new friends to play with was a real bonus to them.

Feedbacks from the mothers and children regarding the activities

Children's entertainment needs were very high. In these activities, mothers were also happy from the happiness of their children. The happiness of children improves the mood of mothers. It is a two-way psychology. Children seek trust, love, peace, and happiness in their parents. Routine life reassures them. When the parents are well, the children are also well. When the children are well and happy, mothers feel better, too. During the activities, children's smiling and shining faces made their mothers/caregivers very happy and they asked for continuing similar activities. They said they missed seeing their children's smiling faces and listening them singing and laughing. Children ran to their mothers/caregivers and showed them their toys at the end of the session.

Some of children in both age groups however displayed some difficulties

to participate and specifically it was observed the following: some children wanted constantly to attract attention, did not want to follow the rules, did not participate in the game, joined the game late and warmed up, exhibited aggressive behavior, and did not want to be separated from their mothers. Some of these problems were also mentioned by their mothers/caregivers and they asked for individual sessions for their children.

This study demonstrated the needs for child friendly activities with children. These activities must be flexible to meet the needs of children. The activities must include all ages with different complexities so that all children could feel that they are a member of the group without getting bored or excluded. This requires a bigger team to implement such child friendly program.

Conclusion and Recommendations

Mothers/caregivers thanked the PSS Specialist and the facilitators for providing these sessions designed to meet their needs. They mentioned that sharing their feelings openly and finding that others also had similar feelings allow them to feel that they are passing through a normal process. They said that the more they shared the more they felt empowered. They also reported that knowing that an NGO is thinking about them and prioritizing their psychological needs made them feel valued and cared for. They were talking before about the earthquake but through this session they could also share their emotions and talk about possible solutions, things that they could do and change. This made them feel strong and have a sense of hope for the future.

All the mothers/caregivers asked for more sessions like this for themselves

and for their children since their children had great fun in the activities. Some of them requested individual sessions for their children and for themselves.

This study clearly shows the need for continuing to provide psychological sessions for mothers/caregivers and their children by exploring more topics and by ensuring that the sessions are run over a longer period. Complementary to the group sessions, there is also a need to provide some individual sessions for those who have deeper psychological needs. However, this would require hiring psychologists who have the expertise to conduct structured individual sessions. Some consideration should also be given to the space for conducting these sessions. Providing sessions in the open air may be more challenging during summer and autumn seasons due to the weather and a space should be found to be able to provide the sessions in good conditions. In collaboration with the municipalities, a space could be potentially found. ■





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