

CRISIS RESPONSE

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JOURNAL

PROTECTION | PREVENTION | PREPAREDNESS | RESPONSE | RESILIENCE | RECOVERY



MANIPULATION

FAKE NEWS, FAKE PRODUCTS: WHO & WHAT TO TRUST?

**PUBLIC FEAR & TERRORISM | SCHOOL SAFETY & CONTINGENCY PLANNING | DISASTERS
& THE WORKPLACE | CALIFORNIA WILDFIRES | AVIATION FIRE & RESCUE IN MONGOLIA
| IRAN QUAKE | DISASTER RISK REDUCTION | TRAUMA PSYCHOLOGY | BUSINESS &
SOCIETAL RESILIENCE | GENDER PARITY IN BUSINESS CONTINUITY**

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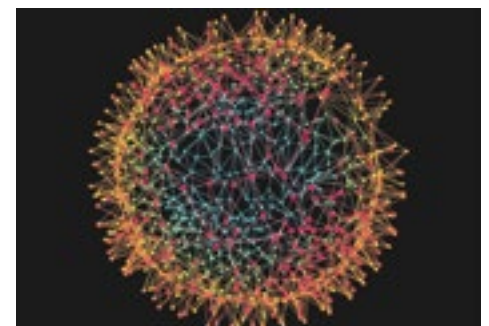
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In this issue, you will find news reports of the World Economic Forum's (WEF)

Global Risks Report 2018

and the *2018 Allianz Risk*

Barometer, which survey

experts and businesses on

what risks concern them most. Both reports note the usual suspects – extreme weather events, natural disasters, cyber attacks, data fraud and terrorism among others.

Landscapes inevitably change over time. Risk topography is no different, with new concerns such as illicit trade, large-scale involuntary migration, new technologies, food crises and disease finding their way into these reports.

Old foes and new... But regular readers of *CRJ* will already be familiar with these threats.

Very rarely do we get frustrated on *CRJ*, but a perennial (if, thankfully, relatively rare) irritation is meeting somebody who simply cannot conceptualise why events and factors outside their immediate area of expertise have a direct and material relevance to their work in resilience, preparedness, response or security.

Events inevitably demonstrate how deluded this myopic attitude can be.

Years ago, when researching for the launch of this publication, I got in touch with a number of contacts in this sphere to research the effects climate change might have on their roles. Every single person replied that they envisaged no impact at all. How times have changed.

Opioid addiction; trauma and mental health (whether in the workplace or between generations of societies enduring poverty or conflict); the malevolence of online predators encouraging vulnerable youngsters to self-harm or to hurt others; fakery, fraud, propaganda and misleading news; the shifting acceptable window of political views and how these are being shaped by manipulation – these are all topics in this issue. And they are often entangled with one another; it can be a matter of making connections between seemingly disparate phenomena or events, and extrapolating potential consequences and impacts to get a truly global vision of what could lie over the horizon.

Understanding these linkages and their possible consequences on your business, community or service is imperative. Failure to do so not only implies a lack of vision and planning, but also demonstrates a deep failure to understand and appreciate the intricate, dark kaleidoscope of today's ever-evolving threats and risks.

Emily Hough



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Hi-Story | Alamy Stock

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Blueananas | 123rf



Psychological first aid for migrants

Emily Hough speaks to Alessandro Dibenedetto, a psychologist with the NGO Emergency working with newly-arrived immigrants in Sicily, who says that early intervention, different ethno-psychological approaches and establishing trust are all paramount in migrant psychological assistance

Few readers can fail to be aware of the numbers of migrants who undertake the extremely hazardous journey across the Mediterranean, often having made long and dangerous overland journeys to reach their port of embarkation. These asylum seekers, migrants, refugees and beneficiaries of international protection usually make landfall in Italy. Alessandro Dibenedetto assists these arrivals with psychological support in the Sicilian ports of Augusta and Pozzallo. “In the first instance, I provide psychological first aid, and can do this with a simple chat at the port in order to assess a person’s vulnerability,” he says.

Priorities upon arrival are medical assistance, food, sleep and cleaning up

Emergency

Once screened, migrants are taken to primary reception centres. Emergency also runs centres in other regions in Italy, including Campania, Calabria, and Veneto. Migrants can remain in Emergency’s camps for up to one-and-a-half years while awaiting a decision on whether they will be allowed to stay in Europe. Dibenedetto and his team continue their visits to check on their progress and mental wellbeing.

“Many can show signs of acute distress, including disorientation, confusion, agitation or apathy,” he notes, “some are extremely irritable, angry or worried.” Doctors, nurses and cultural mediators are on hand to assess the immediate needs of people who have often endured gruelling

– or downright terrifying – journeys over land and then the Mediterranean; aside from any urgent medical treatment, the immediate priorities are food, sleep and cleaning up. “The psychological assistance is the second wave of support,” Dibenedetto explains, observing that such symptoms usually begin to manifest once people are settled into Emergency’s camps: “They begin to have memories, to feel separation from their families, they start to become stressed.”

Early intervention is vital, Dibenedetto emphasises: “When we make a diagnosis at the port, these are usually of acute stress disorder – a typical diagnosis in an emergency situation – and these symptoms can last from three days to one month. If we can perform early intervention, we can reduce the possibility of PTSD developing.” He notes that PTSD sufferers who do not receive treatment are also at risk of developing other mental disorders or medical problems. “Treating PTSD is costly, not only in economic terms, but for the individual and the people living with him or her. So early interventions also save money in the long run.”

For those who remain in the camps for a long period of time while waiting for their documents, rejection from the

the culture of the person I am treating,” he emphasises. “For example, last week I met a patient experiencing anxiety and panic attacks. But he explained to me that this was not panic, it was possession by a spirit, a jinn.

“We must integrate our knowledge within their culture and I’ve started to study the anthropology of their beliefs, especially by observing what traditional healers do in the camps.”

He recounts an incident where colleagues from another NGO called in a traditional healer – a shaman – during a psychological consultation. “The result of that therapy was very impressive. After a week, the patient felt better and started to regain his social abilities.”

Conversely, Dibenedetto has observed colleagues who neither believe nor accept the culture of those who they are working with, reading only the symptoms using western psychological approaches. “This is not constructive,” he comments.

The essential factor lies in establishing rapport and trust: “I try to consider what people are feeling, and what they consider to be real; at the same time,

Dibenedetto has observed colleagues who neither believe, nor accept, the culture of those who they are working with, reading only the symptoms using western psychological approaches

authorities can be particularly hard. “This is a very stressful period – the end of their dream. Their family may have paid a lot of money to get them to Italy, to Europe. We support them and let them know that they are not alone. We can help them cope and face the problem,” he tells me.

Many of those who arrive in Sicilian ports hail from the sub-Saharan region – Nigeria, Mali, Ivory Coast, Gambia and Senegal and, to a lesser extent, Eritrea and Ethiopia. They have usually sailed from Libya, after escaping prison or detention camps. Arrivals from the Middle East tend to have journeyed via Dubai and Turkey, purchasing a boat and travelling independently. Says Dibenedetto: “Sometimes we do get family groups from Pakistan, Afghanistan and Syria, but not too many.”

This is where cultural sensitivity and understanding come into play. Dibenedetto started work in immigration in 1999, when he travelled to Brazzaville in Congo to support a group of friars. In 2002, he visited Mozambique for missionary experience. The following year, he began his studies in psychology, qualifying as a psychologist in 2007 and he has been a psychotherapist since 2014. “When I qualified, I started to work for Caritas, as a manager of a family counselling centre for migrants on Lampedusa Island,” he says.

Since starting work at Emergency, Dibenedetto has experienced a crash course in spiritual diversity and ethno-psychology – a cultural shift from traditional western thinking. Migration psychology is extremely complex, like a puzzle one has to fit together, he explains. “When I started work in this field I used my assessment categories as an occidental psychologist. I would look for symptoms and then diagnose anxiety or depression. But I have realised that it is important to understand

I consider the science of psychology; in effect, integrating science and different beliefs.”

Dibenedetto adopts an integrated approach, owing to the variety of traumatic experiences of the people he works with: “You can meet a woman who was badly abused, you meet a man who has been tortured – these are different situations that need different interventions; you have to be adaptable.”

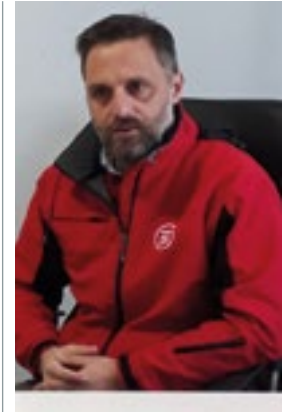
He continues: “It is all about finding a physical and personal connection, which is appropriate from person to person, across national and social groups. I use different interventions, including cognitive behavioural therapy and narrative exposure therapy – if you want to open a door, you have to use different keys until you find the right one.”

The gruelling narratives could take their toll on people caring for those in the camps. How do they cope? “The most important thing is to have supervision and other places where we can find support,” Dibenedetto replies. “We have monthly meetings where we share our experiences and feelings. And it is also important to alternate work schedules, for example, one week in the camps and one week at the port; one weekend off, one weekend on call.

“All those who work in this field, whether in care relations, psychologists, doctors, nurses or teachers, need time to rest. In psychology, we say that, ‘pathology can infect you’, so sometimes we have to cleanse ourselves. This is hard. When we meet outside work for a beer, all we do is talk about our jobs, about immigrants. We have to make a conscious effort to switch off, it is important for our health to do so.”

Dibenedetto says his work is a vocation: “I feel a calling, and have a passion for working in this field, and working with Emergency, which promotes peace and respect of human rights.”

■ Find out more at www.emergencyuk.org



Alessandro Dibenedetto: “If you want to open a door, you have to use different keys until you find the right one”

Emergency

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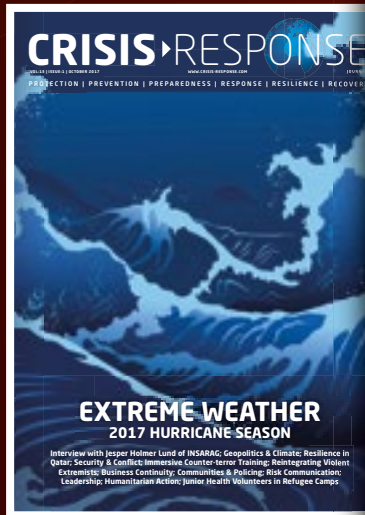
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