Emerging Minds.

Supporting wellbeing and resilience in children before, during and after a natural disaster

Facilitator’s Handbook
Community Leaders

National Workforce Centre for Child Mental Health
This training package provides education and practical strategies to support resilience and recovery in children (aged 0–12 years) following a natural disaster event. Developed for community-based delivery, the resource training package is comprised of a facilitator’s handbook, accompanying presentation slides, optional activities and handouts.

Part 1 of this handbook discusses the vital role that community members can play in supporting children before a natural disaster event.

Part 2 focuses on supporting children during and after a natural disaster event.

Flexible delivery

Facilitators are encouraged to tailor community education modules to the particular needs of their audience. Content has been broken into two modules, corresponding with Parts 1 – 2 of the guide. Modules can be delivered together or as a series of two shorter sessions. Sessions are anticipated to run for 30-40 minutes each. Four optional activities have been provided with module materials and are noted in the relevant section of the accompanying presentation slides. If preferred, the four optional activities can be delivered together as a further stand-alone module (i.e. as Module 3).

A Resource Matrix has also been provided to assist facilitators to access particularised resources (e.g. recovery after a bushfire, recovery after flood) for distribution in areas that may be impacted by particular types of natural disaster.

Additional notes

While the content and strategies contained in this training package will have significant cross-over applicability to large-scale, man-made traumatic events (such as acts of terrorism or mass domestic violence) there are points of difference in how children may perceive and respond to these types of trauma that have not been addressed in these materials. While acknowledging this cross-over, facilitators should emphasise that the specific focus of the education is supporting children in regard to natural disaster-related traumatic events.

• Unless otherwise specified, the term ‘child/children’ will be used throughout the materials as a global term encompassing babies, toddlers, preschoolers and primary school-aged children.

Acknowledgement:

This handbook was originally developed by the Centre of National Research on Disability and Rehabilitation Medicine, University of Queensland as part of the Queensland Government’s response to the Queensland Natural Disasters. [Kenardy, De Young, Le Brocque & March. (2011) Brisbane: CONROD, University of Queensland].

The materials and content have been revised and extended for use as part of the Emerging Minds: National Workforce Centre for Child Mental Health Community Trauma Toolkit.
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Part 1: Before a natural disaster event: Supporting children through disaster preparedness

Introduction

With its widely diverse landscape, Australia is susceptible to multiple natural hazards such as bushfires, floods, severe storms, earthquakes and cyclones. The threat of natural disasters can be frightening for anyone but can be particularly upsetting for children. Although children can be very resilient, they are vulnerable to trauma in highly stressful situations.

Natural disasters can impact on a child’s sense of safety and security, cause the loss of their home, school or social networks, and produce significant trauma and grief. Research indicates that, with the challenge of rapid emotional and psychological development, fewer coping resources and high levels of dependence on caregivers for protection, younger children may find such events particularly distressing. Children may react to traumatic events immediately, days, or even weeks and months after the event.

528,154 Australians were affected by disaster between 2006 and 2015, with 947 reportedly killed.

Red Cross World Disasters Report, 2016

Members of the community may come into contact with children in many different capacities (not just as parents, carers or family members). This may be as educators, neighbours, health workers, friends, coaches, retail staff, community activity leaders or just in passing by. No matter how long or short these interactions may be, they all provide opportunities to provide support and make a difference.

Timelines of a natural disaster: When does preparedness occur?

When thinking about the timelines of a disaster it is natural to think of a time immediately prior to the event; the period when the event occurs (and its immediate aftermath) and, finally, a short and long-term post-disaster period.

Community members may interact with children before and after a natural disaster event in various roles and capacities. Regardless of the duration of these contacts, there are many ways the wider community can support children before, during and after a natural disaster.
What is a traumatic event?

A traumatic event is defined as any situation that the child subjectively experiences as overwhelming (i.e. too frightening or painful). These events can be something experienced only by the individual (e.g. being in an accident, witnessing a terrible event) or events involving groups of people (e.g. floods, storms, bushfires). Up to one in four children will experience a traumatic event during childhood. Unfortunately, some children experience a number of traumas and the effect may be cumulative, which can make those children more vulnerable to stress reactions.

How do children react to traumatic events?

While the majority of children are resilient and will experience only minimal, short-lived distress after a natural disaster event, there is no way of predicting exactly how any individual child will react. Experiences and perceptions of threat will vary depending on the child’s developmental stage, age, personality, pre-trauma functioning and previous life events. The child’s reactions will also depend on how their parents, carers and other adults around them express their reactions during and after the traumatic event. Notably, children can and often do express trauma reactions in very different ways to adults. Some of these reactions might be adaptive and positive, whereas others may cause the child (and those around them) some difficulty and persist over time. Trauma reactions are often dynamic and can present differently at any point in time. For some children, witnessing the trauma or hearing about it can have as much of an impact as being directly involved in the event.

How can children’s reactions change over time?

Reactions to natural disasters may change over time. Often, families affected by a natural disaster will spend the first few weeks following the event surrounded by support and are busy managing the direct consequences (e.g. restoring their properties from destruction, helping neighbours or friends). Children and parents may be so busy during this time that they may not express the range and extent of their emotional reactions. This may be especially true for adolescents who can perceive greater personal responsibility for helping their family address challenges. However, when routines start to return to normal, support diminishes, and families have time to stop and think. It is at this point that many people may begin to demonstrate problematic emotional reactions.

Although most children will recover over time, there are some who will experience significant ongoing difficulties. If trauma symptoms or emotional and behavioural difficulties are left untreated or do not resolve on their own, symptoms can follow a chronic and unremitting course and can have a significant adverse impact on children’s social, emotional, behavioural and physical development. Symptoms may continue to be present 1-2 years later. Further, for some families, symptoms may only appear (or reappear) 6-12 months after the event, as economic and familial costs of the disaster begin to unfold. For example, some businesses will experience economic distress; parents may begin to suffer emotionally (e.g. depression) from the losses associated with the disaster, and children may subsequently begin to demonstrate symptoms of distress.

For some children, these problems become so interfering that they are considered to require professional assistance and support. For other children, having experienced the traumatic event may simply cause them to react differently to events over the following year. Some everyday events (e.g. homework, exams, arguments with friends) may trigger emotional or behavioural reactions (e.g. anxiety, depressed mood, fighting) that the person would not normally demonstrate.
In the months (and years) following trauma, children may experience a range of stress reactions. The most severe of these reactions and the most common include diagnoses of post-traumatic stress disorder (PTSD), other anxiety disorders such as separation anxiety disorder and panic attacks, and depression. Behaviour problems may be severe, such as oppositional defiant disorder (ODD) or conduct disorder, or may be expressed as increased aggression, interpersonal problems, substance use or risk-taking behaviours. Some children may have increased sensitivity to issues such as school yard or cyber bullying. Although some of these issues may appear to be minor, over time the cumulative effect may impact on the child’s development and ability to achieve and thrive emotionally, academically and socially.

**Babies, toddlers and trauma**

A common (but incorrect) belief is that very young children are not affected by trauma and do not notice or remember traumatic events. In fact, anything that affects older children and adults can also affect very young children. Babies and young children manage their feelings through caring relationships with parents and other adults and depend on them to feel safe and secure and to buffer their stress. This means they can be very sensitive to the emotional states of their carers and can quickly become unsettled and feel unsafe in situations where their carers are distressed. It is important to recognise that exposure to a traumatic event, such as a natural disaster, can impact upon the physical, behavioural, emotional and mental development of children of all ages – including babies and toddlers.

**Key points**

- The majority of children are resilient and experience only minimal transient distress after a traumatic event. Some even report feeling more confident or notice other positive changes following trauma. This is called Post-Traumatic Growth.
- Some children may express a lot of different reactions, or one intense reaction immediately following the event, but gradually return to their previous functioning over time. For some children, however, these reactions may intensify or develop into different emotional and behavioural problems.
- Some children appear resilient at first but display trauma reactions later on.
- Babies and very young children can be affected by trauma.

**Supporting children by being ‘disaster prepared’**

All children, including very young infants and babies, depend on adults to feel safe and will be significantly affected by how the adults around them are responding to a threatening situation. Children can quickly become unsettled and feel unsafe in situations where their carers are distressed.

One of the most important and effective ways to minimise children’s stress and anxiety in a natural disaster event is for the adults around them to remain calm and cope well.

**Distressed adults = distressed children.**

**Calm and coping adults = minimised stress for children.**

The key to remaining calm and coping well in a natural disaster event is to be prepared. In Australia, the start of a natural disaster season, or the issuing of an emergency ‘watch’ or warning, will often be the prompt for a range of practical and physical preparations. However, a related and equally important concept is the need for psychological preparedness.
Preparation need not only occur in the period immediately prior to a natural disaster. Being prepared well ahead of time, and reviewing plans regularly, can make a big difference to how individuals and families will respond and cope if there is a natural disaster.

Psychological preparedness
When people are under severe stress (such as in a natural disaster) they are often not able to think as clearly as usual and this can affect decisions and reactions. Having a better understanding of the psychological responses that might be experienced during a disaster can help adults and children alike to feel more in control and better able to cope. Maintaining a feeling of control during a traumatic event can reduce psychological distress and the longer-term mental health issues that can arise from the potential trauma of being involved in a natural disaster.

The Australian Psychological Society (APS) has developed a model that ‘AIMS’ for psychological preparedness in three steps. After running through the steps for themselves, community members can use the AIM approach to assist any children in their care to prepare psychologically for a potential disaster.

The AIM approach
1. Anticipate that you will be feeling worried or anxious and remember these feelings are normal, although not always helpful, responses to a possible life-threatening situation.

2. Identify the specific physical feelings associated with anxiety and any feelings or thoughts that you might have that might cause further anxiety. Are there ways you could manage these physically or psychologically?

3. Manage your responses using controlled breathing and positive self-talk so that you stay as calm as possible and can focus on the practical tasks that need attention.

Working through the AIM approach with children

- Work in an age-appropriate manner to help children to identify and label:
  1. The signals that the child’s body might display when they are anxious, scared or responding to stress in a disaster (e.g. shaking, feeling anxious, heart racing, shortness of breath, feeling sick, butterflies, needing to go to the toilet, jelly legs)
  2. The thoughts that they might have that accompany these body signs (e.g. ‘Something bad is going to happen’, ‘I’m so scared’, ‘I don’t know what to do’, ‘I can’t breathe’, ‘I’m going to get hurt’, etc.).

- Reassure children that strong bodily signals and frightening thoughts are normal ways our bodies react when we are scared, and they get us ready to run away or fight danger! However, sometimes they are unhelpful and stop us from doing helpful things and staying calm. Reassure them that there are things that they can do to feel more in control and manage unhelpful thoughts.

- Let children know that when they are feeling stressed or anxious that there are two very simple things that can help them feel more in control:
  1. Slow down their breathing (see examples in next section).
  2. Replacing frightening or unhelpful thoughts with more helpful ones. Teach children to replace their scary thoughts with helpful ones (e.g. ‘I know how to stay calm’, ‘We have a plan of what to do and we have practised the plan, so that should really help’).
Optional activity 1: Psychological preparation – Practical exercise (15-20 mins)

Optional activity 2: Practise slow breathing (5-10 mins)

Practical preparedness
There are simple and practical things community members can do to protect themselves and their families before a disaster.

- Write down your emergency contacts and other important numbers and keep them somewhere that’s easy to find (for you and others). Make sure to include family, friends, schools, utility services, etc.
- Identify the emergencies that might affect you (e.g. fire, flash flood, severe storms, blackout). Reliable information about risks and impacts of these might be found at your local council, library, local emergency services or by talking to people who have lived in the area for a long time.
- Identify where, how and when to get help (e.g. from emergency services, SES, local utility companies, local council).
- Obtain copies of existing local emergency plans. Schools, child care facilities, workplaces and aged-care facilities will likely have their own emergency plans. Ask how information will be passed on to you, what is expected of you, what services might be available and what they could do if services are disrupted.
- Tune in to emergency information (e.g. local ABC, emergency service Facebook and Twitter feeds, Bureau of Meteorology, emergency apps).

- Plan for pets/stock. Write down how you will manage pets/stock in an emergency.
- Write down information about any medical conditions that you have, as well as emergency contact details for your medical providers (e.g. GP, specialist, pharmacist, psychologist) and include this in your plan.
- Consider using Australian Red Cross RediPlan or ‘Get Prepared’ app to help you in your preparations.

The Australian Red Cross has lots of information and downloadable resources to help individuals and families prepare (and recover) from a disaster. Links to these resources are available in the Resource Matrix.

Won’t talking about a disaster scare the children?
Many people think that if they talk to children about the potential threat of a disaster then they will scare or traumatising them. In fact, the opposite is true. By encouraging children to actively participate in the development of an emergency plan you will provide them with a greater sense of control which will assist them in managing their fears.

By talking to children about a potential disaster event you will support them in feeling:

- more in control, which will assist them in managing their fears
- safer and more secure in the knowledge that you have a plan, are prepared and are able to manage the threat
- informed, educated and prepared no matter whether they are at home or at school when or if a disaster occurs; and
- reassured that even if a disaster does occur, the wider community will use its resources to work together.
Talking to children about a disaster will not scare them; rather, it will reassure them.

How to talk to children about disaster preparedness

The following strategies will greatly support and reassure children during and after the disaster-planning process:

- Tell children that disasters can happen and being prepared will help everyone keep safe. Be reassuring but don’t make unrealistic promises.
- Stay calm and speak with confidence when discussing the emergency plan. Use words and ideas that children can understand.
- Create an open and supportive environment where children know it’s ok to ask questions (but don’t force children to talk if they don’t want to).
- Accept that children may want to go over the ideas more than once. Asking the same question over and over can also be a way for children to ask for reassurance.
- Acknowledge the child’s thoughts, feelings and reactions. Let them know you think their questions and concerns are important and appropriate.
- Be matter-of-fact in manner and vocal tone. Don’t over-catastrophise.
- Don’t forget the pets! Telling your children that there is also a plan in place for their pets will be reassuring for them.

Summary

Children react differently to fearful situations depending on their age and personality. Their reactions will also be significantly affected by how the important adults in their lives are responding to a threatening situation. Children in a disaster situation will model off the behaviours of adults around them. One of the most important and effective ways community members can minimise children’s stress and anxiety in a natural disaster event is through being psychologically and practically prepared, remaining calm and coping well.
The aftermath of a disaster or community trauma can be overwhelming, confusing and difficult for all community members. Reactions will be at their most intense immediately after the event and children (and adults) will have different ways of dealing with the ‘big’ feelings they experience. Children may be particularly affected as their belief that the world is a safe place, or that adults would always be able to protect them, may have been shaken or lost.

During and immediate aftermath

Having already applied the AIM approach for psychological and emergency household preparedness (i.e. practical and physical preparedness), community members will be well-primed to provide an organised and calm response that will minimise stress and anxiety for themselves and those around them. In addition, the application of ‘Psychological First Aid’ (PFA) can be key to reducing distress and promoting coping and recovery in both adults and children immediately after the disaster.

Five elements of PFA

Evidence indicates that the process of helping adults and children to recover from natural disaster can commence immediately at the scene of a traumatic event and can continue into the recovery phase.

The five elements of PFA are:

1. Promote safety
2. Promote calm
3. Promote connectedness
4. Promote self-efficacy (i.e. the belief that one’s actions are likely to lead to positive outcomes and feeling able to help oneself)
5. Promote hope

PFA is most widely used in the first hours, days and weeks following events when those affected by a disaster will be experiencing a range of early reactions that may interfere with their ability to cope (although the principles can be used anytime). PFA supports natural recovery by helping people identify their immediate needs and their strengths and abilities to meet these needs. Research has shown that most people, including children, do not develop serious mental health issues after emergencies and, with basic support such as PFA, recover well.
PFA for children

Children, toddlers and babies in distress can show a variety of reactions. They may shake, babble, scream, cling, cry and be completely inconsolable. They may be completely silent, non-responsive and seem zoned out or frozen. They may swing rapidly between different behaviours.

In the chaos of a natural disaster event, children can become separated from their families. Families may be overwhelmed and require additional and support. Regardless of how long (or brief) contact with children may be during and after a natural disaster event, PFA can be key to reducing children's distress during and immediately after the disaster and supporting children in their resilience and recovery. The below diagram illustrates the 5 steps of PFA with appropriate adaptions made for children. Further elaboration of each point is also provided in the paragraphs following.

Additional reading:
‘Psychological First Aid: An Australian Guide’ available [here](#).
Tips for communicating with children after a disaster

- **Get down to eye level** with the child. If the child does not make eye contact, don’t try and make them.

- **Communicate calmness and reassurance** in your body language, vocal tone and gestures.
  - Maintain eye contact and use your body language (e.g. nods, shrugs, facial expressions) to show you are listening.
  - Speak in a confident and lower-pitched voice.
  - Remain calm and controlled.

- **Avoid saying** things like ‘Don’t be sad/angry/worried/upset’ to reassure a child or baby. Being told not to feel a certain way may invalidate the child’s feelings and leave them feeling shamed or misunderstood. Depending on individual circumstances, statements that reassure the child that they are safe now and assist them in thinking about their concern in a more positive or helpful way may be beneficial, such as ‘Yes, the thunder was loud but it didn’t hurt you, did it?’ or ‘Yes, there was lots of rain and wind but you were safe in the evacuation centre, weren’t you?’

- **Use words and explanations the child can understand.** If the child is verbal, try and model your language off the language of the child. If the child is not, still talk to the child. They may not have the words, but they will be listening and responding to your voice and body language cues.

- **Don’t force children to talk** if they don’t want to. Even if they are not talking, they will be listening.

- **Children may want to go over the ideas more than once.** Let them know you think their feelings and questions are important. Asking the same question over and over may also be a way for children to ask for reassurance.

- **If passing time with children**, try to involve them in play activities or simple conversation about their interests, according to their age.
Accessing assistance

- Talking with a doctor (i.e. your GP) is a great starting point to discuss any concerns and for referral to other services.
- Talk with teachers, child care professionals and other significant adults in the child’s life (e.g. family members, coaches, other carers). Have they noticed any changes? Are different behaviours occurring in different environments?
- Look into local mental health professionals (community based and private). Again, a GP is a great place to start for a referral.
- Community services and helplines are there to help. There are some services that parents, community members and children can access at any time, without having to go in and see someone in person. Many of these can be found on the internet and a few key services are listed below:
  - **Kids Helpline**
    1800 55 1800
    www.kidshelpline.com.au
  - **Lifeline**
    13 11 14
    www.lifeline.org.au
  - **Parentline**
    1300 30 1300
    www.parentline.com.au
  - **beyondblue**
    1300 22 4636
    www.beyondblue.org.au
  - **moodgym**
    www.moodgym.com.au
  - **Black Dog Institute**
    www.blackdoginstitute.org.au
  - **MindSpot**
    1800 61 44 34
    www.mindspot.org.au

When to seek additional help?

- Symptoms persist for longer than one month or worsen over time.
- The child or family are experiencing significant distress or concern.
- The child displays behaviours that disrupt others on a regular basis.
- There are difficulties that prevent the child from engaging in age-appropriate tasks.
- The child returns to behaviour/s typical of a younger child (e.g. difficulties toileting, using ‘baby talk’)
- The child displays specific (either ongoing or worsening) problems regulating emotions (e.g. difficulty controlling crying or anger).

Ongoing support after a natural disaster

Most children will find their ‘new normal’ and ‘new strengths’ in the months and years after a natural disaster event.

**Some simple support strategies in this time include:**

- Be patient and understanding.
- Give children the opportunity to talk. Children need close personal attention to feel safe. Opportunities to talk can be provided by trusted adults outside of the family (e.g. neighbours, teachers, coaches, etc.).
- Give young children the time to play.
- Maintain stability, routine and connection.
- Be on the lookout for any changes in behaviour.
- Focus on strengths and hopes when talking with children.
- Encourage and praise self-efficacy.
- Remember that children may face difficulties at times from anniversaries or reminders of events.

When to seek additional help?

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- The child or family are experiencing significant distress or concern.
- The child displays behaviours that disrupt others on a regular basis.
- There are difficulties that prevent the child from engaging in age-appropriate tasks.
- The child returns to behaviour/s typical of a younger child (e.g. difficulties toileting, using ‘baby talk’)
- The child displays specific (either ongoing or worsening) problems regulating emotions (e.g. difficulty controlling crying or anger).
The importance of self-care after a natural disaster

In order to be effective in supporting others it is essential to maintain good self-support. Self-care is particularly important in the context of the ongoing and often long-term stressors associated with rebuilding a community after a natural disaster. Some simple tips for community members to self-support include:

**Before**
- Prepare psychologically and practically.

**During and after**
- Acknowledge it is stressful and it is ok to have stress reactions.
- Take breaks away from the disaster scene and survivors. This applies both during a natural disaster event and in the time after.
- Recognise and heed signs of stress.
- Limit exposure to trauma and distress where possible (e.g. turn off television, radio).
- Drink enough water and eat healthy food.
- Use stress management tools that help you to relax (e.g. exercise, yoga, music, prayer, meditation, relaxation techniques).
- Plan pleasant events (see ‘Pleasant events schedule’ in Activity 3).
- Seek additional support if needed.

Self-care plan and pleasant events schedule

A simple tool for helping individuals to manage stress is a ‘self-care plan’. Self-care plans assist people to think about and identify their own personal signs of stress and then plan strategies in advance that can assist them to manage stress when it occurs. Self-care plans can be used to prepare for specific difficult situations or to come up with ideas to help you manage stress generally. The example on page 15 provides an example of how to create a ‘self-care plan’.

‘Pleasant events schedules’ are another simple tool that encourages individuals to plan for and carry out activities they enjoy, thereby supporting personal wellbeing. The example on page 16 provides an example of a pleasant events schedule.

Optional activity 4: Create a self-care plan and pleasant events schedule (10–20 mins)

Summary

Children’s reactions to a fearful situation (like a natural disaster) will be significantly affected by how the adults in their lives respond. After a disaster, most adults and children will cope and recover over time with the right help and support.

There are many valuable ways all members of a community can assist children in their wellbeing and recovery in the days, weeks and months after a natural disaster event.
## Self-care plan example

<table>
<thead>
<tr>
<th>What are your personal signs of stress?</th>
<th>My personal signs that might tell me I am becoming stressed or finding it difficult to manage are:</th>
</tr>
</thead>
</table>
| What are the signs that might tell you that you need to take some time to care for yourself? (E.g. irritability, decreased concentration, withdrawing from friends/activities) | • feeling edgy or restless  
• losing patience easily  
• difficulty planning things  
• I stop seeing friends/family as much |

<table>
<thead>
<tr>
<th>What strategies can you use to manage stress?</th>
<th>The strategies I would be able to use to manage stress include:</th>
</tr>
</thead>
</table>
| Be as specific as possible. (E.g. ‘practice abdominal breathing for 10 minutes’, ‘talk to my partner’, ‘go for a run’). | • exercising each day for at least 20 mins  
• talking to my partner about how I am feeling  
• using my mindfulness app to help me ‘calm and centre’  
• identifying unhelpful thoughts and replacing them with helpful thoughts. |

<table>
<thead>
<tr>
<th>Who can you call upon for support?</th>
<th>If I need extra support, I can ask/talk to:</th>
</tr>
</thead>
</table>
| Try and identify multiple people in different areas. (E.g. family, friends, colleagues) | • partner  
• friends  
• family  
• trusted work colleagues. |

<table>
<thead>
<tr>
<th>What enjoyable activities can you include in your routine over the next month? When?</th>
<th>The activities that I will try to include in my routine (and stick to!) are:</th>
</tr>
</thead>
</table>
| Try to make a list of various activities (big and small). Then schedule them into a Pleasant Events Schedule. | • going for a 30 min run, three times a week  
• seeing a movie with my partner  
• taking the kids to the beach for a swim on the weekend  
• taking 10 mins for myself to have a coffee and read a book. |
Part of feeling good is about planning, and carrying out, activities that we enjoy. Use the schedule below to plan your activities over the next week. Try to do at least one activity a day and include a mix of activities with other people as well as ones you do on your own. Remember, activities don’t have to take lots of time to be enjoyable.

### Pleasant Events Schedule

<table>
<thead>
<tr>
<th></th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
<th>Saturday</th>
<th>Sunday</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Morning</strong></td>
<td></td>
<td>Before work – 30 min run</td>
<td>Before work – spin class</td>
<td></td>
<td>Morning sweat sesh and coffee</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Afternoon</strong></td>
<td>Take lunch out of office and sit in park</td>
<td></td>
<td>Take lunch out of office and sit in park</td>
<td></td>
<td></td>
<td></td>
<td>Beach time!</td>
</tr>
<tr>
<td><strong>Night</strong></td>
<td>Watch movie</td>
<td></td>
<td></td>
<td></td>
<td>After work – 30 min run</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Part 3 Appendix: Additional information and resources

Training module breakdown

Two modules of 30-40mins each (depending on activities utilised by trainer and individual delivery pace). Flexibility to deliver together or at different times.

The delivery times (below) have been calculated as incorporating 15 mins of activities (i.e. 1–2 activities per session).

**Module 1**
Intro + Before a natural disaster: Supporting children through disaster preparedness
21 slides + 2 optional activities

**Module 2**
Intro + After a natural disaster: Supporting children in the short and long-term
23 slides + 1 optional activity

Additional information and resources for Appendix/Facilitators Kit

- Presentation slides
- Fact sheets x 5
- Activities list
- Blank pleasant events schedule
- Blank self-care plan
- Resource matrix