Rhondy Rahardja, an Indonesian student at Virginia Tech, meets with us regularly to help us practice our Indonesian. We gathered at Fred Piercy’s house the day after Christmas, for what we anticipated to be a festive occasion; however, it was marred by news of the tsunami that leveled much of the coast of Aceh, Indonesia. Although hasty phone calls that day assured Rhondy and his family that none of their close friends or family members had been hurt, the early news reports filled us with foreboding.

Five days later, Fred received an e-mail from his friend and former student, Irwanto, director of the Atma Jaya Research Center in Jakarta, Indonesia, who asked, “How soon can you come to Indonesia?” Irwanto explained that there was great need in the wake of the tsunami. “We are anxious to provide community action support to children and families. I hope you can help us,” he said.

Irwanto anticipated that Fred’s knowledge of Indonesian culture, language, and family therapy would make his presence there helpful. Further, Maggie lived nine years in the remote Indonesian province of Papua. A family therapist and a speaker of Indonesian, she could contribute to the train-the-trainer workshop that Irwanto envisioned.

Within a month, we received funding from Atma Jaya, Virginia Tech, and a local church, and were on a plane to Jakarta. Meanwhile, Irwanto and his colleagues organized the training workshop, “Psychosocial Interventions for Children and Families Surviving Natural Disasters.” Thirty-five psychologists and other mental health professionals who were either from Aceh, or were going to Aceh, were our participants.

The Tsunami
By the time we arrived, the impact of the tsunami was clear. Over 150,000 people in Aceh and nearby regions died and 700,000 were homeless. The first stage of disaster relief—providing water, food and shelter to shattered families, reuniting families, finding the dead—was in full force, and mental health issues were gaining attention. Children were without their parents. Wives had lost their husbands. Many family members were missing and presumed dead. One friend, Tia, whose extended family lived in Aceh, said she’d lost seven aunts, uncles, and cousins, and other family members were missing.

The epicenter of the earthquake was off the coast in northern Sumatra, and created a 50-to-100-foot wall of water that swept across Aceh’s coast and traveled six miles inland, and then sucked much of what it had destroyed back to sea. One of our Aceh participants called it a “horrible, black wall of water.” Another participant’s family saved themselves by climbing up into the rafters of their home. Their eight-year-old son is now terrified of water, even of holding a glass of water or taking a shower.

The Workshop
Given the central importance of family to the Indonesian culture, a disaster like this—which shattered so many families—threatens the social core of Indonesian society. We talked about ways to bring communities together and make use of their strengths. We presented basic counseling skills for working with children and families, with an emphasis on connecting with local knowledge and culture, on resilience, and on community participation.

Participants recognized that local cultures had knowledge and strengths that have helped them survive past disasters. One participant told of a Sumatran village in which some of the residents remembered the stories of their ancestors, telling them that when the sea rushes away from the shore, they should run into the hills. The small group who recalled the story and ran to high ground were saved from the tsunami, while the rest of the village perished.

We offered our knowledge based on current trauma research, as well as activities that allowed participants to practice new skills. We spent our days and nights interacting during meals and breaks so that our continuous discussions became interwoven accounts of both the personal and the professional.

Participants were eager to apply family therapy ideas that would help families and communities. They were also eager for answers to questions such as, “What can families do to grieve a loss when the body of a loved one cannot be recovered?” “What
kind of interventions might work with the large numbers of children we have in schools and orphanages?” and “What if extended family members who adopt an orphaned relative into their home resent the child?”

Family therapy was new to most of the participants, who were generally trained with a focus on individuals. Yet, they were enthusiastic about the potential of systems thinking and family therapy approaches, such as solution-focused and narrative therapies, which emphasize resilience and community.

Several local experts gave presentations, too. A psychiatrist covered basic disaster mental health and PTSD information; a psychologist from Aceh explained cultural factors particular to that region; and a geologist discussed what happened to cause the tsunami. One participant from Aceh wept when she learned that information was available about the tsunami from a center in Hawaii a half-hour before it struck, but there was no official place in Indonesia to receive the information.

In a powerful closing ceremony, participants came forward, one by one, and shared the name of someone who inspired them—someone to whom they were dedicating their work. Some mentioned the children of Aceh, the positive spirit of Indonesia, and those who lost their lives. Others mentioned personal mentors or family members. As they came forward, they took a piece of paper cut in the shape of a hand and glued it around a map of Indonesia.

The resulting map, resting in the hands of loving, committed Indonesian professionals, will take a prominent place within the department of psychology at Atma Jaya University.

Ongoing Efforts

We realize brief training alone will not be enough. We are currently collaborating with our Atma Jaya colleagues to develop further training, and possibly a disaster mental health program to respond to current and future needs. In the midst of this overwhelming tragedy, we are nonetheless pleased that we could join our Indonesian colleagues as a small part of the recovery process.

MARGARET L. KEELING, PHD, is assistant professor and clinical director of the marriage and family therapy doctoral program, Family Therapy Center of Virginia Tech, Blacksburg, VA.

FRED P. PIERCY, PHD, is professor and head of the Department of Human Development, Virginia Tech, Blacksburg, VA. Piercy is a Clinical Member of the AAMFT and an Approved Supervisor.