



AUSTRALASIA PACIFIC PLAY THERAPY ASSOCIATION

Post-Disaster Response Policy

1. Purpose of the Post-Disaster Response Policy

APPTA acknowledges the immense impact disasters have on individuals, families and communities. As a leading organisation of Play Therapists in Australia and the Pacific, APPTA members can provide important therapeutic interventions for children, families, and communities in order to support well-being and minimise the effects of collective trauma events. This policy aims to provide guidance to APPTA members to guide their practice in post-disaster response work. In *Figure 1*, the role of mental health professionals depicts various phases of a disaster and post-disaster; this figure highlights the need for recognition of different responses at various stages of the disaster or post-disaster scenario.

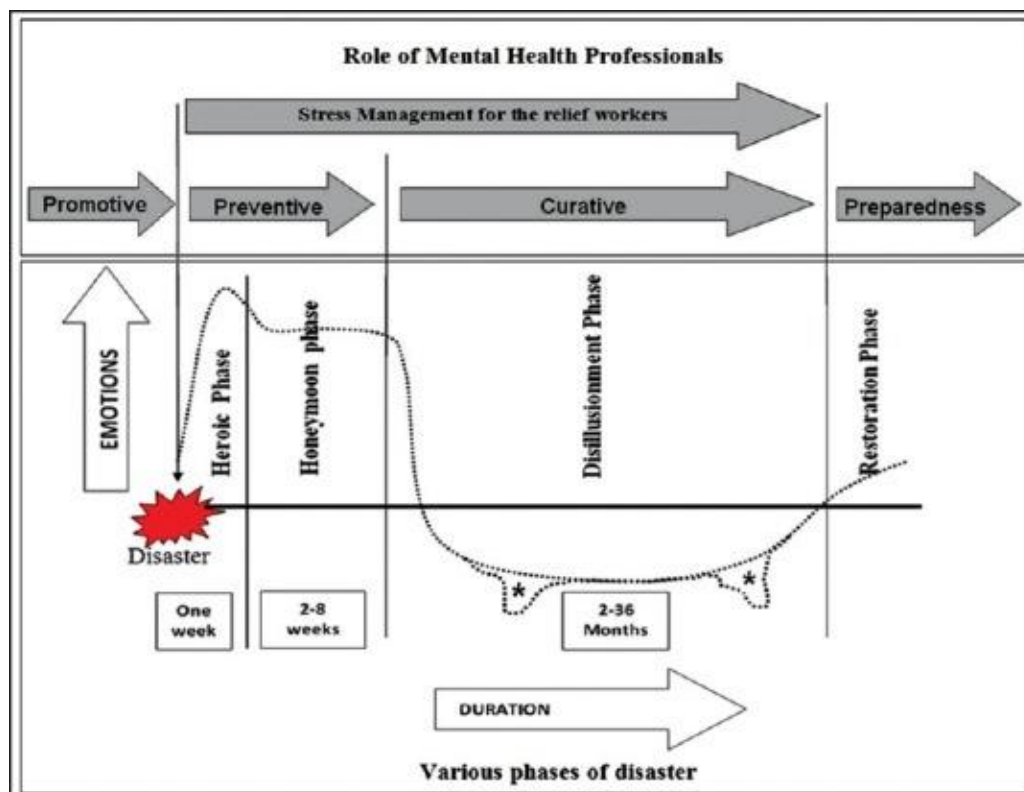


Figure 1. Role of mental health professionals (Math, Nirmala, Moirangthem & Kumar, 2015)

2. APPTA’s Initial Post-Disaster Response

The APPTA Board of Directors is committed to maintaining up to date knowledge of the disaster management arrangements of each Australian State and Territory in order to advise their membership in an organised and timely manner. The initial response besets both the heroic and honeymoon phases of *Figure 1*. APPTA’s initial response will be:

1. Publishing disaster responses on the website with guidance and links to policy and documentation for members.
2. Ensure the State of Territory APPTA representative/s connect with members (RPT-S and RPT) in the affected State/s and/or Territories in alliance with 2.3
3. Members are to consider their individual scope of practice for post-disaster work, and base any support on the current government regulations and post-disaster research. APPTA recommends members review Table 1 below, which extends on “Postdisaster roles for Mental Health Professionals, and Questions for Determining Roles:” (VanFleet & Mochi, 2015, p.177).

Table 1: *Reflexivity when considering post-disaster play therapy roles*

	Post-Disaster Roles for Play Therapists	Self-Reflective Considerations
1	Identify the post-disaster services and organisations in your local area.	How can play therapy complement the organisations post-disaster response?
2	Coordinate with charities, organisations and government agencies.	Consider what is in your scope of practice that you may offer?
3	Provide assistance with activities of daily living.	What is required now and what therapeutic recreational activities may support the community?
4	Triage needs based on a sound assessment.	What needs to be prioritised now and for future support?
5	Assist in the planning and delivery of playful activities.	How can you plan for systemic longevity and sustainability?

6	Offer consultation for establishing creative play resources to meet the needs of the community.	Consider developmentally and culturally sensitive toys and play resources for therapeutic activities?
7	Offer training and supervision to local personnel with consideration to their scope of practice.	What expertise do you bring from your primary discipline as well as Play Therapy and Filial Therapy training?
8	When assessed as appropriate deliver therapeutic interventions for children through families and significant others within the community.	How would you consider and scaffold therapeutic interventions within a systemic framework?

4. APPTA recommends members review Table 2 as they plan their scaffold therapeutic response. Careful consideration by play therapists' is advised as they decide what support they can offer sequentially throughout the timeline for community recovery. This table was adapted and extended from "Three levels of post disaster intervention" (VanFleet & Mochi, 2015, p.180).

Table 2: *Therapeutic scaffolding post-disaster*

Level of therapeutic response	Type of therapeutic activity and intervention	Desired focus of activity and intervention
Normative activities	Culturally appropriate, playful, inclusive, games, sports and other social activities. These activities can be facilitated by the therapeutic practitioner or led by children and families in conjunction with the community members, organisational staff and the practitioner.	To provide a sense of normality through socially engaging playful and fun activities. This provides a platform for the organisation and practitioner to build and strengthen community relationships and identify needs.

		<p>Ensuring safety within the environment may enable tensions to be released.</p> <p>It is through these actions that a trusting relationship may be strengthened.</p>
Therapeutic activities	<p>Developmentally and culturally sensitive social activities with clear linkage to identified needs.</p> <p>Activities should be planned and recorded using clinical documentation.</p>	<p>To alleviate stress, develop skills and coping strategies, provide opportunities for problem solving, build resilience, further develop relationships and engage in ongoing assessment of needs.</p>
Play therapy	<p>The timing of service delivery of individual, family or systemic interventions should be planned based on clinically informed post-disaster best practice.</p> <p>Adhere to APPTAs Clinical Competencies and Practice Standards (2014).</p> <p>Provision of Play Therapy in accordance with practitioner's level of training and expertise.</p> <p>Interventions may include humanistic, directive, group,</p>	<p>To provide play therapy interventions for children, family and communities to support the social and emotional wellbeing and healing post-disaster.</p> <p>To offer ongoing assessment and progress referrals for additional service provision when needed.</p> <p>To advocate for children to support family and community cohesion.</p>

family, and systemic models of play therapy practice.

5. Phases to consider when undertaking post-disaster work

After the initial response of the heroic and honeymoon phases, mid-term and longer-term phases of post-disaster work may encompass the disillusionment and restoration as depicted in *Figure 1*. (see above) (Math, et al., 2015). Play therapists are encouraged to consider the emotional impact of a disaster over time, and apply this when planning an intervention, with special consideration to the disillusionment phase (Math, et al., 2015). It is important to consider the longer term therapeutic involvement of service provision for communities effected by distasters. The restoration phase can be a particularly important period for therapeutic work with individuals, families, organisations and communities (Math, et al., 2015). This can also be a very appropriate time for research to be conducted which can assist with informing future crisis and post-disaster support and practice. It may also be appropriate for play therapists to provide consultation to communities and psychoeducation that can support the preparedness for potential future crises and/or provide protective factors to ameliorate adversity (Math, et al., 2015). Systemic therapeutic work, community consultation or training may be especially appropriate for ensuring communities are supported long term and are provided with a flexible and adaptable skill set that play therapy modalities such as filial therapy may offer. See VanFleet & Mochi for further information.

6. Requirements of APPTA members volunteering or engaging in paid post-disaster roles

1. APPTA members working in post-disaster scenarios must ensure their APPTA registration in valid and essential aspects of membership such as: a current Working with Children's Check (WCCC) and ongoing clinical supervision are maintained.
2. APPTA recommended member check with their employer, charity agency, and/or professional indemnity insurance company as to the level of their insurance coverage prior to commencing any crisis or post-disaster work. It is important to

ensure the play therapist works within the scope of practice covered by the insurance policy.

3. Therapists should access clinical supervision specific to their work with disaster response. This may mean additional consultation with a clinical supervisor who is experienced in crisis and/or post-disaster work. Consider contacting APPTA for guidance to locate a suitably experienced RPT-S or RPT support and potentially seek personal therapy if required.

Useful resources for play therapists responding to a disaster

- APPTA: [Clinical Competencies and Practice Standards](#)
- APT: [Information on the Coronavirus disease 2019](#)
- Rise VanFleet: [Pandemic Response for Mental Health and Play Therapists – Some Thoughts and Considerations](#)

- Dee Ray: [Child-Centered Play Therapy and Telehealth](#)
- Garry Landreth: [Life Changing Play](#)
- Beyond Blue: [Looking after yourself during the Corona Virus Outbreak](#)
- Emerging Minds: [Communicating with your child about COVID-19](#)
- Mentally Healthy Schools: [Responding to the coronavirus: resources for mental health and wellbeing.](#)

- American Counseling Association: [Mental health, professional counselling and emergency preparedness](#)
- Easterseals Illinois Autism Partnership: [My Coronavirus Story](#)
- Manuela Molina: [COVIBOOK](#)
- Daniel Feldman (2019): [Children’s play in the shadow of war](#)
- United Nations Human Rights Office of the High Commissioner: [Convention on the Rights of the Child](#) . See Article 31- Children have the right to play.

Tele-Health resources

- Australian Psychological Society (APS):
 - [Considerations for providers](#)
 - [Principles for choosing videoconferencing technology](#)
 - [Telehealth: FAQs for providers](#)

- American Psychological Association (APA):
 - [Guidelines for the practice of telepsychology](#)
 - [Telehealth continuing education resources](#)

Online professional development

- [COVID-19: Tackling the Novel Coronavirus](#)

References

Math, S. B., Nirmala, M. C., Moirangthem, S., & Kumar, N. C. (2015). Disaster Management: Mental Health Perspective. *Indian journal of psychological medicine*, 37(3), 261–271. Retrieved from <https://doi.org/10.4103/0253-7176.162915>

Mochi, C., & VanFleet, R. (2009). Roles play therapists play: Post-disaster engagement and empowerment of survivors. *Play Therapy*, 4(4), 16–18. [Link to article](#)

Shenandoah Valley Project Impact (2017). *Disaster Activity Book for Kids*. [Link to article](#)

VanFleet, R., & Mochi, C. (2015). In S. Goldstein, R.B. Brooks, & D. A. Crenshaw (Eds.) *Play Therapy Interventions to Enhance Resilience* (pp. 168-193). New York: The Guilford Press.

Play therapy recommended readings

Glazer, H. (2017). Play Therapy in the Digital Age: Practice and Training. In S. L. Brooke, S. L. (Ed.) *Combining the Creative Therapies with Technology: Using Social Media and Online Counseling to Treat Clients* (pp. 25-33). Springfield: Charles C Thomas.

Mochi, C., & VanFleet, R. (2009). Roles play therapists play: Post-disaster engagement and empowerment of survivors. *Play Therapy*, 4(4), 16–18. [Link to article](#)

Parson, J., Renshaw, K., & Hurt, A. (2019). RxTxT: Therapeutic Texting. In J. Stone (Ed.) *Integrating Technology into Modern Therapies. A Clinician's Guide to Development and Interventions* (pp.64-79). New York: Routledge Taylor & Francis Group.

VanFleet, R., & Mochi, C. (2015). In S. Goldstein, R.B. Brooks, & D. A. Crenshaw (Eds.) *Play Therapy Interventions to Enhance Resilience* (pp. 168-193). New York: The Guilford Press.