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CLINICAL PSYCHOLOGY | RESEARCH ARTICLE

"It was touching": Experiences and views of students in the June 3 flood and fire disaster relief response volunteerism in Accra, Ghana

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Abstract: Evidence from Africa on the motivations and experiences of student volunteers in community disaster relief response programmes are rare. This study explores the experiences and views of the students, who volunteered at the emergency mental health relief response site after the 3 June 2015 flood and fire disaster in Accra, and the implications for future professional response work in Ghana. Thematic analysis of 15 qualitative in-depth interviews showed that, overall, the student volunteers were both *self-oriented* and *other-oriented*. The students viewed work at the emergency response site as a *touching experience* and a *call of duty*. The response work provided the students with practical pathways for linking their clinical and community learning experiences. This study recommends that, rather than an *ad hoc* response team, the Ghana Psychological Association (GPA) should consider setting up a standing disaster relief response network to provide mental health relief and recovery response in community emergency situations in Ghana.

Subjects: Theories of Learning; Psychology and Nursing; Counselling Psychology; Mental Health

ABOUT THE AUTHOR

Disasters, whether man-made or natural, have devastating effects on any community. However, across LAMICs, broadly, although disasters of higher magnitude are frequent, there is an acute human resource crisis to help ameliorate the mental health challenges that victims and survivors of disasters experience. As an interdisciplinary team of researchers who believe in the tenets of *task shifting*, we seek to explore how institutions of higher learning within LAMICs can exploit the availability of, mainly, students (and mental healthcare trainees) to help deal with the problem. Thus, both professionals and students can work together to provide mental healthcare services to victims of disasters, through organised emergency relief response programmes. Our hope is that the evidence base in the area will grow steadily to warrant the setting up standing emergency relief response networks by the various mental healthcare professional bodies across the region, to deal with the problem.

PUBLIC INTEREST STATEMENT

There is enough evidence to suggest that students in higher institutions of learning consistently report numerous benefits for *self* and *other*, following engagement in community service programmes, which are designed as a part of academic modules. However, there is limited evidence on student motivations and experiences regarding spontaneous volunteerism, following acute emergency situations in communities. In Africa, the evidence is rare. In this study, we used one-to-one qualitative interviews to explore the views and motivations of 15 psychology students, who volunteered at the emergency mental health relief response site, after the 3 June 2015 flood and fire disaster in Ghana. The results showed that the students were motivated to volunteer as a way to: help the victims and survivors, given the touching nature of the disaster; gain pre-employment experiences and benefits; and publicise *psychology* in Ghana. Setting up a standing disaster relief response network can facilitate students' spontaneous volunteerism in Ghana.

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1. Introduction

Emergency-affected contexts resulting from conflicts, natural disasters or both continue to affect many populations in low- and middle-income countries (LAMICs) (Norris, 2005; Patel, 2003; Patel et al., 2007; World Health Organization [WHO], 2003). However, many LAMICs do not have planned strategies for grappling with disasters and their aftermath effects (Patel, 2003). In Ghana, disasters of higher magnitude requiring emergency relief response and intervention are becoming a major source of yearly national trauma, especially in the national capital, Accra (Ahadzie & Proverbs, 2011; Amoako, 2012; Amoako & Frimpong Boamah, 2015; Daily Graphic, 2015). On Wednesday, 3 June 2015, an approximately six-hour heavy rain resulted in vehicular traffic congestion, as major parts of the city of Accra were flooded. This left households, offices, traders and commuters stranded, while business activities were disrupted for hours. In the midst of this sombre condition, a filling station within one of Accra's busy business centres, Kwame Nkrumah Circle, caught fire, with the fire breaking out ubiquitously, as stored petroleum products gushed, while flood waters rose incessantly and inundated the banks of nearby stream and drains. Hence, simultaneously, some buildings and other landed properties, vehicles and people within the immediate vicinity of the filling station were burnt and submerged. The combine efforts of various emergency rescue teams did not yield much to salvage the situation, particularly, as regard saving lives of vulnerable people and households. Thus, described as the worst disaster in Ghana's history, the June 3 flood and fire disaster which hit Accra in 2015 claimed over 152 lives (including women and children), destroyed properties worth millions of dollars and left scores of people with various degrees of injuries and deformities (Daily Graphic, 2015; Ghana Psychological Association [GPA], 2015).

According to Patel (2003), "the most important aspect of disaster relief is to provide for the basic needs of those affected, which include food, drinking water, shelter and emergency medical aid for injuries" (p. 199). Thus, days following the June 3 flood and fire disaster saw various efforts by several humanitarian agencies, and charity organisations and groups across the country (including religious groups, non-denominational groups and the National Disaster Management Organisation —NADMO) bring relief and support to the survivors and victims of the disaster. Largely, these humanitarian and relief efforts were aimed at providing the survivors and victims with subsistence aid and material support (e.g., food, medical relief items, bedding items, clothes etc.).

Mental health problems and social stressors have been found to be common in populations experiencing emergency situations related to natural disasters and conflicts (Batniji, Van Ommeren, & Saraceno, 2006; Dyregrov, 1989; Neuner, Schauer, Klaschik, Karunakara, & Elbert, 2004; Patel, 2003; Patel et al., 2007; WHO, 2003). In this light, the Inter-Agency Standing Committee (IASC) recommends that humanitarian efforts and intervention programmes during and in the aftermath of disasters should include the implementation of mental health interventions and psychological support programmes (Inter-Agency Standing Committee [IASC], 2007, 2010). Along with this recommendation by IASC, the Department of Psychiatry of the University of Ghana School of Medicine and Dentistry (UGSMD) set up an *ad hoc*, spontaneous voluntary emergency response team, within the site of the June 3 flood and fire disaster. The aim of the UGSMD voluntary emergency response team was to provide free mental health intervention and relief to help ameliorate (potential) trauma-related distress in the survivors and victims, in the aftermath of the disaster (GPA, 2015). The UGSMD voluntary emergency response team was composed of 68 volunteers, including clinical psychologists, residents in psychiatry, community health nurses, psychiatric nurses, members of the *Psych Corps*[1] and clinical psychology students.

Generally, the UGSMD voluntary emergency response team offered onsite counselling, mental health screening and other group post-acute emergency intervention services free of charge to the survivors and victims of the June 3 flood and fire disaster. The relief response work by the UGSMD voluntary emergency response team at the disaster site lasted for several weeks (GPA, 2015). Thus far, the UGSMD voluntary emergency response work in the aftermath of the June 3 disaster remains, notably, the first largest community acute emergency relief response and intervention to be organised, involving professionals and students of mental health in Ghana.

Although relief response and intervention programmes have been found to be necessary during and in the period after acute emergency situations (Dyregrov, 1989; IASC, 2007; Patel et al., 2007; WHO, 2003), not much is known with reference to the outcomes of emergency interventions and the (shared) experiences of the volunteers involved in such emergency response efforts and programmes (Kritzinger & Pillay, 2010; Patel et al., 2007; Steffen & Fothergill, 2009). Studies from Africa providing evidence on the motivations and experiences of, especially, student volunteers involved in relief response programmes in community acute emergency situations are particularly rare. To the best of our knowledge, as social science and mental health researchers in Ghana, the present study represents the first attempt at systematically exploring the experiences and views of students in volunteering at an emergency (mental health) relief response programme following a disaster in the country.

Generally, there is a paucity of literature, specifically, on the experiences and motivations of student volunteerism in community emergency relief situations. Thus, additional evidence on student volunteerism in the area of community service-learning have been reviewed to contextualise the present study. The extant literature shows that younger people, particularly students, are more likely than older people to volunteer in providing support and relief to survivors and victims of disasters (Kaniasty & Norris, 1995). For example, following the 11 September 2001 attacks on the World Trade Centre in the USA, medical students from the Mount Sinai School of Medicine in New York City were integrally involved in playing significant roles to provide relief to the survivors and victims of the attacks. In 2002, Katz, Gluck, Maurizio, and DeLisi (2002) investigated the emotional impact of this involvement among 157 (98 female and 59 male) of the medical student volunteers. The survey was posted to the participants (3.5 months) after the attacks. Specifically, the survey explored the personal and professional involvement in the disaster and the related psychiatric symptoms among the medical student volunteers in the immediate week after the attacks and during the time of the study. The researchers predicted that the student volunteers' participation in the relief response work would enhance their self-appraisal, but be negatively related to their emotional symptoms, both in the immediate period of the relief response work and in the months following the attacks. The findings of the study indicated that even though the voluntary work did not contribute to any psychiatric problems, it was suggested that the voluntary work was associated with improved professional self-esteem among the medical students.

Similarly, following hurricanes Katrina and Rita in the USA, Plummer et al. (2008) conducted a cross-sectional survey to examine the predictors of volunteerism and voluntary work in the Gulf Coast among 416 social work students (59.1% of whom were graduate students). Even though the authors did not report the response rate of the survey, the results showed that the majority (97%) of students volunteered, even though they were also experiencing various levels of hurricane-related stressors. Hurricane-related stressors, previous traumatic experiences, increased commitment to professional (social) work values and altruism were all found to be the strongest predictors of volunteerism among the students.

Furthermore, in the aftermath of the 27 April 2011 tornados which destroyed several communities across Alabama in the USA, several disaster relief efforts were organised, involving thousands of volunteers across neighbouring communities (Taylor & Taylor, 2012). According to Taylor and Taylor (2012), the students involved in organising and engaging in those disaster-relief

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activities within the northeast Alabama community evaluated their volunteerism as a real-life engagement learning experience, as they reported improved coping ability and reduced feelings of shock and loss. The student volunteers also reported enhanced spiritual and emotional growth, as a result of the relief response volunteerism.

Recent evidence from Africa, in the of area student community service-learning, show that, in Ghana, University students perceive engaging in community service-learning to be of potential significant benefits to them (including, but not exclusive to): enhancing their career development, as they would obtain valuable knowledge and gain hands-on work experience for their CVs; helping to improve their communities; and gaining personal satisfaction, knowing that they are helping others in their communities (Tagoe, 2014). Similarly, in South Africa, psychology students who engage in community service programmes, as part of their academic modules, tend to report progressive shifts in their understanding of the application of psychological theories to real-life situations; enhanced problem-solving ability; increased sense of personal satisfaction, due to making contributions towards improving the life situation of socially disadvantage groups in the community; and increased sense of social awareness (Akhurst, Solomon, Mitchell, & van der Riet, 2016). More recently, the participants in a study from Zimbabwe, on community service-learning programmes (Pacho, 2017), reported improved academic competence, enhanced moral and spiritual development and improved interpersonal and intercultural competencies. According to Pacho (2017), the participants also commonly reported that their experiences in the community service work shaped and challenged their chosen career paths, as their duties on the community service programmes brought them into contact with the real-life issues and the potential people they would work with in future employment.

2. The functional approach to volunteerism

This study is guided by the functional approach to volunteerism (Clary & Snyder, 1999). This theory of volunteerism helps us understand what drives individuals to become volunteers and their ability to sustain their volunteerism. According to Clary and Snyder (1999), volunteerism serves six major functions: individuals volunteer to express their values, understand the world they live in, enhance their psychological growth, gain career-related experience, strengthen social relationships and reduce negative emotions. These factors are categorised into "self-oriented" and "other-oriented". For example, student volunteers may seek to enhance their career experiences and to learn more about the world by applying the skills they have acquired. These characterise the self-oriented motivations. Other-oriented motivations include the ability to strengthen social relationships and reducing feelings of guilt in victims through the provision of humanitarian services. Thus, student volunteers may want to help others relieve their pain and suffering and to help themselves gain new learning experience.

The functional approach to volunteerism also takes into consideration certain factors that determine the satisfaction one derives from volunteerism. Typical of such factors include the need to match one's motivation to the volunteering situation. Clary and Snyder (1999) assert that volunteers derive greater satisfaction when their motivational concerns or functions are served by their engagement in the volunteering process. This assertion is consistent with an earlier finding that volunteers who perceived having greater benefits in relation to their motivational concerns or functions from volunteering were those who were more satisfied, compared with those who perceived fewer benefits (Clary et al., 1998). Again, Clary et al. (1998) found that university students had greater intentions to continue as volunteers when they received functionally relevant benefits from their engagement in community service programmes, in both the short and long terms. These factors show the relevance of matching one's motivation to the volunteering activity and sustaining the volunteering process.

The aim of this study, therefore, is to explore the experiences and views of the students who volunteered at the emergency mental health relief response site, after the 3 June 2015 flood and fire disaster in Accra, and the implications of these experiences for future community emergency response work in Ghana.

3. Method

3.1. Setting and sample

The Legon campus of the University of Ghana in Accra was the site for this study. The target participants for this study were the student volunteers involved in the UGSMD voluntary emergency (mental health) response work in the aftermath of the June 3 disaster in Accra. All the students who volunteered at the disaster relief response site were master's degree students of Psychology at the University of Ghana, who were also resident in student hotels and halls on and around the Legon campus of the University. The sampling and participant recruitment process for the study was rolled out, approximately, six months after work at the disaster relief response site was over. This time lapse was allowed based on the hope that the volunteers would have overcome any possible secondary trauma or similar psychological distress, as a result of their involvement in the relief response work, while helping to reduce potential recall bias during the interviews in this study (Center for Substance Abuse Treatment, 2014; Mitchell & Dyregrov, 1993; Moran & Colless, 1995; Myers, 1994; Royal College of Psychiatrists, 2016).

A volunteer roll was created and kept by the office of the Psych Corps, albeit this roll did not contain the details of all the volunteers. A copy of the volunteer roll was obtained from the office of the Psych Corps for the purposes of sampling potential participants for this study. Among other details, the volunteer roll contained the names and cell phone numbers of 13 clinical psychology students. Each of these students was contacted via a telephone call and invited to participate in the study. These calls were made by two authors (EAA, & JP). In addition to a few calls to potential participants which were not answered, four potential participants were unavailable to grant an interview for the study owing to their busy schedule and commitments elsewhere. Thus, the snowball sampling strategy (Shaghaghi, Bhopal, & Sheikh, 2011) was employed to complement the use of the volunteer roll. Each volunteer contacted via the telephone call was also requested to recommend and facilitate the introduction to one or more clinical psychology student volunteers whose details were not in the volunteer roll. It is noteworthy that, in addition to the volunteer roll, various groups on social media platforms (e.g., Facebook, WhatsApp, etc.) were created by the office of the Psych Corps to remain in touch with and to keep the volunteers updated on issues and developments related to the acute emergency relief response work. Thus, in the snow ball strategy, most of the student volunteers contacted who recommended other volunteers (who were mostly not on the volunteer roll) relied on the contacts of such volunteers in their various social media group memberships. In all, 15 clinical psychology student volunteers aged between 23 and 28 years were purposively and conveniently selected for the study. Of this total sample, 60% (*n* = 9) were females and 40% (*n* = 6) were males.

3.2. Design and procedure

A qualitative approach was deemed appropriate for this study, as the basic aim of the study was to explore in-depth the experiences and views of the student volunteers at the disaster relief response site (Creswell, 2014). Previous studies have underscored the suitability and strengths of qualitative approach for exploring the experiences and motivations of students and professionals involved in voluntary community intervention work (refer Dass-Brailsford, Thomley, & de Mendoza, 2011; Dekel & Baum, 2009; Holdsworth, 2010; Holdsworth & Brewis, 2014; Lockwood, Weaver, Munshi, & Simpson, 2016; Primavera, 1999). Again, generally, there is a dearth of published studies from Ghana on student volunteerism and community service-learning (Aryetey & Opai-Tetteh, 2012; Toomela, 2007) and studies from Ghana on students' motivations and experiences regarding voluntary emergency response work are particularly rare.

Given this aim and knowledge gap, a semi-structured interview protocol was developed to guide the interviews. Selected participants were interviewed one-to-one in seminar rooms (booked for this purpose) at the Departments of Psychology and Chemistry, University of Ghana, Legon campus. Three authors (EAA, PYA and ENBQ) conducted and transcribed the interviews verbatim for analysis. All the interviews were conducted in English, and each interview lasted between 45 and 60 min, on

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average. Among other questions, informants were asked: "what motivated you to volunteer?"; "what were your assigned role(s) at the disaster relief response site?"; "could you share with me your most poignant experience in your various encounters with some of the disaster victims/survivors?".

3.3. Data analysis

The thematic data analysis technique (Boyatsis, 1998; Braun & Clarke, 2006) was used to analyse the transcribed interviews. The authors met as a research team to listen to all the audiotaped interviews, to correct any errors in the transcripts and to note initial impressions and ideas emerging from the data. Following this initial step, each author independently read the transcripts iteratively and noted potential categories. The research team then noted an initial set of categories relevant to the data and aim of the study. Next, similar categories that sufficiently represented the evidence contained in the data were collapsed to constitute major themes, which could help explain greater portions of the data meaningfully (Braun & Clarke, 2006). After discussing and building consensus as to the definition and meaning of each major theme, compelling excerpts from the transcripts, which were lucid representation of the themes and adequate in addressing the research aim, were culled to help explicate the selected major themes and sub-themes (Boyatsis, 1998).

Apart from obtaining ethical approval and clearance for the study from the ethical review committee of the Department of Psychology, University of Ghana, an arrangement was made with a clinical psychologist to help manage any psychological discomfort that any of the informants might experience as a result of participating in the study. Each informant was invited to sign an actual consent form prior to participation, and they were assured of anonymity, confidentiality and voluntary participation.

4. Findings

The findings were organised around three major themes and five sub-themes: motivation to volunteer (*empathic call of duty, publicising psychology, improving résumé and networking*); experiential learning (*linking clinical and community learning*); and sustaining the opportunity to volunteer (refer Figure 1).

4.1. Motivation to volunteer

This major theme covers the factors which the students reported to have informed and influenced their decision to volunteer at the emergency response site. Four sub-themes emerged to explicate this major theme: *empathetic call of duty, publicising psychology, improving résumé and networking* (refer Figure 1).

Figure 1. Major themes and sub-themes of the volunteers' experiences and views (authors' construct).
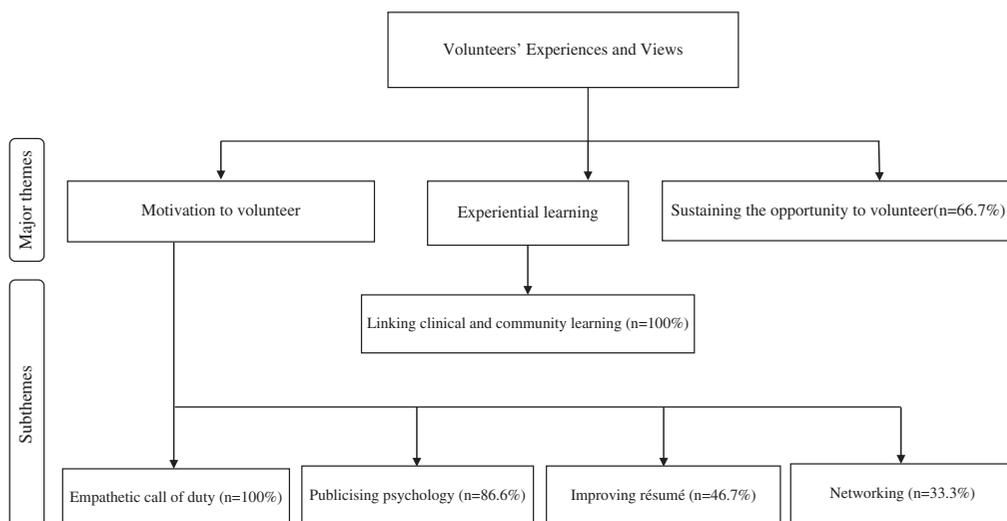
4.1.1. Empathetic call of duty

This sub-theme relates to the students' motivation and evaluation of the invitation to volunteer at the emergency response site in the immediate aftermath of the disaster. Generally, all the students involved in this study (*n* = 15) viewed the invitation to volunteer as an empathetic call of duty. A student expressed this as follows:

> It was touching. It could have been any of us. Kwame Nkrumah Circle is a place where we all pass most of the time. When the opportunity came for us to volunteer I felt it was a good cause to also give off what I had to help. (female, 23 years)

This view suggests that the students were motivated to volunteer by two factors: (i) the sad and serious nature of the disaster that made it empathetic and emotionally touching for the students to want to volunteer to help the survivors and victims; and (ii) the fatalistic idea that *it could have been any of us*. This second factor seems to have had a strong motivational influence on the students' decision to volunteer. This is owed to the fact that virtually all of the student volunteers involved in this study regularly commuted through the disaster site to the teaching hospital where they had their clinical practicum sessions. Luckily on that fateful day, 3 June 2015, many of these students either passed through the site very early in the morning, prior to the start of the rains, or were at home, or engaged elsewhere because they did not have a practicum session in the hospital altogether. Therefore, they "eluded" the disaster. During the interviews, however, each of the students made reference to at least a person they knew, who died or was intimately affected by the disaster. Thus, the students involved in this study could readily identify with the survivors and victims of the disaster, hence the motivation to volunteer. Another student opined thus: "Having studied psychology, and knowing that when such things occur people experience trauma, I knew it was a call to do what we were being trained to do" (male, 25 years). In the immediate week following the June 3 disaster, the clinical supervisors announced to the clinical psychology master's degree class, inviting willing students to volunteer at the disaster site to provide mental health relief response to the victims and survivors. The student of the above quote (just like the rest of his colleagues) appears to have rated the invitation to volunteer at the emergency response site as a call of duty. Further, the quote recognises the field of psychology as a helping profession. Thus although they are trainee psychologists, all the students in this study viewed their acquired knowledge and skills as necessary and relevant to helping the survivors and victims of the disaster.

4.1.2. Publicising psychology

The majority of the students in this study (*n* = 13; 86.7%) reported that they perceived the invitation to volunteer at the emergency response site as an opportunity to publicise psychology and the work of psychologists in Ghana. This perception also seemed to inform their decision to volunteer at the emergency response site. For instance, a student reported that, "psychology is a baby field in this country. We believe that volunteering would help people understand exactly who we are [as psychologists], and what we do; and to give people who really need our help the opportunity to get the help they need" (female, 25 years). Mainstream psychology is a little over 50 years in Ghana, but it is generally faced with a public image problem. For example, popular and lay perceptions of psychology and psychologists in Ghana are that psychologists are *mind readers* and *psychology* is an esoteric preserve of academics and the educated elite (Assumeng, Amponsah, & Opoku, 2014; Quarshie et al., 2015). Presumably, the general perceived "public invisibility" of the full involvement of psychologists in Ghana, when it comes to grappling with issues of national importance, and the woefully inadequate number of psychologists in the country fuel this poor public image of the field in the country (Quarshie, Annor, Andoh-Arthur, Tagoe, & Osei-Poku, 2016; Quarshie et al., 2015). In Ghana, there is low public knowledge about who psychologists are, and what they do; and interestingly, both professional and student (trainee) psychologists in the country are not oblivious to this public image problem of the field (Quarshie et al., 2015). Thus, the students in this study seized upon the call to volunteer at

the emergency response site to "bring psychology and psychologists to the public" at the local community level. In other words, these students hoped to contribute towards improving the public image of psychology and psychologists in Ghana, by opting to volunteer at the emergency response site.

Similarly, another student reported that,

> This is the first time a big mental health relief program has been done in Ghana, following a disaster, and I think it was a good avenue for psychologists in the country to help people. So, we had to help. (female, 23 years)

This opinion recognises the call to volunteer as an opportunity for (both the trainee and professional) psychologists to extend their helping services to the public space. Over the years, humanitarian organisations, medical professionals and disaster management organisations and volunteers have been at the forefront, in offering relief response to victims and survivors in the aftermath of disasters in Ghana (Aryetey & Opai-Tetteh, 2012). Until recently, across the country, psychologists (and mental healthcare professionals in general) were hardly seen making any significant, organised voluntary contribution to help ameliorate community emergency situations. Hence, being aware of this fact, on the occasion of the 3 June 2015 flood and fire disaster response programme, the students of psychology saw the call to volunteer as an opportunity to present psychology as a helping profession to the public (Feldman, 2011).

4.1.3. Improving résumé
This theme relates to some of the students' views that the voluntary work at the emergency response site afforded them the opportunity to acquire work readiness skills and pre-employment experience to enrich their curriculum vitae. As shown in Figure 1, seven of the participants (n = 46.7%) reported that they had the expectation that the voluntary work could present them with opportunities to acquire valuable professional work-related experiences, and this expectation motivated them to volunteer at the emergency response site. Some of the students shared this motivation as follows:

> Even though erm, … the sad nature of the disaster moved me strongly to volunteer, erm, … like, I also thought that going to volunteer my time and knowledge could add to my CV and brighten my career prospects. […] yeah, so now, I have something on my CV. (male, 24 years)

> You know, these days, there is much emphasis on the prevention of mental health problems at the community level, rather than, erm, the clinic. So employers within the health services look out for clinical psychologists who have additional work experience within the community space. So, like, one of the reasons why I volunteered was to acquire that kinda community experience. The June 3 disaster relief response work presented us with a good case of, erm, getting that sort of experience. (female, 23 years)

The accounts of the participants above suggest that some of the students were simultaneously driven by the touching nature of the disaster and the potential personal benefits of acquiring job-related skills and pre-employment experience to enhance their future career prospects. More broadly, the views suggest that some of the students were motivated by the prosocial drive to help others and a strategic idea of probable futuristic personal benefits related to employment.

4.1.4. Networking
For some of the participants in this study (n = 33.3%), the motivation to volunteer at the emergency response site was partly fostered by the idea that work at the emergency response site could create the opportunity to meet and build work relationships and social connections with others, which may be useful for their training and future career. Specifically, it was motivational for some of the students to meet and share the voluntary work space with prominent health professionals and academics (they had only heard or read about) and other volunteers from other professional backgrounds.

> At the start of the voluntary work, I was not motivated by the idea of meeting new people and networking. It was not part of my motivation, until after the third day or so [...] the idea and the experience of it became so compelling. I met completely new people every day: psychiatric nurses, professional psychologists, and famous professional psychiatrists. That was really motivating for me, knowing that I would meet new people and build new relationships with them and learn new stuff from them, whilst we all work together to help the victims and survivors of the disaster. I also shared my ideas. (male, 26 years)

> It was not compulsory to do the voluntary work, but we were told that some of the big psychologists and other health professionals would be volunteering too. So, for me it was a chance to meet these people, get to know them better and closely, and learn from them on the job in an informal situation. In fact, it was helpful because now I know, more personally, some professors and other big people in psychology, who teach and practice as well. But for the voluntary relief response work, I only knew them in books and journal articles. (female, 24 years)

These views appear to point to the fact that the students appreciated the importance of learning through diversity and teamwork - a value which is imperative for the world for work. Again, the students' intention of getting to have personal and working relationships with the experienced professionals of prominence may be pointing to the students' interest in building protégé-professional relationships, to enhance their learning and career prospects. Additionally, given the reality of graduate unemployment in Ghana, it also seems to be a case that some of the participants thought that knowing and volunteering together with these known experienced professionals could increase their chances of employment in the future.

4.2. Experiential learning
This superordinate theme focuses on the experiences of the students, in relation to the influence of the voluntary work at the emergency response site on their learning and training, as future psychologists. Prominently, the students viewed their experiences at the emergency response site as constituting an experiential learning in terms of *linking clinical and community learning*.

4.2.1. Linking clinical and community learning
This theme relates to the students' responses to the question: "How has your voluntary work at the June 3, flood and fire disaster relief response site influenced you, as a clinical psychology student?" The rationale for this question was to explore the students' views regarding the practical relevance of the voluntary work to their learning and training, as graduate students of clinical psychology. The following were some of the common responses:

> Listening to the stories of the survivors and victims, you'd get to know about things that are happening, which you do not come across in the clinical setting. People share their experiences, they tell you their life stories, the stress they had gone through during and after the disaster etc., and you have to rely on your clinical knowledge and experience to offer some help. (male, 24 years)

> I have not worked with disaster victims or survivors like that in a community setting before. Volunteering at the June 3, flood and fire disaster response site was my first time. It was a good learning experience for us because it helped us to fairly connect our clinical knowledge and experiences to the situation in our community. It was a kind of community-based learning experience, you know. (female, 26 years)

The two opinions above are reflective of the students' practice-based learning, but more importantly, they are indicative of how volunteering at the emergency response site provided a new learning experience for the students. In other words, besides getting to know about the traumatic and emotionally disturbing experiences of the victims and survivors of the disaster, who came to the emergency response site for help, the voluntary work also presented the students with an opportunity to experience what appears to be a transfer and application of

clinical knowledge and experiences onto mitigating a community-based adverse situation. In effect, through the voluntary relief response work, the students learnt how the provision and administration of psychological therapy and intervention in a community setting resembles, or differs from the provision and administration of psychological therapy and intervention in the hospital context. Put differently, the emergency response work offered the students the chance to transfer their knowledge about clinic-based individual interventions into mitigating a community-wide emergency psychological situation; and the opportunity to have a practical experience of the points at which the practice of clinical psychology in the clinic and the community context converges and diverges.

Closely related to the theme, *linking clinical and community learning*, was an observation that the voluntary work at the emergency response site made some of the students (n = 66.6%) realise that the relationship between the *theories taught in the classroom* and the *realities of life out there* is variable. One student shared his experience as follows:

> Some of them [*the victims and survivors*] were not even there [*at the site of the disaster*] during the fire outbreak, they experienced only the flood. But the way they were experiencing the moment was totally different from those who actually witnessed and experienced both the fire and flood. It taught me something about coping and individual differences, when it comes to stressful conditions. Some people are able to cope, whereas others are not able to do that easily. So it was an opportunity, not only to volunteer, but more importantly, to learn in a practical way, the link between the theories we learn in class and the realities out there. (male, 27 years)

The view shared in the quote above shows an experiential demonstration of how individuals in the same context vary, in terms of coping with distress. Another student referred to the same observation thus:

> At the response site, we saw clear differences in the victims and survivors who showed up. We saw some men, who appeared strong, shedding tears uncontrollably, while women, whom we perceived to be weak, rather maintained their composure and kept a strong outlook. So, sometimes, the theories about human behaviour that we are taught in class, and the everyday real life situations in the human world are not always the same. There are times and instances where a theory can fit well with a real life situation, but at other times and instances, the same theory can be at odds with the same human condition. So for me, it takes such a practical learning opportunity, like the voluntary work we did, to realise that the theories we know about human behaviour are not always compatible with our life. (female, 24 years)

These students' views underscore the role of community service-learning in bridging the gap between theory and practice (Tagoe, 2014). The implication is that the idea of "one size fits all" does not apply in the provision of psychological help to survivors and victims of trauma (Myers, 1994; Patel et al., 2007). Therapeutic responses must be tailored to meet the unique needs of targeted individuals. This experiential lesson appears healthful for the professional knowledge and skill development of the psychology students involved in the voluntary work at the emergency response site.

4.3. Sustaining the opportunity to volunteer

This theme is about the students' views as to the need for setting up a standing mental healthcare emergence response team in Ghana, which would provide both immediate and long-term relief response and intervention, in the aftermath of similar disasters in the future, to survivors and victims. Additionally, the theme relates to the participants who expressed hope that setting up a standing mental healthcare emergence response team will help sustain the opportunity for students to volunteer in relief response activities, in the aftermath of disasters in the country. For example, a student suggested this as follows:

> Now, assuming we all did not have the time and did not have that intrinsic feeling to go help, this thing could have been a much bigger disaster in the aftermath. The disaster response team of the American Psychological Association helps victims when, for example, hurricanes occur in the USA. So similarly, psychologists in Ghana can plan or have a body or team that will provide quick relief response when a disaster like this occurs. Most importantly, it will also afford us, psychology students and other mental health trainees, the opportunity to learn something through volunteerism. (Female, 24 years)

Another student reported thus:

> We were impressed with the whole relief programme, but it was organised on the spur of the moment, so there was no time to really organise things well. So, I think the Ghana Psychological Association (GPA) should set up a standing response team or group to help in times of disasters like the June 3 flood and fire disaster. Some of us can opt to be members of this team as volunteers. (male, 28 years)

The two excerpts above largely underscore the need to set up a standing mental healthcare emergency response team, given that disasters of higher magnitude are becoming a major source of yearly national trauma in Ghana (Daily Graphic, 2015). The onus to set up this response team appears to be on the Ghana Psychological Association (GPA), perhaps because it is, thus far, the largest mental health association in the country. The GPA has the largest organised membership of professional and student/trainee psychologists and lay/para practitioners in Ghana (Ghana Gazette, 2015; Quarshie et al., 2016). More importantly, the opinions above suggest that a standing response team can help provide immediate, rapid response or meaningfully organised relief response, or both in the aftermath of disasters, rather than the rushed, *ad hoc* response currently in place. Again, both views posit that, a standing response team can also provide a sustained opportunity for student/trainee psychologists to learn experientially within the community context, through voluntary work and membership with the standing relief response team.

5. Discussion

This study set out to explore, through qualitative interviews, the experiences and views of the clinical psychology students who volunteered in the emergency mental health relief response work organised by Department of Psychiatry of the University of Ghana School of Medicine and Dentistry (UGSMD) in the aftermath of the 3 June 2015 flood and fire disaster in Accra, Ghana. The study shows three main findings: (1) the volunteers were motivated by both *self-oriented* and *other-oriented* motives; (2) voluntary work at the emergency response site provided an opportunity for experiential learning; and (3) setting up a standing mental healthcare emergency response team will ensure adequate planning of future mental health emergency response efforts and help sustain the opportunity for student volunteerism.

Consistent with the general fact in the literature on volunteerism, particularly, in terms of the functional approach to volunteerism, our findings show that the student volunteers in this study were both *self-oriented* and *other-oriented* (Clary & Snyder, 1999). Regarding the *other-orientation*, the students were motivated to volunteer by the desire to empathically help the victims and survivors of the disaster. The students gained a sense of satisfaction for contributing to the well-being of the community through their voluntary work to help alleviate the distress of the victims and survivors of the disaster. Again, the students were motivated by the desire to publicise their chosen field of profession—*psychology*—to change the poor public image of *psychology* and *psychologists* in Ghana. As found by Plummer et al. (2008), the students' decision to volunteer in the disaster response work, following the June 3 disaster, was motivated by the *value* of psychology as a *helping* profession. Being aware of this value, the students identified the invitation to volunteer at the emergency relief response site as a call of duty directed at both trainee and professional psychologists in the country at the time.

The *self-orientation* motives to volunteer at the emergency relief response site were related to the students' desire to obtain opportunities, skills and experiences connected to their future career: *linking clinical and community learning, improving résumé* and *networking*. The voluntary work at the emergency response site provided the student volunteers (trainee psychologists) with an opportunity for experiential learning through linking their clinical and community learning, and bridging the gap between theory and practice. This is consistent with the desire to *gain career-related experience* component of the functional theory of volunteerism (Clary & Snyder, 1999). This observation supports previous finding from the USA (Katz et al., 2002), where medical students, who volunteered to help survivors and victims of the 11 September 2001, attacks on the World Trade Centre, reported the enhanced professional self-esteem (refer also Taylor & Taylor, 2012). The finding supports evidence from South Africa (Kritzinger & Pillay, 2010), where 96.2% psychology students reported improved comprehension of mental illnesses, 98.1% noted broadened knowledge of the mental healthcare system, 86.8% reported increased interest in clinical psychology and 47.2% reported lower levels of anxiety, with reference to working with persons with mental illness, as a result of volunteering at a mental health programme.

Currently, the practical content of the clinical psychology training at the postgraduate level in the University of Ghana is without any community component (e.g., receiving supervised training in community-based, non-clinical settings such as prisons, police shelters, community centres, schools, charity organisations etc.). The trainees are taken through only clinical work mainly at the Korle-Bu Teaching Hospital. Thus, the voluntary work at the emergency response site following the 3 June 2015 flood and fire disaster afforded the trainee clinical psychologists an unprecedented opportunity to supplement their clinical knowledge with community service-learning experience.

Similarly, the motives of *improving résumé* and *networking* are consistent with previous evidence, related to community service-learning programmes, from Ghana (Tagoe, 2014) and other African countries (Akhurst et al., 2016; Pacho, 2017). The finding is also consistent with the evidence reported from high-income countries, where students have been found to be motivated by similar reasons and intentions. For example, Holdsworth (2010) observed that, in the UK, many students tend to volunteer based on the strategic goal to enrich their CVs and enhance their future employability. More importantly, it is evidenced, from the other-orientation and self-orientation motivations, that, even though the students had multiple motives for their voluntary work, they were more reflective in the present study, about their reasons to volunteer at the emergency response site.

The suggestion by the students in this study that setting up a standing mental healthcare emergency relief response team will ensure adequate planning of future mental healthcare emergency response efforts and help sustain the opportunity for students' spontaneous volunteerism is consistent with the functional approach to volunteerism (Clary & Snyder, 1999). Clary et al. (1998) suggest that when volunteers receive functionally relevant benefits from engagement in community service programme, they tend to develop an increased interest in similar voluntary activity in the future. Similarly, in the present study, the student volunteers found their disaster response work to be functionally relevant and useful to their learning experience and improving the mental health of the victims and survivors of the disaster. The student volunteers showed an increased interest in seeing a continuous opportunity to volunteer in the community context. They, thus, suggest the formation of a disaster mental health relief response network or team by the GPA. The existence of this emergency mental health relief response network would not only ensure that disaster and emergency response work is adequately planned and implemented but also would create a sustained opportunity for students of mental health to engage in voluntary work to enhance their learning experience in the community context.

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5.1. Limitations and implications

The conclusion drawn, based on the findings of this study, must be interpreted cautiously and within the context of the general methodological choices made. First of all, although we consider the application of a qualitative approach appropriate for such an exploratory study, various groups of psychologist trainees (e.g., counselling, organisational, community, social psychology etc.) and students of psychiatry were not represented in the sample; hence, generalising the findings across all other psychologist trainees, mental health students or both is not possible. Also, the six-month time lapse between the end of the voluntary work at the emergency relief response site and the conduct of the interviews for this study might have influenced some memory-related distortions in the retrospective self-reports produced by the participants in this study (e.g., Johnson, Raye, Mitchell, & Ankudowich, 2011; Katz et al., 2002).

Despite these limitations, this study has one key implication for policy and practice regarding future disaster response work in Ghana. As suggested by the students in this study, the GPA may consider setting up a standing disaster relief response network, responsible for organising relief response programmes during and after disasters and other emergency situations in Ghana. The effectiveness of this network can be enhanced by working collaboratively with other national disaster management organisations and professional groups. This proposed standing disaster relief response network would afford students of psychology and other mental health trainees in the country the sustained opportunity to volunteer and enhance their learning and general professional self-esteem.

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Citation information
Cite this article as: "It was touching": Experiences and views of students in the June 3 flood and fire disaster relief response volunteerism in Accra, Ghana, Emmanuel Nii-Boye Quarshie, Jennifer Peprah, Paapa Yaw Asante, Mabel Verstraaten-Bortier, Elizabeth Anorkor Abbey & Francis Agyei, *Cogent Psychology* (2018), 5: 1489481.

Note
1. Psych Corps is a mental-health-based national voluntary organisation jointly owned by the University of Ghana (Departments of Psychiatry and Psychology); Yale University, New Haven—USA; the National Service Scheme of Ghana; and the Ghana Health Service. It was founded on the principle of *task shifting* to help extend mental healthcare services across Ghana, given the severe human resource crisis faced by the mental healthcare subsector of the country. Mainly, Psych Corps recruit and place new Bachelor's Degree graduates (with background in clinical, counselling and/or community psychology) in local communities and mental healthcare units and institutions to volunteer for at least one year. Thus far, members of the Psych Corps have been graduates from the Department of Psychology, University of Ghana (Psych Corps, 2014).

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