



PSYCHOLOGICAL FIRST AID

Unit Objectives

1. Describe the disaster and post-disaster emotional environment.
2. Describe the steps that rescuers can take to relieve their own stress and those of disaster survivors.





Vicarious Trauma

The process of changes in the rescuer resulting from empathic engagement with survivors



Possible Psychological Symptoms

- ◆ Irritability, anger
- ◆ Self-blame, blaming others
- ◆ Isolation, withdrawal
- ◆ Fear of recurrence
- ◆ Feeling stunned, numb, or overwhelmed
- ◆ Feeling helpless
- ◆ Mood swings
- ◆ Sadness, depression, grief
- ◆ Denial
- ◆ Concentration, memory problems
- ◆ Relationship conflicts/marital discord



Possible Physiological Symptoms

- ◆ Loss of appetite
- ◆ Headaches, chest pain
- ◆ Diarrhea, stomach pain, nausea
- ◆ Hyperactivity
- ◆ Increase in alcohol or drug consumption
- ◆ Nightmares
- ◆ Inability to sleep
- ◆ Fatigue, low energy

Team Well-Being

CERT team leaders should:

- ◆ Provide pre-disaster stress management training.
- ◆ Brief personnel before response.
- ◆ Emphasize teamwork.
- ◆ Encourage breaks.
- ◆ Provide for proper nutrition.
- ◆ Rotate.
- ◆ Phase out workers gradually.
- ◆ Conduct a brief discussion.
- ◆ Arrange for a post-event debriefing.



Reducing Stress

- ◆ Get enough sleep.
- ◆ Exercise.
- ◆ Eat a balanced diet.
- ◆ Balance work, play, and rest.
- ◆ Allow yourself to receive as well as give.
Remember that your identify is broader than that of a helper.
- ◆ Connect with others.
- ◆ Use spiritual resources.



Critical Incident Stress Debriefing

Six phases:

- ◆ Introduction and a description
- ◆ Review of the factual material
- ◆ Sharing of initial thoughts/feelings
- ◆ Sharing of emotional reactions to the incident
- ◆ Instruction about normal stress reactions
- ◆ Review of the symptoms
- ◆ Closing and further needs assessment

Phases of a Crisis

- ◆ Impact
- ◆ Inventory
- ◆ Rescue
- ◆ Recovery





Traumatic Crisis

An event in which people experience or witness:

- ◆ Actual or potential death or injury to self or others.
- ◆ Serious injury.
- ◆ Destruction of homes, neighborhood, or valued possessions.
- ◆ Loss of contact with family/close relationships.

Traumatic Stress

Traumatic stress may affect:

- ◆ Cognitive functioning.
- ◆ Physical health.
- ◆ Interpersonal reactions.





Medicating Factors

- ◆ Prior experience with a similar event
- ◆ The intensity of the disruption in the survivors' lives
- ◆ Individual feelings that there is not escape, which sets the stage for panic
- ◆ The emotional strength of the individual
- ◆ The length of time that has elapsed between the event occurrence and the present

Stabilizing Individual

- ◆ Assess the survivors for injury and shock.
- ◆ Get uninjured people involved in helping.
- ◆ Provide support by:
 - Listening.
 - Empathizing.
- ◆ Help survivors connect with natural support systems.





Avoid Saying . . .

- ◆ “I understand.”
- ◆ “Don’t feel bad.”
- ◆ “You’re strong/You’ll get through this.”
- ◆ “Don’t cry.”
- ◆ “It’s God’s will.”
- ◆ “It could be worse” or “At least you still have . . .”



Managing the Death Scene

- ◆ Cover the body; treat it with respect.
- ◆ Have one family member look at the body and decide if the rest of the family should see it.
- ◆ Allow family members to hold or spend time with the deceased.
- ◆ Let the family grieve.



Informing Family of a Death

- ◆ Separate the family members from others in a quiet, private place.
- ◆ Have the person(s) sit down, if possible.
- ◆ Make eye contact and use a calm, kind voice.
- ◆ Use the following words to tell the family members about the death: “I’m sorry, but your family member has died. I am so sorry.”

◆ Presentation and slides:

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