

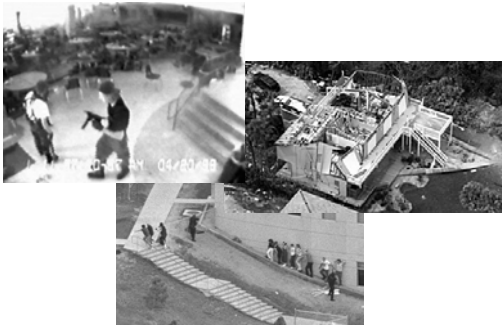
## Psychological First Aid: Building Resiliency for “Us” and for “Them”

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In crisis situations, stress  
response is a *normal* reaction.

## How Common is Post-Disaster Stress?

- 7-40% of people have emotional or psychological reaction (this includes first responders)
- Majority of people experience at least one type of stress symptom
- Symptoms peak within the first year (often in the 1<sup>st</sup> few months), only a minority continue to have long-term problems

## Challenge to Helpers

- Being part of the collective crisis
- Repeated exposure to grim experiences
- Carrying out physically difficult, exhausting or dangerous tasks
- Lacking sleep and feeling fatigued
- Facing the perceived inability to ever do enough

## Challenge to Helpers

- Feeling guilt over access to food, shelter, etc
- Facing moral and ethical dilemmas
- Being exposed to anger and lack of gratitude
- Being detached from personal support systems
- Feeling frustrated by policies and decisions by supervisors

**Dr. George Everly's  
21st Century  
Disaster Worker Burnout Club**

1. Be a perfectionist, never accept excellence.
2. Never exercise!
3. Remember, the glass is always half empty! Empathize with ALL disaster victims, you MUST "feel their pain."

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4. Eat as much "fast food" as possible; only eat things that had faces (chickens don't count--no lips). Never eat breakfast. If forced to do so, purge!

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5. Blame all of your failures in life on your parents, your lack of friends, your coercive unethical money-grubbing outsourcing capitalistic boss, or the great right-wing conspiracy.

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6. Accept responsibility for everything and everyone, all the time!
7. Engage in an endless process of controlling everything and everyone, especially those people/ things over which you have no actual control. It is YOUR responsibility to make all disaster victims "happy."

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8. Strive to sleep as little as possible!
9. NEVER desire to return home, if forced to do so, feel guilty.
10. Seek out a routine: Sleep until you are hungry, eat until you are tired; use ETOH to relax, stimulants to get going.

**Psychological First Aid  
(PFA)**

**"A supportive and compassionate presence designed to reduce acute psychological distress and/or facilitate continued support, if necessary."**

Everly, GS, Jr. & Flynn, BW. (2005). Principles and Practice of Psychological First Aid. Johns Hopkins Center for Public Health Preparedness

## Caring for Psychological Wounds

- All of us can apply a bandage to a wound
- All of us can practice basic first-aid
- The psychological impact of crisis can be approached in a similar manner

## Caring for Psychological Wounds

- Public Health Professionals must recognize and be able to manage the basic symptoms of psychological distress

## Why Psychological First Aid is the Foundation of Communication

- Communication during disaster situations involves the understanding and management of individual, group and population emotional and cognitive reactions

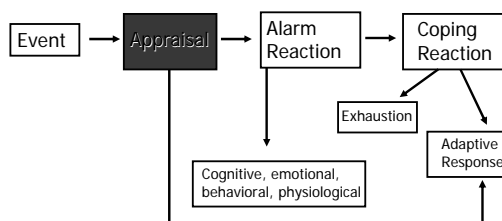
## Why Psychological First Aid is the Foundation of Communication

- Understanding how and why people behave during emergencies allows for improved communication
- If we don't address the emotional bleeding- we can't have a discussion

## The Culprit is Stress But If We Can't Find It, We Can't Fix it...

- Subjective internal feeling of discomfort
- Impact on emotions, cognitions, physiological functioning, and behavior
- Adaptive in evolutionary sense
  - Fight or flight response
  - BUT can have negative impact

## Stress Is A Process Determined By Appraisal....



## Appraisal of Events

Situation	Appraisal	Response
Stuck in traffic	I'm going to be late. I should have left earlier	Nervous, irritable and anxious.
	I might as well get comfortable 'cause there's nothing I can do about it.	Relax. Enjoy music.

## Appraisal of Events

- Events can be categorized on two dimensions:
  - Important .....Unimportant
  - Changeable..... Unchangeable

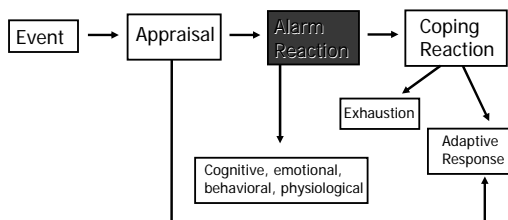
## Appraisal of Events In Crisis Settings

- Important - Changeable
  - Attending to distressed children
  - Attending to distressed co-workers
  - Assessing extent of damage to school
  - Fatigue
  - Poor sleep
- Unimportant - Changeable
  - Phone solicitors
  - Errands
  - Laundry, yard work etc.
  - Kids bickering

## Appraisal of Events In Crisis Settings

- Important- Unchangeable
  - Injury or death to children, colleagues
  - Destruction of school
  - Hurricanes, Tornados
  - Terrorist Attack
- Unimportant – Unchangeable
  - Traffic jams
  - Spilled food on clothes
  - Stranger's criticism

## Appraisal Leads To Reaction...



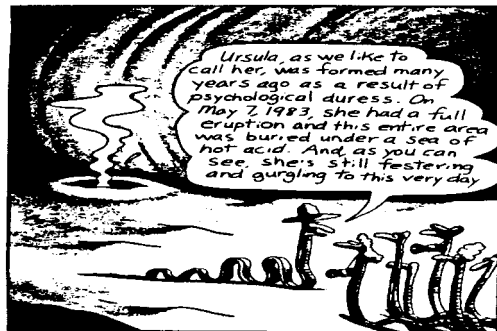
## Stress Response: The Spectrum of Symptoms



## Recognizing Symptoms is Critical

- A broad range of stress related symptoms
- Varying manifestations
- Stress symptoms often discounted or perceived as unrelated to stress
- Acknowledgment of stress related symptoms is necessary if management is to take place

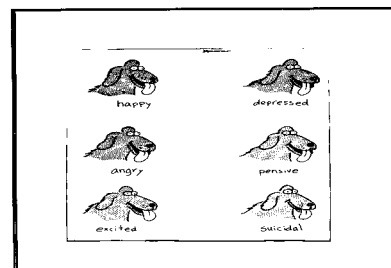
## Physical Symptoms



## Physical Symptoms

- Muscle aches
- Fatigue
- GI Distress
- Headache
- Dermatitis
- Dizziness

## Emotional Symptoms



How to recognize the moods of an Irish setter

## Cognitive/Emotional Symptoms

- Trouble remembering things
- Easily distracted, poor concentration
- Lack of interest in things
- Hopelessness, "nothing will ever get better"
- Irritability
- Depressed, morose, brooding
- Worry, nervousness, anxiety
- Anger easily

## Behavioral Symptoms

- Increased or decreased appetite
- Increased alcohol and drug use
- Increased smoking
- Less efficient on the job
- Isolate self
- Yell, scream, physical aggression

## Stress Response: Children

- Behavior problems
- Emotional symptoms
- Nightmares
- Fighting with friends
- School difficulties
- Trouble eating or sleeping
- Physical complaints



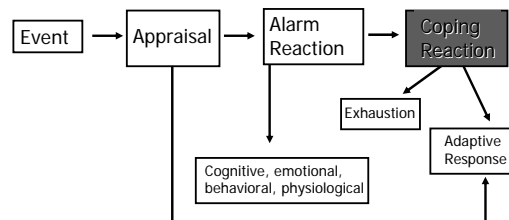
## Older People's Typical Reactions

- Increased memories of past
- Wish to connect with past friends
- Increased dependence on family, refusing assistance from authorities
- Fear of mortality
- Negative view of the future
- Regression

## Older People's Typical Reactions

- Feeling of multiple losses
- Disoriented as routine is interrupted
- Use of denial as a normal defensive reaction
- Immediate fear response, followed by anger and frustration
- Concentration and communication difficulties
- Physiological responses

## Coping Strategies Largely Determine Outcomes...



## Common Coping Errors:

- Blaming others
- Deciding to resist
- Victim behavior
- Being inflexible
- Blaming the job
- Over controlling
- Slowing down
- Fear of Failure, Change, Future
- Checking out Mentally
- Denial
- Choose wrong battles

## If The Oxygen Mask Drops, Place The Mask On Your Face First....

- Caring for yourself is critical
- Psychological First Aid for others is not possible if you are an emotional casualty
- Bottom line: Your stress response in a crisis can turn you into a liability

## Activity

- List 3 strengths that help protect you in times of stress

## Psychological First Aid For The Self

- Step 1: Recognize symptoms
- Step 2: Identify source(s)
- Step 3: Intervene
  - Change the situation
  - Change your thoughts about the situation
  - Change your physiological stress response

## Step 1: Recognize Symptoms

- Symptoms may be subtle or pronounced:
  - Emotional
  - Cognitive
  - Behavioral
  - Physical

## Step 2: Identify the Source

- What are the symptoms telling me?
- Where is this coming from?

## Step 3: Intervene

- Break task down into “bite-sized” pieces
- Set reasonable goals
- Create an action plan for each situation
- Focus on what you can vs. can't do
- Write about your feelings
- Seek support and talk about your feelings

## Step 3: Intervene

- Use relaxation/breathing to reduce stress response
- Tell yourself to let it go, it is not important, not worth getting worked up over
- If this doesn't work, *efficiently* change your situation

## Yes... Breathing Works...

- Time out for breathing.....

## Prevention

- Incorporate relaxation/breathing techniques into your workday
- Meditation, yoga, quiet time (no TV, radio, etc)

## Prevention

- Avoid “avoidance” as a strategy
- Think about stress as something to be managed, not eliminated
- Recognize that your stress level affects those around you

## Prevention

- Use good prevention/”inoculation” strategies
  - Exercise
  - Eat right
  - Get enough sleep
  - Quit smoking, decrease alcohol intake

## Psychological First Aid For Others



Most people will not have long-term psychological problems after a crisis but, recovery times vary, and some people may still struggle years later.

## Complicating Factors

- Exposure to death and injury
  - Identifying with victims
- No prior crisis experience
- Exposure to hazards and long hours
  - Resistance to relief shifts
  - Extreme environments (weather, toxins, debris)
- Emotionally challenging work
- Prior psychological adjustment
- Avoidance of help



## The Special Case of PTSD

- Post-traumatic Stress Disorder (PTSD) characterized by three symptom clusters:
  - Re-experiencing (nightmares, flashbacks)
  - Avoidance or emotional numbing
  - Physiological Arousal (exaggerated startle response, hypervigilance)

## The Special Case of PTSD

- Symptoms present for at more than 1 month
- Lifetime prevalence rates: roughly 8% of US adults
- Rates vary greatly in disaster studies ( 2-50% of people)
- PTSD requires professional intervention

## Applying the Basics of Psychological First Aid



## Attend To Basic Physical Needs

- Food, clothing, shelter, medical care
  - Addressing these needs will reduce distress



## Provide Emotional Support

- Console
  - Allow individual to talk about their feelings if they choose to do so
- Listen
  - Active listening
  - Paraphrasing
  - Use of open ended questions



## Provide Social Support

- Reunite individual with family, friends, community to re-establish social network



### **Talking With Children**

- Allow them to explain their understanding of events
  - Look for misunderstandings
- Allow questions
  - It is okay to say you don't know an answer
  - Remain open to further questions at a later time

### **Talking With Children**

- Ages 5-10
  - Focus on positive aspects of recovery
  - Address rumors or fears
- Ages 11 and up
  - Similar guidelines as you would use with adults
  - Be careful not to make children confidants

### **Older Persons**

- Especially vulnerable when:
  - Having co-occurring medical problems
  - Having ambulation difficulties
  - Living alone
  - Lacking help and other resources
  - Having to face the shock of losing all that they had attained in life
    - Home
    - Family
    - Security

### **Helping Older People**

- Ensure safety
- Give factual information
- Reassure by providing information about normal reactions
- Be supportive and build confidence
- Identify secure attachments and relationships
- Talk about the event
- Be aware of cultural backgrounds

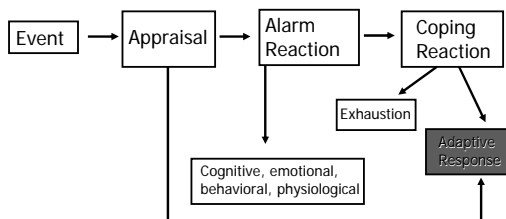
### **Helping Older People**

- Facilitate access to aid and support services
- Ensure that they are not isolated
- Establish Routine
- Provide opportunities for continuity, culture and history
- Help them to maintain their sense of community and preserve cohesion

### **Referral for Additional Help**

- People may be reluctant
  - Use supportive communication
  - VOLUNTARY debriefings
  - Provide confidential access and referral information
  - Support at-risk individuals

**Psychological First Aid For  
You and For Others...  
Adaptive Response is the  
Ultimate Goal**



**“Nobel souls, through dust  
and heat, rise from disaster  
and defeat the stronger”  
*Henry Wadsworth  
Longfellow***

**Resources**

- **Center for Mental Health Services (CMHS)**  
– [www.mentalhealth.samhsa.gov/cmhs/EmergencyServices/progguide.asp](http://www.mentalhealth.samhsa.gov/cmhs/EmergencyServices/progguide.asp)
- **American Red Cross**  
– [www.redcross.org/services/disaster.html](http://www.redcross.org/services/disaster.html)
- **American Psychological Association**  
– [www.apa.org](http://www.apa.org)
- **South Central Center**  
– [www.southcentralpartnership.org](http://www.southcentralpartnership.org)