

Psychological First Aid: Helping Others in Times of Stress

**Instructor-Led Training Participant Guide
July 2017**



The American Red Cross Mission

The American Red Cross prevents and alleviates human suffering in the face of emergencies by mobilizing the power of volunteers and the generosity of donors.

Contents

About this Course	4
Unit 1: Defining Psychological First Aid	6
Unit 2: Recognizing Disaster-related Stress	7
Unit 3: Embracing the Principles of Psychological First Aid	14
Unit 4: Making Appropriate Referrals	20
Unit 5: Practicing Psychological First Aid	27
Unit 6: Course Conclusion	37
Appendix.....	39
Scenarios	45

About this Course

Welcome to *Psychological First Aid: Helping Others in Times of Stress*. This course is for all American Red Cross workers who respond to local and national disasters. If you have ever worked on a local fire or disaster relief operation, you know these situations can be stressful for clients, co-workers, and you. How people feel and react to stress varies from individual to individual. What may not be stressful for you may be stressful for someone else. During this course, we will discuss how people react to stress in the aftermath of disaster and what you can do to provide comfort, care, and support.

Purpose

The purpose of this course is to enable you to provide basic care, comfort, and support to people who are experiencing disaster-related stress and to help you know when to refer a client to a Disaster Mental Health worker. *Psychological First Aid: Helping People in Times of Stress* provides a framework for understanding factors that affect the stress responses of disaster relief workers and the clients they serve. In addition, it provides practical suggestions about what you can say and what you can do as you practice the principles of psychological first aid (PFA).

Course Objectives

This course provides you with a better understanding of how to:

- Recognize the signs of stress in clients, co-workers, and yourself.
- Provide immediate support to people who may be experiencing stress by using psychological first aid principles.
- Obtain Disaster Mental Health support for clients, co-workers, and yourself, when needed.

Course Design

This course will be delivered within a four-hour block of time. We will provide an overview of the schedule, describing the approximate duration for each unit, opportunities to take breaks, and descriptions of unit activities. The following six units comprise this course.

- Unit 1: Defining Psychological First Aid
- Unit 2: Recognizing Disaster-Related Stress
- Unit 3: Embracing the Principles of Psychological First Aid
- Unit 4: Making Appropriate Referrals
- Unit 5: Practicing Psychological First Aid
- Unit 6: Course Conclusion

About this Course

At the end of this course, you will have an opportunity to play a game of *Speed Review* designed to help you confirm what you have learned and to devise a review strategy if you feel unsure about any aspect of the content.

Note: Speed Review is not a graded test. It is designed to help you to retain the relevant content from this course.

Unit 1: Defining Psychological First Aid

Unit Overview and Purpose

The purpose of this unit is to introduce the concept of psychological first aid.

Unit Objectives

When you have completed this unit, you will:

- Define the concept of psychological first aid.
- Describe the relevance of psychological first aid.

What is Psychological First Aid?

Psychological First Aid is the practice of recognizing and responding to people experiencing disaster related stress.

Why is Psychological First Aid Important?

Knowing psychological first aid is important.

- It will help you create a compassionate environment for disaster survivors and workers.
- You'll be able to help a person identify what he or she might need at a particular time.
- You'll know how to provide immediate support to those in stressful situations.
- You'll be able to help others cope in the face of stressful events.

Unit 2: Recognizing Disaster-Related Stress

Unit Overview and Purpose

Disasters are stressful for survivors and workers. Individuals react in various ways after experiencing disaster. Stress reactions may interfere with an individual's ability to cope and to use their resilience in managing their own recovery.

In Unit 2, Recognizing Disaster-Related Stress, you will learn the signs of disaster-related stress in adults and children.

Unit Objectives

When you have completed this Unit, you should be able to:

- Describe the typical stress reactions of adults and children who have experienced a disaster.
- Identify the characteristics of a disaster and the disaster response that affect individuals' responses.
- Describe the characteristics of individuals that affect their personal responses.

Stress Reactions

Stress reactions are the feelings, thoughts, and behaviors we have immediately before or quickly after experiencing difficult situations. These may continue over time and possibly grow worse.

- Think about some of the stressful experiences you have had in your personal life such as working for a difficult boss or hearing challenging news from a friend or family member.
- Now think about some of the stressful experiences you have had within the context of a disaster relief operation, like getting up in the middle of the night to respond to a fire or being away from family for weeks at a time.

We are unable to avoid stress - it is part of life.

Activity 1: Stress Reactions of Adults, Children and Teens

Activity Overview and Purpose

This activity is intended to provide each of you with an opportunity to recall individual reactions of adults, children and teens to stressful situations that you have witnessed within the context of disaster relief work or where you have seen people reacting to stressful situations.

Activity Instructions

From your own experiences, describe how people react when they are in these stressful situations. Devote approximately ten (10) minutes to identify reactions in response to the following questions.

At the prompting of the instructor, you should offer to share your insights and responses to these questions with the entire group. Think about how your responses compare to the experiences of others.

Keep in mind, children and teens have similar stress reactions to adults in all categories except behaviors.

How do adults, children and teens react when they are in stressful situation?

FEELINGS

THOUGHTS

PHYSICAL REACTIONS

SPIRITUAL BELIEFS

What different behaviors might be seen in adults, and children and teens?

ADULTS

CHILDREN AND TEENS

Stress Reactions of Children and Teens

Children and teens can also be affected by stressful situations, such as when they are separated from their families, homes, pets, school, friends, community, toys, and other meaningful possessions.

Children feel safe and secure when they have predictable routines in their lives (mealtime, playtime, and bedtime); disasters can disrupt these routines. Because of the situation, parents and other caregivers may be unable to give their usual level of care and comfort to children. Consequently, children can react with stress, anxiety, and fear. These reactions and others can vary from child to child and can vary by age.

Typical Stress Reactions in Adults, Children and Teens

Feelings

- Rage, anger, irritability
- Resentment
- Anxiety, fearfulness
- Despair, hopelessness
- Numbness
- Terror
- Guilt
- Sadness
- Helplessness, loss of control
- Disinterest
- Feeling overwhelmed

Thoughts

- Difficulty concentrating and thinking
- Difficulty making decisions
- Forgetfulness
- Confusion
- Distortion of sense of time
- Lowered self-esteem
- Self-blame
- Intrusive thoughts, memories, flashbacks
- Worry
- A sense of being cut off from reality
- Self-harm

Physical Effects

- Fatigue
- Difficulty sleeping
- Agitation
- Physical complaints (e.g., headaches, stomach problems)
- Decreased or increased appetite
- Decreased or increased sex drive
- Easily startled
- Increased cravings for/use of caffeine, nicotine, food, alcohol, illicit substances
- Lightheadedness
- Weakness

Spiritual Beliefs

- Change in relationship with or belief about God/Higher Power
- Abandonment of prayer, ritual, scripture, devotions, sacraments
- Struggle with questions about the meaning of life, justice, fairness, afterlife
- Questioning the beliefs of their faith
- Rejection of spiritual care providers
- Increased trust in Higher Power
- Feelings and expressions of gratitude/appreciation for Divine protection
- Increased sense of life mission/purpose due to the disaster
- Increase in spiritual rituals and service to others

Behaviors – ADULTS

- Crying spells
- Angry outbursts
- Avoiding people, places, and situations
- Being argumentative
- School and work problems
- Risky behaviors (driving erratically, multiple sexual partners, unsafe sex)
- Inattention to appearance, personal hygiene, self-care

Behaviors – CHILDREN/TEENS

- Crying, whining, screaming
- Aggressive or disruptive behavior, temper tantrums
- Trembling
- Clinging to parents and caregivers
- Regressive behaviors (thumb sucking, bedwetting, not wanting to sleep alone)
- Avoiding people, places, situations
- Refusing to attend school or day care
- Difficulty getting along with siblings and parents
- Argumentative, defiant, withdrawn
- Using drugs and alcohol
- Cutting/self-injury
- Re-living events through play (young children)
- Asking a lot of questions or telling stories related to event

Contributing Factors to the Stress Response

People react in many different ways during times of stress. In addition, many factors can influence how people react, including the type of disaster, the disaster response, the person's exposure to the disaster and each person's individual characteristics.

Disaster Characteristics

The specific characteristics of a disaster can influence individuals stress responses. These include the following:

Type of disaster:

- Natural events: wildfires, hurricanes, floods, earthquakes
- Man-made events: shootings, explosions, chemical spills, water contamination
- No-notice events such as: tornadoes or transportation accidents, house fires

When it occurs:

- No notice
- No opportunity to prepare
- Man-made events are interpreted and responded to differently based on the cause (e.g., water contamination)
- People are often less prepared for events occurring at night. There is often greater anxiety at night as the night tends to seem scarier than the day. Daytime no-notice events often separate families to different evacuation locations because parents are working and children are in school.
- Duration of the event (e.g., a water crisis may be ongoing)

Who is affected: The number of people including children, injured, missing, or killed.

What is affected: Damage to healthcare facilities, grocery stores, roads, telephone service, schools, etc.

Where it happens:

Rural area

- Fewer people are impacted because people live farther apart.
- People lose livestock which may be a source of income.
- There is less replacement housing available when homes are lost.
- There is less media coverage which makes people feel isolated.
- Communities are tighter which means one death has a greater impact on the community.
- People may be more resilient because of close community support
- People may be more self-sufficient and many have the skills to re-build their own homes

Urban area

- Individuals may be more isolated and may have fewer support systems.
- Death toll may be higher because of population density.

Socio-economic status affects resiliency regardless of whether a person lives in a rural or urban community.

Response Characteristics

Disaster response is a complex endeavor that demands “on-the-ground” implementation and adaptation in uncertain and chaotic situations. The response characteristics, such as these that follow, can contribute to increased levels of stress in the individuals who survive the disaster and those who provide disaster relief services.

- Level of preparedness
- Post-disaster living situation (e.g., Individuals may need to evacuate their homes and stay in shelters, with friends or family, or in a hotel.)
- Limited availability of food and water
- Delays in receiving relief services or medical care

Individual Characteristics

Stress reactions vary from person to person. The way one person reacts to stress may be very different from the way someone else reacts to the same situation. Personal characteristics and his/her experiences of the disaster (how close the person was to the impact of the disaster, what personal and financial losses the person faced and/or what he or she witnessed) can affect a person’s reaction. Consider the following characteristics and think about how these may influence an individual’s response to the disaster.

Experience of the Disaster

- Level of exposure to the disaster (e.g., the closer they are to the disaster, the more stress they may experience.)
- Loss of or injury to family member, other loved ones, pets
- Loss of possessions, house, business
- Loss of community infrastructure

Personal Characteristics

- Age
- Gender
- Family composition (single, married, married with children, etc.)
- Cultural, ethnic, racial background

Individual Resilience

- Pre-disaster stress (e.g., financial, family, health, etc.)
- Connectedness with others (e.g., family, friends, and co-workers) (Is their support system still available to them?)

Factors that Affect You as a Disaster Responder

As a disaster responder, you are not immune to factors that can increase your “stress load.” Consider the following facts and think about how they may affect you and other disaster relief workers.

- Leaving family members and loved ones to go on assignment
- Working in unfamiliar and challenging settings
- Staying in a staff shelter with little privacy
- Encountering unfamiliar cultural or ethnic populations whose primary language may not be English
- Listening to stories from people who have been affected by a disaster
- Seeing disturbing sights
- Working with difficult supervisors and co-workers
- Returning home

Unit 3: Embracing the Principles of Psychological First Aid

Unit Overview and Purpose

In Unit 2, you learned about how clients and workers are impacted by disaster. In this unit, you will be introduced to the principles of psychological first aid. Consider these principles as the awareness you can develop, attitudes you can adopt, and actions you can take to provide comfort, care, and support to people who have been affected by disaster and your fellow disaster relief workers.

Unit Objectives

When you have completed this unit, you should be able to:

- Understand the awareness, attitudes and actions involved in providing psychological first aid.
- Describe psychological first aid actions.

Providing Psychological First Aid

Awareness, attitude and actions are all important aspects of providing psychological first aid. When providing psychological first aid, it is important to gain awareness of:

- What you bring to an interaction with a client or co-worker (previous experience, biases, current stress level, etc.);
- What the client or co-worker needs (even if they can't tell you what they need); and
- How best to respond to the client or co-worker based on the above.

Awareness of these things can help you assume the attitude necessary to best support and meet the needs of the client or co-worker. In order to provide psychological first aid effectively, it is important to adopt an attitude of respect, care, concern and openness to the differences of others.

Psychological First Aid Actions

With awareness and the proper attitude, you can effectively support a client or co-worker with a combination of the 12 psychological first aid actions.

The idea is simply to provide basic care, comfort, and support to those individuals who are experiencing disaster-related stress. These ways include:

- Taking care of yourself
- Making a connection
- Helping people be safe
- Being kind, calm, and compassionate
- Meeting people's basic needs

- Listening
- Giving realistic assurance
- Encouraging good coping
- Helping people connect
- Giving accurate and timely information
- Making a referral to a Disaster Mental Health worker
- Ending the conversation

Take Care of Yourself

Psychological first aid is not just for the people you help while you are on disaster assignment. You should model the behaviors you teach to others and actively work to manage your stress by adopting psychological first aid principles for yourself.

These are important recommendations to help you manage stress during your work:

- ***Maintain a healthy routine.*** Exercise regularly, eat a balanced diet and drink sufficient water.
- ***Know your limits.*** If you feel particularly troubled by a case or client, consult your supervisor and consider handing it off.
- ***Maintain hope.*** Believe in something that has strong meaning to you, whether it is family, God, country or an ideal.
- ***Reflect.*** How have you managed stress before? Focus on your personal stress reactions and preferred coping mechanism.
- ***Rest sufficiently.*** Take regular breaks and try taking long slow breaths if you feel yourself begin to get excited or overwhelmed.
- ***Leave*** when your shift is done. Get some rest in order to be effective on your next shift.
- ***Stay connected*** to your support system.

Make a Connection

You do not have to wait for someone to approach you. It is okay for you to make the first move. A simple greeting along with your name is usually sufficient to get the conversation started. First impressions are important.

- Introduce yourself. Make it personal.
- Ask their name and permission to use their name (e.g., “May I call you Mr. Jones?”)
- Focus your attention on the person.
- If the person appears to *not* want to connect with you, accept that and, if possible, make yourself available for him/her to connect with later.

Help People Be Safe

After a disaster, some people will be concerned with their own and their loved ones' safety. Others may have unintentionally placed themselves in dangerous situations. It is important for you to help them to reach a safe place and, if necessary, to call for medical assistance.

Workers may also find themselves in dangerous situations. It is important for you to:

- Be aware of your surroundings.
- Enter a scene only when you are sure it is safe.
- Help people reach a safe place.
- Help people follow emergency instructions.
- Call 911 for medical assistance, if needed.
- Call 911 and contact a Disaster Mental Health worker if a person is in danger of harming him or herself, or another person.

Be Kind, Calm, and Compassionate

People benefit from compassion and kindness. Establishing a kind and supportive environment for clients and other workers is as simple as handing someone a bottle of water or a blanket to keep the person warm.

You provide comfort when you:

- Express patience and compassion, even if people are being difficult.
- Speak in a calm voice.
- Remain courteous and respectful of people.
- Pay attention to cultural appropriateness of physical closeness, eye contact and gestures.

You may feel that a natural response to comforting someone is to touch him or her. However, consider if your response will be viewed as intrusive or culturally inappropriate.

Our disaster work is often chaotic and intense. Sometimes we can be caught off guard and unaware of how we are relating to others. When frustrations rise, we can be impolite without meaning to be that way.

If you find you have said something you wish you had not, you can apologize. For example, you may express your apology using statements similar to the following:

- "I'm sorry I didn't let you finish what you were saying."
- "I'm sorry I yelled at you earlier."
- "I'm sorry if I hurt your feelings."

Meet People's Basic Needs

During a disaster, clients and workers sometimes ignore their own basic needs.

- Offer or direct them to food and water.
- Provide or direct them to a safe place or shelter.
- Check to see if they are with family or friends.
- Identify if there are health concerns and direct them to the appropriate medical services (Remember: Call 911 in an emergency)
- Encourage healthy behaviors like getting sleep and rest, etc. (e.g., “Take a break, take a walk.”)
- Direct them to a Disaster Mental Health worker when needed.

Listen

When some people are stressed, they like to talk about it. For others, they prefer to keep to themselves or only talk to people whom they know.

- Do not pry. If someone does not wish to talk, you cannot make him or her. For those who do, you can be attentive and listen carefully. Sometimes just being there and not saying anything can be comforting to someone in distress.
- Listen to each person's story in a caring way and avoid getting too attached. If the client bonds with you, when you leave, you will have created another loss and additional grief for the client.

Give Realistic Reassurance

- It is helpful and comforting to let people know that what they are feeling or thinking is understandable because of what they have just experienced.
- It is also important not to minimize their reactions.
- Depending on the situation, most of the stress reactions an individual experiences will begin to go away within a short period of time.

Encourage Good Coping

There are different ways of coping in stressful situations, both positive and negative. Let's explore some of these coping strategies in the next activity.

Activity 2: Coping Strategies

Activity Overview and Purpose

This activity is intended to provide you with an opportunity to explore the various ways in which people respond when they are distressed. You will focus your attention on the following questions:

What are some things that people do in response to stressful situations that are:

- Negative, not helpful and not healthy?
- Positive and healthy?

Activity Instructions

Part 1: Write down as many negative coping strategies that you can think of:

Part 2: Write down as many positive coping strategies that you can think of:

Negative Coping Strategies	Positive Coping Strategies
1.	1.
2.	2.
3.	3.
4.	4.
5.	5.
6.	6.
7.	7.
8.	8.
9.	9.
10.	10.

Help People Connect

- Many people rely on the support of their family and friends to help them get through stressful times.
- If friends and family are not around, you may be the first person in a position to help.
- It is important to connect adults with their usual support systems (e.g., family, friends, neighbors, work colleagues, clergy, etc.) and children with theirs (e.g., family, friends, school, etc.).

You can help people connect when you:

- Get them access to a phone so they can contact their loved ones.
- Suggest other methods of communication such as e-mail, Facebook, or <https://google.org/personfinder/>
- Facilitate access to the Red Cross Safe and Well website so they can reconnect with their loved ones (www.redcross.org/safeandwell).
- Workers also need to stay in touch with their support systems. Encourage them to routinely call or e-mail family and friends.

Give Accurate and Timely Information

Workers and clients need timely and accurate information about the disaster and response efforts. Misinformation and rumors add to stress. Guide them to the appropriate resources for this information in your setting.

Make a Referral to a Disaster Mental Health Worker

The psychological first aid that you provide will be helpful to most people. However, when the need is beyond your psychological first aid skill or your comfort level Disaster Mental Health workers will help. We will talk more about how to identify people who may need a referral in the next unit.

End the Conversation

As you end the conversation with an individual, you should:

- Ask if there is anything else you can do to assist him or her.
- Provide clients with available phone numbers or other resource contact information.
- Keep your Supervisor informed about any concerns you have regarding clients or co-worker.

Unit 4: Making Appropriate Referrals

Unit Overview and Purpose

As a disaster worker, you are on the “front lines” of a relief operation and are often the first person to speak to and provide emotional support to those impacted by the disaster. Though you do not provide mental health services, you do have an important role as the “eyes and ears” in the field for Red Cross Disaster Mental Health workers.

Unit Objectives

When you have completed this unit, you should be able to:

- Identify the limits of psychological first aid.
- Recognize situations requiring referrals to Red Cross Disaster Mental Health workers.
- Define the 3R's.
- Describe how to use the 3R's to determine which individuals will benefit from psychological first aid support and those who need to be referred to a Disaster Mental Health worker.
- Recognize how to use the 3R's to determine if a fellow Red Cross worker could benefit from talking with a Disaster Mental Health worker.

* Remember to reference the *Job Tool: When and How to Offer Disaster Mental Health to Clients and Responders* and the *When to Refer to DMH Reference Card*.

Psychological First Aid Support and Referrals to Disaster Mental Health Workers

The 3R's Defined

There are times when a connection to Disaster Mental Health workers must be made to ensure that individuals (adults or children) get the support they need at the right time. The 3R's will help you to identify people who need to be referred to Disaster Mental Health and determine how quickly this needs to be done.

The 3R's stand for: Reactions to the stress of the event, Risk factors and Resilience factors -- or lack of resilience factors. All three of these factors combined give us a complete view of the person and his/her needs for psychological first aid and Disaster Mental Health referral. The 3R's help determine how well an individual will react and cope with the stressors of the disaster.

Any time a disaster responder thinks that a person is having difficulty coping and needs referral, the responder should trust their intuition and refer this person.

When to Refer to DMH Reference Card

- As you listen to people tell their disaster story, the 3R's can help you to identify an individual's stressors.
- The items listed are not meant to be asked as questions. Instead, listen for these stressors and factors as people talk to you about their disaster experiences.
- Use the *When to Refer to DMH Reference Card* to help decide who needs additional support from a Disaster Mental Health worker.



Side 1 (front of card)

Side 2 (back of card)

When to Refer People to Disaster Mental Health

The 3R's will help you to identify people who need to be referred to Disaster Mental Health and determine how quickly this needs to be done.

Workers should refer a client/responder immediately to Disaster Mental Health if he/she is:

- In danger of harming her/himself or another person – call 911 before contacting Disaster Mental Health
- Unable to care for her/himself
- In severe emotional distress
- Confused or disoriented

Contact a Disaster Mental Health responder immediately either by phone or in person when possible. If a disaster mental health worker is not available, call 911 and inform your site manager.

Workers should refer a client or responder immediately to Disaster Mental Health if he or she is:

- In danger of harming or killing himself or herself or another person. In this instance, call 911 before contacting Disaster Mental Health. A person who expresses the desire to commit suicide, attempts self-harm, or threatens to harm others fall into this category. Then contact the site manager and Disaster Mental Health supervisor.

- You should also contact Disaster Mental Health immediately if someone is incapable of caring for himself or herself adequately because of severe emotional distress, severe confusion, disorientation, irrational thinking, inability to be calmed, or severe drug or alcohol intoxication. In this case, you should call a Disaster Mental Health worker before calling 911, however, if you cannot reach a Disaster Mental Health worker or the site manager and a situation develops where someone is in immediate danger, dial 911 to obtain police assistance.

Mild or moderate emotional distress, confusion, and disorientation may be relatively normal reactions in a disaster; but here we are concerned about severe reactions that can impair a person's ability to function in a healthy and safe way. These situations require an immediate connection to a Disaster Mental Health worker and a site manager.

In many of these situations it will not be necessary to call 911, but if safety is an immediate concern, call 911.

What to Say if You Have to Call 911

- Provide the location of the emergency (street address and cross street and/or name of public building).
- Describe the nature of the emergency so the dispatcher knows whether to send police, fire, and/or EMS; if a weapon is involved, describe it.
- Provide as much information about the person(s) requiring assistance: For example name, height, weight, gender, race, and description of clothing.
- Sometimes the 911 dispatcher will ask to stay on the phone with you to gather more information and to provide you with guidance until help arrives.

If you see or hear about a situation that requires immediate DMH referral, do the following:

- Listen to your instincts, even if you are not sure if the person requires immediate assistance.
- Arrange for one person to stay with the individual, while another worker immediately informs a site supervisor and a Disaster Mental Health worker of the situation.
- Ask other workers to help you organize a brief summary of why you are concerned, who you are concerned about, and where that person is currently located. This way you can convey this information to the Disaster Mental Health worker and the site supervisor.

After you have dealt with the situation, follow-up with your supervisor and a Disaster Mental Health worker. This is when it is especially important to apply psychological first aid principles to yourself by giving yourself a moment to relax, talk with your supervisor, a supportive peer, or a Disaster Mental Health worker about your experience.

When to Refer to DMH As Soon As Possible

As individuals share their disaster stories listen for concerning reactions, significant risk factors, and the resilience factors and coping skills that indicate you should notify a Disaster Mental Health worker as soon as possible.

Concerning Reactions		Risk Factors		Resilience
Unexpected reactions to stress	And/ Or	Family, friend, pet killed	And/ Or	Has no family/ community support
		Felt threat to life		
		Witnessed death/injury		Has no financial resources
Family/friends concerned about behaviors		Separated from family/caregiver		Lacks good coping skills
		Community is destroyed		

When to Refer to DMH by the End of Shift

Referral Needed By the End of the Shift

Many individuals would benefit from a referral to a Disaster Mental Health worker but the need for referral is less urgent. For these situations, it is okay to get Disaster Mental Health help by the end of your work shift that day. These situations are less likely to create lasting psychological distress.

Concerning Reactions		Risk Factors		Resilience
Difficulty thinking/concentrating	And/ Or	Home destroyed	And/ Or	Appears to have some positive coping skills
		Assisted with rescue/recovery		
Anxiety/nervousness		Sheltered in place		Has some community/family support
Significant physical complaints		Has severe financial loss (business destroyed)		

When Contacting DMH

Whether you've determined the affected person needs to be referred to a Disaster Mental Health worker immediately, as soon as possible or by the end of your shift, there are several steps you need to take. First, help the Red Cross Disaster Mental Health worker to locate the individual. Second, use the 3R's to explain your reasons for referral. And finally, while waiting to connect the person to a Disaster Mental Health worker, provide support using psychological first aid.

No Concerning Reactions, No Risk Factors, and Appears Resilient (has good coping strategies)

If the person has no concerning reactions, has not been exposed to any of the disaster risk factors, and has good coping skills, you do not need to connect this individual with a Disaster Mental Health worker. If the person brings up risk factor situations at a later time, you can use the 3R's to determine if a referral to a Disaster Mental Health worker is needed. Finally, it's important to remember that people without any of these risk factors can still be very upset by the disaster. You can help them to cope and recover with the psychological first aid principles you have learned in this course.

Remember to use your good judgment! If you feel that someone is having a very difficult time, and you cannot calm them, please refer the person to a Disaster Mental Health worker.

Connecting Disaster Workers to DMH

There are also risk indicators for responders. Some of these are similar to those already discussed and others are unique to being a responder.

Some examples may include when a responder:

Concerning Reactions		Risk Factors		Resilience
Continues to think about a specific incident/client/topic	And/ Or	Witnessed serious/fatal injuries	And/ Or	Displays negative/ poor coping strategies
Difficulty sleeping		Witnessed massive destruction		
Conflict with other volunteers/staff members		Destruction of own community		
		Felt life was in danger		
		Worked with exploitive or unappreciative clients		

You may provide psychological first aid for co-workers who have experienced the situations above. You should also connect these workers to a Disaster Mental Health worker for follow – up. List the risk factors you heard when you make the referral to Disaster Mental Health. Make the referral no later than the end of your shift.

You may provide psychological first aid for co-workers who have less serious risk factors, such as:

- Having to wait to start work and not feeling fully utilized on the disaster operation.
- Living and working conditions that are physically difficult (such as temperature extremes, exposure to the elements, noisy, crowded, lack of privacy).
- Experiencing co-worker or supervisor conflict.

- Working in an area with unfamiliar culture, language, customs, or foods.
- Difficulty staying in touch with family and friends back home or having concerns about what is happening at home.
- Feeling discouraged that they didn't accomplish enough of the mission.

It is not necessary to refer co-workers to Disaster Mental Health unless you feel that your psychological first aid did not help sufficiently. As with others, if you feel that a disaster worker is having a difficult time, please refer the person to Disaster Mental Health.

Talking to People about Disaster Mental Health

Some responders may feel uncomfortable offering a Disaster Mental Health referral to a client. Below are some tips and examples of language responders can use to discuss Disaster Mental Health with clients. For more information see: *Job Tool: When and How to offer Disaster Mental Health to Clients and Responders* on the Exchange.

Tips for offering Disaster Mental Health support:

- **Avoid stigma:** If concerned about stigma, refer to Disaster Mental Health responders as “disaster counselors” or “stress counselors.”
- **Keep things simple:** Simply ask the client if he/she would like to talk to someone who can help with coping strategies.
- **Don't judge:** A client may benefit from having someone to talk to after experiencing a traumatic or highly stressful event.
- **Ask about others:** Sometimes people are more comfortable requesting help for a loved one they are concerned about than for themselves.
- **Focus on Children:** Offer Disaster Mental Health services to parents who are concerned about whether their child is coping and adjusting well after a disaster.

Here are some examples of what to say:

- “The Red Cross has disaster counselors who talk with people who have experienced a fire. Would you like a call from a disaster counselor?”
- “Red Cross counselors are trained to help people manage disaster stress. This includes helping you manage the challenges you are facing right now and what your family can expect down the road.”
- “Children have different reactions to disasters than adults. The Red Cross has counselors you can talk to if you are worried about your children or just want to know what behaviors to look for. Would you like to be contacted by a Red Cross counselor?”
- “You mentioned you have been treated for a mental health condition in the past. Would you like to talk to a Red Cross counselor?”

How to Contact Disaster Mental Health

As soon as you report to your disaster assignment, ask how to contact the Disaster Mental Health workers where you are assigned. This will enable you to quickly connect people to Disaster Mental Health when needed.

YOU CAN DO IT!

By using the When to Refer to DMH Reference Card and your psychological first aid skills, you can effectively support disaster survivors and fellow responders. For those who need additional help, you can make an important connection to a Disaster Mental Health worker.

Remember - YOU CAN DO IT! You can make a tremendous difference in the lives of people impacted by disaster.

Unit 5: Practicing Psychological First Aid

Unit Overview and Purpose

Throughout this training, you have learned about how to recognize and respond to disaster-related stress in clients, co-workers, and yourself. You have also been provided with suggestions and ways you can help people cope with or reduce their stress.

Unit Objectives

When you have completed this unit, you should be able to:

- Identify the attitudes and behaviors necessary to successfully provide psychological first aid.
- Practice using the actions of psychological first aid in scenario-based activities.

Psychological First Aid in Action

As you get ready to use your new psychological first aid skills, you should remember to:

- Take care of yourself.
- Be tolerant.
- Keep boundaries.
- Respect people's privacy.
- Ask for help.

Take Care of Yourself

Because disaster work is stressful and providing psychological first aid to clients and other workers can increase that stress, it is important to take care of yourself.

Be Tolerant

You are likely to encounter people who look, think, talk, and dress differently from you. Being tolerant means treating all people with respect and dignity. Sometimes, practicing tolerance can be difficult. However, as a Red Cross volunteer, you have already demonstrated that you have a commitment to help others in difficult times.

Keep Boundaries

When reaching out to help others, you can risk offending the people you are trying to help.

When reaching out to others, you can risk offending the people you are trying to help or overstepping your boundaries. You may offend people by:

- Pushing people to talk when they do not want to.
- Asking for too much information too soon.

- Not respecting a client or worker's desire NOT to be referred for Disaster Mental Health.

You may overstep your boundaries by:

- Telling people what to do or not do.
- Sharing personal views, values and beliefs.
- Becoming too involved with clients or other workers.

Respect People's Privacy

When you provide psychological first aid, you are likely to hear many personal stories. You should not share these stories or other information with just anyone. Maintaining privacy and confidentiality of a client or other worker is critical. A helpful rule of thumb to keep in mind is as follows:

When information that is shared with you implies a person is in danger of immediate harm or injury, you must inform a supervisor or a Disaster Mental Health worker.

Keep in mind that there are many ways to make someone aware that a person is in need of help without revealing every detail of what that individual has told you.

Ask for Help

Sometimes psychological first aid is not enough. While most people will find it helpful and sufficient, others will need additional mental health care. It is important to recognize this, and when necessary, make referrals to Disaster Mental Health workers.

Use the following table as a guideline about some things you can do and say and some things you should avoid doing and saying. *Remember that some individuals are culturally sensitive to certain kinds of behaviors such as eye contact and physical contact and proximity.*

	Do This	Not This
Body Language	Sit facing or directly beside the client or worker. Make eye contact as appropriate, depending upon cultural expectations.	Sit back with your arms folded in front of you. Look around the room or appear distracted while the client/worker is talking to you. Walk away from the client or worker while he or she is talking to you.
Eye Contact	Make eye contact as appropriate, depending upon cultural expectations.	Look around the room or appear distracted while the client/worker is talking to you.
Attention	Actively listen to the client while he or she is talking to you.	Walk away from the client or worker while he or she is talking to you.
Expression (what you say and how you say it)	“It sounds like that may have been a very difficult frustrating/frightening/stressful) situation?” “Is there anything I can do for you right now?”	“You should be thankful that you and your family got out alive.” “Look, I really don’t have time to listen to this...” “That doesn’t sound so bad... you should hear what this other guy went through.” “It must have been God’s will.” “You really shouldn’t feel that way.” “Don’t feel (guilty, bad, nervous, etc.)”

Table 3: Do’s and Don’ts

Activity 3: Pulling It All Together in Practice

Now that we have discussed some practical actions you can take with both adults and children after a disaster, let's look at various scenarios.

Activity Overview and Purpose

This activity is intended to explore situations in which psychological first aid should be used. Your instructors will demonstrate how you should approach this activity by addressing *Scenario 1: Video scene of workers addressing clients' concerns*. Your instructors will then divide the class into small groups and assign each group several scenarios. Your objective is to determine what you will say and how you will offer psychological first aid to those individuals described in the scenarios.

Activity Instructions

Review and discuss your assigned scenarios with your group. Share responses with the class at large.

Specifically, your tasks are to:

- Read the scenario description.
- Select a note taker, to make sure that someone in the group is jotting down your ideas.
- Determine who within your group will share responses with the other course participants. You are not limited to one spokesperson. Share the task.
- Discuss with other members in your group what you understand about the scenario and how you would approach the situation using the principles of psychological first aid. (e.g., What would you say? What would you do?)
- Use the scenario tables to guide your discussion and note taking.
- Offer your responses to the rest of the class when called upon.

Scenario 1: Video scene of workers addressing clients' concerns

Description: Officials are telling residents that their apartment building is safe to enter even though the residents are upset about the building shaking every time a car goes by.

Discussion Points and Questions:

Consider how the two Red Cross workers approached the same client and how they differed in their approach and what they said. In the first example, the worker tells the client, "We cannot help you." Note how the second worker used psychological first aid, offered concrete alternatives and said that the Red Cross could help meet their needs. Setting the issue of entry to the building aside, what other psychological first aid actions would have helped in this situation?

PFA Action	What you would do or say
Make a connection	
Help people be safe	
Be kind, calm, and compassionate	
Meet people's basic needs	
Listen	
Give reassurance	
Encourage good coping	
Help people connect	
Give accurate and timely information	
Make a referral to Disaster Mental Health	
End the conversation	

Scenario 2: Tornado devastating an entire community

Description: A tornado has severely damaged an entire community. While distributing water to people picking through the remains of their homes, you hear a woman standing alone muttering, “It’s gone, it’s all gone. Everything I own is all gone.”

PFA Action	What you would do or say
Make a connection	
Help people be safe	
Be kind, calm, and compassionate	
Meet people’s basic needs	
Listen	
Give reassurance	
Encourage good coping Help people connect	
Give accurate and timely information	
Make a referral to Disaster Mental Health	
End the conversation	

Scenario 3: Shelter serving individuals responding to a hurricane warning

Description: A hurricane warning has sent people to a shelter. While walking through the shelter, you hear a mother yelling at her two young children to stop fighting and “act right.”

PFA Action	What you would do or say
Make a connection	
Help people be safe	
Be kind, calm, and compassionate	
Meet people’s basic needs	
Listen	
Give reassurance	
Encourage good coping Help people connect	
Give accurate and timely information	
Make a referral to Disaster Mental Health	
End the conversation	

Scenario 4: Fire in an apartment complex resulting in fatalities

Description: A fire has burned out a very large apartment complex, leaving several fatalities. While helping a family complete the appropriate paperwork to receive Red Cross help, you notice family members are very quiet and tearful. The father tells you that the grandmother who was living with them did not survive the fire.

PFA Action	What you would do or say
Make a connection	
Help people be safe	
Be kind, calm, and compassionate	
Meet people's basic needs	
Listen	
Give reassurance	
Encourage good coping Help people connect	
Give accurate and timely information	
Make a referral to Disaster Mental Health	
End the conversation	

Scenario 5: Your shelter co-worker's expression of stress

Description: You have been working in a shelter only a couple of days. A co-worker who is getting ready to head home tells you, “I don’t think I will ever get these images of the disaster out of my mind.”

PFA Action	What you would do or say
Make a connection	
Help people be safe	
Be kind, calm, and compassionate	
Meet people’s basic needs	
Listen	
Give reassurance	
Encourage good coping Help people connect	
Give accurate and timely information	
Make a referral to Disaster Mental Health	
End the conversation	

Unit 6: Course Conclusion

Wrapping Up

Congratulations! You have completed Psychological First Aid: Helping Others in Times of Stress. You can now:

- Recognize the signs of stress in clients, co-workers, and yourself.
- Provide immediate support to people who may be experiencing stress by using psychological first aid principles.
- Obtain Disaster Mental Health support for clients, co-workers, and yourself, when needed.

Thank you for attending this course.

Speed Review Game

Purpose

The purpose of this game of *Speed Review* is to provide us with a final opportunity to discuss what you have learned in the training course.

Speed Review Questions

1. What is the purpose of psychological first aid course?
2. There are five (5) main areas within which you can observe the signs of disaster-related stress. What are they?
3. Name the signs of stress in adults from the Feelings category.
4. Name the signs of stress in adults from the Thoughts category.
5. Name the signs of stress in adults from the Physical Effects category.
6. Name the signs of stress in adults from the Behaviors category.
7. Name the signs of stress in adults from the Spiritual category.
8. When do children feel safe and secure?
9. The specific characteristics of a disaster can influence an individual's stress response. Name the five (5) that were discussed and give an example for each.
10. There are three categories of individual characteristics can influence how an individual reacts during a stressful situation. Name each category and examples of the individual characteristics within that category.
11. The principles of psychological first aid involve developing awareness, adopting attitudes, and using practical actions to provide comfort, care and support to people affected by disaster. Name the 12 practical actions that you could use to do this.
12. There are six (6) ways we learned we can take care of ourselves. What are they and what are examples for each?.

13. What are ways we can meet people's basic needs?
14. Based on the 3R's (reactions to the stress of the event, risk factors, and individual resilience) when must *you immediately* link a client or responder to a Disaster Mental Health worker?
15. Based on the 3R's (reactions to the stress of the event, risk factors, and individual resilience) when is it appropriate to link a client or responder to a Disaster Mental Health worker by the end of your shift? What are the concerning behaviors, risk factors, and resilience factors?
16. What are five (5) tips for offering Disaster Mental Health support?

Summary

Congratulations! You have completed Psychological First Aid: Helping Others in Times of Stress. You can now:

- Recognize the signs of stress in clients, co-workers, and yourself.
- Provide immediate support to people who may be experiencing stress by using psychological first aid principles.
- Obtain Disaster Mental Health support for clients, co-workers, and yourself, when needed.

Next Steps

Your next steps should be to:

- Take other required and recommended courses for your chosen function.
- Be flexible and willing to learn about opportunities across the American Red Cross.
- Get involved – get to know the other responders and leadership at your local Red Cross chapter.

Appendix

- **Speed Review Questions and Answers**
- **Scenarios**
 - Scenario 1: Video scene of workers addressing clients' concerns
 - Scenario 2: Tornado devastating an entire community
 - Scenario 3: Shelter serving hurricane survivors
 - Scenario 4: Fire in an apartment building
 - Scenario 5: Your shelter co-worker's expression of stress

Speed Review Questions and Answers

1. What is the purpose of the psychological first aid course?
 - To enable you to provide comfort, care, and support to people affected by a disaster. This includes clients, workers, and yourself.
2. There are five (5) main areas within which you can observe the signs of disaster-related stress. What are they?
 - Feelings
 - Thinking
 - Physical Effects
 - Behaviors
 - Spiritual
3. Name the signs of stress in adults, children and teens from the Feelings category.
 - Rage, anger, irritability
 - Resentment
 - Anxiety, fearfulness
 - Despair, hopelessness
 - Numbness
 - Terror
 - Guilt
 - Sadness
 - Helpless, loss of control
 - Disinterest

- Feeling Overwhelmed
4. Name the signs of stress in adults, children and teens from the Thoughts category.
 - Difficulty concentrating and thinking
 - Difficulty making decisions
 - Forgetfulness
 - Confusion
 - Distortion of sense of time
 - Lowered self-esteem
 - Self-blame
 - Intrusive thoughts, memories, flashbacks
 - Worry
 - A sense of being cut off from reality
 - Self-harm
 5. Name the signs of stress in adults, children and teens from the Physical Effects category.
 - Fatigue, difficulty sleeping
 - Agitation
 - Physical complaints (e.g., headaches, stomach problems)
 - Decreased or increased appetite
 - Decreased or increased sex drive
 - Easily startled
 - Increased cravings for/ use of caffeine, nicotine, food, alcohol, illicit substances
 - Lightheadedness
 - Weakness
 6. Name the signs of stress in adults from the Behaviors category.
 - Crying spells
 - Angry outbursts
 - Avoiding people, places, and situations
 - Argumentative
 - School and work problems
 - Risky behaviors (driving erratically, multiple sexual partners, unsafe sex)
 - Inattention to appearance, personal hygiene, self-care

7. Name the signs of stress in adults, children and teens from the Spiritual category.
 - Change in relationship with or belief about God/Higher Power
 - Abandonment of prayer, ritual, scripture, devotions, sacraments
 - Struggle with questions about the meaning of life, justice, fairness, afterlife
 - Questioning the beliefs of their faith
 - Rejection of spiritual care providers
 - Increased trust in Higher Power
 - Feelings and expressions of gratitude/appreciation for Divine protection
 - Increased sense of life mission/purpose due to the disaster
 - Increase in spiritual rituals and service to others
8. When do children feel safe and secure?

When they have predictable routines in their lives (mealtime, playtime, and bedtime)
9. The specific characteristics of a disaster can influence an individual's stress response. Name the five (5) that were discussed and give an example for each.
 - Type (natural or human-caused, notice or no-notice)
 - When it occurs (e.g., time of day, time of year)
 - Who is affected(e.g., the number of people including children, injured, missing, or killed)
 - What is affected (e.g., damage to healthcare facilities, grocery stores, roads, telephone service, schools, etc.)
 - Where it happens (e.g., the geographic boundaries)
10. There are three categories of individual characteristics can influence how an individual reacts during a stressful situation. Name each category and examples of the individual characteristics within that category.
 - Experience of the disaster
 - Level of exposure to the disaster (e.g., the closer they are to the disaster, the more stress they may experience.)
 - Loss of or injury to family member, other loved ones, pets
 - Loss of possessions, house, business
 - Loss of community infrastructure
 - Personal characteristics
 - Age
 - Gender

- Family composition (single, married, married with children, etc.)
 - Cultural, ethnic, racial background
 - Individual resilience
 - Pre-disaster stress (e.g., financial, family, health, etc.)
 - Connectedness with others (e.g., family, friends, and co-workers)
11. The principles of psychological first aid involve developing awareness, adopting attitudes, and using practical actions to provide comfort, care and support to people affected by disaster. List the 12 practical actions that you could use to do this.
- Take care of yourself.
 - Make a connection.
 - Meet peoples' basic needs.
 - Help people be safe.
 - Be kind, calm, and compassionate.
 - Listen.
 - Give realistic assurance.
 - Encourage good coping.
 - Help people connect.
 - Give accurate and timely information.
 - Make a referral to a Disaster Mental Health worker.
 - End the conversation.
12. There are six (6) ways we learned we can take care of ourselves. What are they and what are examples for each?
- Maintain a healthy routine.
 - Exercise regularly.
 - Eat a balanced diet.
 - Drink sufficient water.
 - Know your limits.
 - If you feel particularly troubled by a case or client, consult your supervisor and consider handing it off.
 - Maintain hope.
 - Believe in something that has strong meaning to you, whether it is family, God, country or an ideal.
 - Reflect.

- How have you managed stress before?
 - Focus on your personal stress reactions and preferred coping mechanism.
 - Rest sufficiently.
 - Take regular breaks and try taking long slow breaths if you feel yourself begin to get excited or overwhelmed.
 - Leave when your shift is done.
 - Get some rest in order to be able to be effective on your next shift.
13. What are ways we can meeting people's basic needs?
- Offer or direct them to food and water.
 - Provide or direct them to a safe place or shelter.
 - Check to see if they are with family or friends.
 - Identify if there are health concerns and direct them to the appropriate medical services (Remember: Call 911 in an emergency)
 - Encourage healthy behaviors like getting sleep and rest, etc. (e.g., "Take a break, take a walk.")
 - Direct them to a Disaster Mental Health worker when needed.
14. Based on the 3R's (reactions to the stress of the event, risk factors, and individual resilience) when must you *immediately* link a client or responder to a Disaster Mental Health work?
- When a person is:
 - In danger of harming him/herself or another person – call 911 before contacting Disaster Mental Health
 - Unable to care for him/herself
 - In severe emotional distress
 - Confused or disoriented
15. Based on the 3R's (reactions to the stress of the event, risk factors, and individual resilience) when is it appropriate to link a client or responder to a Disaster Mental Health worker by the end of your shift? Name the concerning reactions, risk factors, and resilience factors.
- Concerning reactions
 - Difficulty thinking/concentrating
 - Anxiety/nervousness
 - Significant physical complaints
 - Risk factors
 - Home destroyed

- Assisted with rescue/recovery
- Sheltered in place
- Has severe financial loss (business destroyed)
- Resilience
 - Appears to have some coping skills
 - Has some community/family support
 - Lacks good coping skills

16. What are five (5) tips for offering Disaster Mental Health support?

- Avoid stigma
 - Refer to Disaster Mental Health responders as “disaster counselors.”
- Keep things simple
 - Simply ask the client if he/she would like to talk to someone who can help with coping strategies.
- Don’t judge
 - A client may benefit from having someone to talk to after experiencing a traumatic or highly stressful event.
- Ask about others
 - Sometimes people are more comfortable requesting help for a loved one they are concerned about than for themselves.
- Focus on children
 - Offer Disaster Mental Health services to parents who are concerned about whether their child is coping and adjusting well after a disaster.

Scenarios

Scenario 1: Video scene of workers addressing clients' concerns

Description: Officials are telling residents that their apartment building is safe to enter and the residents are upset about the shaking every time a car goes by.

Discussion Points and Questions: Consider how the two Red Cross workers approached the same client and how they differed in their approach and what they said. In the first example, the worker tells the client, "We cannot help you." Note how the second worker used psychological first aid, offered concrete alternatives and said that the Red Cross could help meet their needs. Setting the issue of entry to the building aside, what other psychological first aid actions would have helped in this situation?

Scenario 1 Psychological First Aid Table	
PFA Action	What would you do or say?
Make a connection	<ul style="list-style-type: none"> • "Are you worried that the building is not safe for your kids because the building is still shaking?"
Help people be safe	<ul style="list-style-type: none"> • "Let's see if we can contact the city building inspector's office. Perhaps we can have someone speak with you about the shaking?"
Be kind, calm, and compassionate	<ul style="list-style-type: none"> • "I can sure understand how you would be worried about your kids' safety..."
Meet people's basic needs	<ul style="list-style-type: none"> • "What do you need right now?"
Listen	<ul style="list-style-type: none"> • Focus your attention specifically on the person. • Sit or stand next to them or facing them.
Give reassurance	<ul style="list-style-type: none"> • "We will find some answers together."
Encourage good coping	<ul style="list-style-type: none"> • "We have someone who can speak with you and the building inspector." • "We also have a Red Cross mental health worker who can address your concerns about how the kids are doing." • Make a referral to Red Cross Disaster Mental Health if the 3R's indicate the person would benefit from this referral.

Help people connect	<ul style="list-style-type: none"> • “Do you have friends or family close by who you can call to be with you right now?”
Give accurate and timely information	<ul style="list-style-type: none"> • “Our understanding is xxx..., but here is an 800 number you can call to ask specific questions. One of our workers can help you contact them right now.”
Make a referral to Disaster Mental Health	<ul style="list-style-type: none"> • Use the <i>When to Refer to DMH Reference Card</i> to determine if a referral to a Disaster Mental Health worker is warranted. • In this scenario, the client feels her home is damaged and unsafe, even though the building department has indicated otherwise. What is most important in this situation is how the client feels! After the issue of shelter admission is handled, refer the client to a Disaster Mental Health worker to help resolve the issue between the client’s and the inspector’s points of view.
End the conversation	<ul style="list-style-type: none"> • “Is there anything else I can help you with right now?”

Scenario 2: Tornado devastating an entire community

Description: A tornado has severely damaged an entire community. While distributing water to people picking through the remains of their homes, you hear a woman standing alone muttering, “It’s gone, it’s all gone. Everything I own is all gone.”

Scenario 2 Psychological First Aid Table	
PFA Action	What would you do or say?
Make a connection	<ul style="list-style-type: none"> • “Hello, I am John with the Red Cross. Can I offer you some water?”
Help people be safe	<ul style="list-style-type: none"> • “We are setting up a shelter for everyone from this area at a safer place. Would you like me to help you with that?”
Be kind, calm, and compassionate	<ul style="list-style-type: none"> • Say, “I am sorry for your loss” and/or stand beside the woman quietly for a short while.
Meet people’s basic needs	<ul style="list-style-type: none"> • “You know, at the shelter you can meet with a Red Cross worker who may be able to help with some of your needs, or you can come to the Red Cross chapter tomorrow.”
Listen	<ul style="list-style-type: none"> • “I heard you say you lost everything...” • Listen if she tells her story.
Give reassurance	<ul style="list-style-type: none"> • “This must feel overwhelming to you right now.”
Encourage good coping	<ul style="list-style-type: none"> • “What are you going to do after you leave here today?”
Help people connect	<ul style="list-style-type: none"> • Do you have friends or family who can help or you can call right now?” • Assist the woman in making these connections (instruct her how to do so if you cannot help directly).
Give accurate and timely information	<ul style="list-style-type: none"> • “We will be in the neighborhood for the next several days with food and water. The shelter has people who can help with getting your insurance paperwork started.”
Make a referral to Disaster Mental Health	<ul style="list-style-type: none"> • Use the <i>When to Refer to DMH Reference Card</i> to determine if a referral to a Disaster Mental Health worker is warranted. In this situation you will make a

	<p>referral to Disaster Mental Health because of the degree of property loss.</p> <ul style="list-style-type: none"> • “We will be around, and given your loss, I will let other Red Cross workers know to check in with you. Is that okay?”
End the conversation	<ul style="list-style-type: none"> • “Is there anything else I can help you with right now? If you need anything later, just look for me or another Red Cross worker.”

Scenario 3: Shelter serving individuals responding to a hurricane warning

Description: A hurricane warning has sent people to a shelter. While walking through the shelter, you hear a mother yelling at her two young children to stop fighting and “act right.”

Scenario 3 Psychological First Aid Table	
PFA Action	What would you do or say?
Make a connection	<ul style="list-style-type: none"> “Is there anything I can do for you and your children? Did you find something to eat or games for the children to play?”
Help people be safe	<ul style="list-style-type: none"> Ask the mother and the kids if they are okay.
Be kind, calm, and compassionate	<ul style="list-style-type: none"> “In situations like these, kids can have trouble with their behavior. Having to leave home can get to all of us.”
Meet people’s basic needs	<ul style="list-style-type: none"> Offer some water and food.
Listen	<ul style="list-style-type: none"> Listen to what the mother and the kids are telling you.
Give reassurance	<ul style="list-style-type: none"> “Usually, after everything calms down, children seem to settle down also.”
Encourage good coping	<ul style="list-style-type: none"> “The children seem to be upset with everything that is happening, and fighting is how they are handling it. We have an area in the shelter for children where they can go right now, and it would let you take care of things you may need to do.” Offer the mother any children’s toys, book, crayons, paper, etc. that can help occupy the children.
Help people connect	<ul style="list-style-type: none"> “Do you have other family members or friends here with you?”
Give accurate and timely information	<ul style="list-style-type: none"> “We have the city’s 800 number to determine what services they are going to provide in addition to what the Red Cross is providing.”
Make a referral to Disaster Mental Health	<ul style="list-style-type: none"> Using the <i>When to Refer to DMH Reference Card</i>, ask yourself: Is a referral to a Disaster Mental Health worker needed at this point?
End the conversation	<ul style="list-style-type: none"> “This situation is tough on all of us. Let me or any Red Cross worker know if there is anything you need.”

Scenario 4: Fire in an apartment complex resulting in fatalities

Description: A fire has burned out a very large apartment complex, leaving several fatalities. While helping a family complete the appropriate paperwork to receive Red Cross help, you notice family members are very quiet and tearful. The father tells you that the grandmother who was living with them did not survive the fire.

Scenario 4 Psychological First Aid Table	
PFA Action	What would you do or say?
Make a connection	<ul style="list-style-type: none"> Stay with family members and allow them to tell their story. It is okay to say that you are sorry for their loss.
Help people be safe	<ul style="list-style-type: none"> Make sure the family is in a safe place away from the apartment building. If possible, provide a more private space for the family to be together.
Be kind, calm, and compassionate	<ul style="list-style-type: none"> Speak softly. It is okay to let others see that you have empathy for their situation.
Meet people's basic needs	<ul style="list-style-type: none"> Provide the family with water and tissues as these may be needed now as well as later. The simple act of drinking some water can help some people catch their breath and calm down.
Listen	<ul style="list-style-type: none"> This allows family members to share what they want to share at their pace and offers them the opportunity to talk with someone who is available to listen.
Give reassurance	<ul style="list-style-type: none"> Following the traumatic loss of a loved one, reassurance is not suggested in the time frame of this example. The other psychological first aid actions, however, are appropriate.
Encourage good coping	<ul style="list-style-type: none"> Encourage the family to support each other. If possible, remind them that each person grieves and handles difficult news differently and at their own pace.
Help people connect	<ul style="list-style-type: none"> "Do you have other family members nearby? Can I help you contact anyone right now? Would anyone in the family, the kids perhaps, like to talk with someone about their grandmother?"
Give accurate and timely information	<ul style="list-style-type: none"> Provide information about services available for the family related to housing, food, clothing, and any information you have or can gather about what can be done to help the family as they begin to deal with funeral homes, etc.

Make a referral to Disaster Mental Health	<ul style="list-style-type: none"> Using the <i>When to Refer to DMH Reference Card</i> factor in “family killed” when making contact with the Disaster Mental Health worker. Share the 3R’s information with the Disaster Mental Health worker.
End the conversation	<ul style="list-style-type: none"> “I am very sorry for your loss. I will make sure that someone from our Red Cross team finds you to talk to you more about what happened and what you can do.”

Scenario 5: Your shelter co-worker's expression of stress

Description: You have been working in a shelter only a couple of days. A co-worker who is getting ready to head home tells you, "I don't think I will ever get these images of the disaster out of my mind."

Scenario 5 PFA Table	
PFA Action	What would you do or say?
Make a connection	<ul style="list-style-type: none"> • "Sounds like it's been rough?"
Help people be safe	<ul style="list-style-type: none"> • "It can be scary to be reminded of difficult images. Do you think it would help to talk about it?"
Be kind, calm, and compassionate	<ul style="list-style-type: none"> • "It sounds like it has been a really demanding experience."
Meet people's basic needs	<ul style="list-style-type: none"> • The main need here appears to be related to the images. So, use the referral process to get them to Disaster Mental Health before the person heads home.
Listen	<ul style="list-style-type: none"> • Listen to what the worker is telling you.
Give reassurance	<ul style="list-style-type: none"> • "I can understand how you have images after all that."
Encourage good coping	<ul style="list-style-type: none"> • "What do you think might help?"
Help people connect	<ul style="list-style-type: none"> • "That can happen after an event like this."
Give accurate and timely information	<ul style="list-style-type: none"> • "You can always reach a Disaster Mental Health worker while you are on a relief operation and also through your chapter at home."
Make a referral to Disaster Mental Health	<ul style="list-style-type: none"> • Based on what you heard the co-worker say, it is appropriate to suggest that she talk with a Disaster Mental Health worker. The Disaster Mental Health worker can help her identify ways to handle the images in her mind if they become problematic.
End the conversation	<ul style="list-style-type: none"> • "I hope you can connect with a Disaster Mental Health worker before you leave. Have a safe trip home."