Preparing to Deliver Psychological First Aid

In order to be of assistance to disaster-affected communities, the Psychological First Aid provider must be knowledgeable about the nature of the event, current circumstances, and the type and availability of relief and support services.

Planning and preparation are important when working as a Psychological First Aid provider. Up-to-date training in disaster mental health and knowledge of your incident command structure are critical components in undertaking disaster relief work. You may also be working with children, older adults and special populations, all of which require additional in-depth knowledge. In deciding whether to participate in disaster response, you should consider your comfort level with this type of work, your current health, your family and work circumstances, and be prepared to engage in appropriate self-care. See Appendix C for more guidance in regard to these topics.

Entering the Setting

Psychological First Aid begins when a disaster response worker enters an emergency management setting in the aftermath of a disaster (See Appendix B for descriptions of various service delivery sites). Successful entry involves working within the framework of an authorized Incident Command System (ICS) in which roles and decision-making are clearly defined. It is essential to establish communication and coordinate all activities with authorized personnel or organizations that are managing the setting. Effective entry also includes learning as much as you can about the setting, for example, leadership, organization, policies and procedures, security, and available support services. You need to have accurate information about what is going to happen, what services are available, and where they can be found. This information needs to be gathered as soon as possible, given that providing such information is often critical to reducing distress and promoting adaptive coping.

Providing Services

In some settings, Psychological First Aid may be provided in designated areas. In other settings, providers may circulate around the facility to identify those who might need assistance. Focus your attention on how people are reacting and interacting in the setting. Individuals who may need assistance include those showing signs of acute distress, including individuals who are:

- Disoriented
- Confused
- Frantic or agitated
Providing Services - continued

- Panicky
- Extremely withdrawn, apathetic, or “shut down”
- Extremely irritable or angry
- Exceedingly worried

Group Settings

While Psychological First Aid is primarily designed for working with individuals and families, many components can be used in group settings, such as when families gather together for information about loved ones and for security briefings. The components of providing information, support, comfort, and safety can be applied to these spontaneous group situations. For groups of children and adolescents, offering games for distraction can reduce anxiety and concern after hours and days in a shelter setting.

When meeting with groups, keep the following in mind:

- Tailor the discussion to the group’s shared needs and concerns.
- Focus the discussion on problem-solving and applying coping strategies to immediate issues.
- Do not let discussion about concerns lapse into complaints.
- If an individual needs further support, offer to meet with him/her after the group discussion.

Maintain a Calm Presence

People take their cue from how others are reacting. By demonstrating calmness and clear thinking, you can help survivors feel that they can rely on you. Others may follow your lead in remaining focused, even if they do not feel calm, safe, effective, or hopeful. Psychological First Aid providers often model the sense of hope that survivors cannot always feel while they are still attempting to deal with what happened and current pressing concerns.

Be Sensitive to Culture and Diversity

Providers of Psychological First Aid must be sensitive to culture, ethnic, religious, racial, and language diversity. Whether providing outreach or services, you should be aware of your own values and prejudices, and how these may agree with or differ from those of the community being served. Training in cultural competence can facilitate this awareness. Helping to maintain or reestablish customs, traditions, rituals, family structure, gender roles, and social bonds is important in helping survivors cope with the impact of a disaster. Information about the community being served, including how emotions and other psychological reactions are
expressed, attitudes toward government agencies, and receptivity to counseling, should be gathered with the assistance of community cultural leaders who represent and best understand local cultural groups.

Be Aware of At-Risk Populations

Individuals that are at special risk after a disaster include:

- Children, especially those:
  - Separated from parents/caregivers
  - Whose parents/caregivers, family members, or friends have died
  - Whose parents/caregivers were significantly injured or are missing
  - Involved in the foster care system
- Those who have been injured
- Those who have had multiple relocations and displacements
- Medically frail children and adults
- Those with serious mental illness
- Those with physical disability, illness, or sensory deficit
- Adolescents who may be risk-takers
- Adolescents and adults with substance abuse problems
- Pregnant women
- Mothers with babies and small children
- Disaster response personnel
- Those with significant loss of possessions (for example, home, pets, family memorabilia)
- Those exposed first hand to grotesque scenes or extreme life threat

Especially in economically disadvantaged groups, a high percentage of survivors may have experienced prior traumatic events (for example, death of a loved one, assault, disaster). As a consequence, minority and marginalized communities may have higher rates of pre-existing trauma-related mental health problems, and are at greater risk for developing problems following disaster. Mistrust, stigma, fear (for example, of deportation), and lack of knowledge about disaster relief services are important barriers to seeking, providing, and receiving services for these populations. Those living in disaster-prone regions are more likely to have had prior disaster experiences.
Psychological First Aid
Field Operations Guide
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Core Actions:
- Contact and Engagement
- Safety and Comfort
- Stabilization
- Information Gathering: Current Needs and Concerns
- Practical Assistance
- Connection with Social Supports
- Information on Coping
- Linkage with Collaborative Services