

Psychological First Aid A Minnesota Community Support Model



Psychological First Aid (PFA)

Principles and techniques of PFA meet four basic standards.

- Consistent with research evidence on risk and resilience following trauma
- Applicable and practical in field settings
- Appropriate to developmental level across the lifespan.
- Culturally informed

Psychological First Aid Model

A model that:

- Integrates public health, community health, and individual psychology
- Includes preparedness for communities, work places, healthcare systems, schools, faith communities, and families
- Does not rely on direct services by mental health professionals
- Uses skills you probably already have...

The International Federation of the Red Cross defines stress as "A very broad term referring to the effect of anything in life to which people must adjust."

- For instance, anything we consider challenging causes stress, even if it is something we willingly choose to do
- The key is that stress requires us to adjust our attention and behavior and makes demands upon our energy.

Psychosocial Stress Response



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Common Physical Reactions Adults

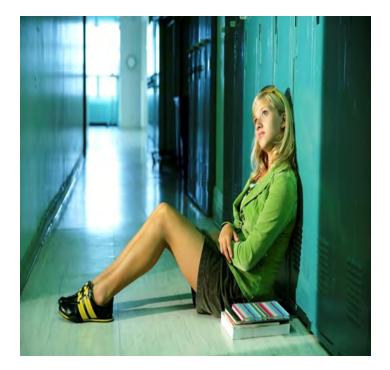
• Sleep difficulties

- Gastrointestinal problems (Diarrhea, cramps)
- Stomach upset, nausea
- Elevated heart rate, blood pressure and blood sugar
- With extended stress, suppression of immune system functioning



Common Physical Reactions Children / Youth

- Headaches
- Stomachaches
- Nausea
- Eating Problems
- Speech Difficulties
- Skin Eruptions



Common Emotional Reactions Adults

• Fear and Anxiety

- Sadness and Depression
- Anger and Irritability
- Numb, withdrawn, or disconnected
- Lack of involvement or enjoyment in favorite activities
- Sense of emptiness or hopelessness



Common Emotional Reactions Children / Youth

- Anxiety & Vulnerability
- Fear of reoccurrence
- Fear of being left alone
 - Particularly if separated from family
- Loss of "Sense of Safety"
- Depression
- Anger
- Guilt



Common Behavioral Reactions Adults

• Family difficulties

- Substance abuse
- Being overprotective of family
- Keeping excessively busy
- Isolating oneself from others
- Being very alert at times, startling easily
- Avoiding places, activities, or people that bring back memories



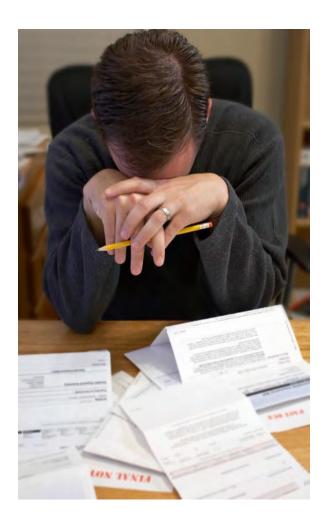
Common Behavioral Reactions Children / Youth

- Childish" or regressive behavior
 - May not be deliberate acting out
- Bedtime problems
 - Sleep onset insomnia
 - Mid-night awakening
 - Fear of dark
 - Fear of event reoccurrence during night



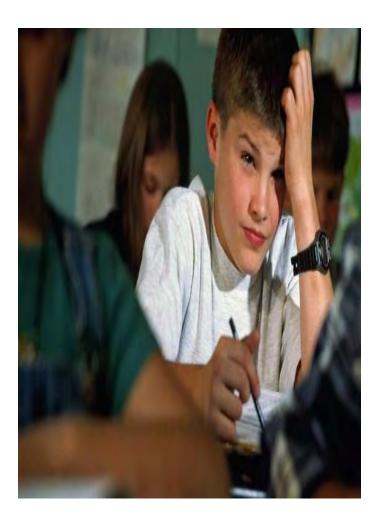
Common Cognitive Reactions Adults

- Difficulty concentrating
- Difficulty with memory
- Intrusive Memories
- Recurring dreams or nightmares
- Flashbacks
- Difficulty communicating
- Difficulty following complicated instructions



Common Cognitive Reactions Children / Youth

- Confusion, memory loss, and disorientation
- Difficulty in concentrating
 - May appear as behavioral problems in classroom
- School may be where child functions best
 - Continuing Structure, sense of control
 - Social group



Common Faith & Spiritual Reactions Adults & Children

• Reliance upon faith

- Questioning values and beliefs
- Loss of meaning
- Directing anger toward God
- Cynicism



Common Sensory Reactions Adults & Children

• Sight

- Sound
- Smell
- Taste
- Touch



An Event is More Stressful or Traumatic When ...

• Event is unexpected

- Many people die, especially children
- Event lasts a long time
- The cause is unknown
- The event is poignant or meaningful
- Event impacts a large area



What Assists our Emotional Re-Adjustment?

- Acceptance of the event and our losses.
- Identification, labeling, and expression of our emotions.
- Regaining a sense of mastery and control over our life.



MN PFA Card



PREVENTION STRATEGIES

- · Share your thoughts with someone you trust
- . Keep active with regular exercise
- Eat properly balanced diet—avoid food high in processed sugar
- Avoid tobacco, alcohol, and illegal drugs which mask stress
- . Look for humor in a situation wherever you can
- . Help others as one can; don't have an agenda
- Maintain a regular routine with uninterrupted sleep cycles
- Learn and use coping techniques including breathing and muscle relaxation
- · Look at life's daily challenges as opportunities

SELF CARE

- Check your readiness to respond before you go
- . Understand the nature of the request
- Give consideration to your physical and emotional health
- · Use the support resources during response
- Promote your own resiliency
- · Expect recovery period after an incident
- + Talk about your experiences

When in doubt CONSULT!! with supervisors or local resources

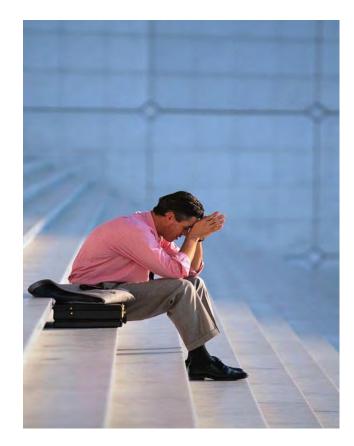
Promote Safety

- Remove from immediate danger area as soon as possible
- Meet basic survival needs



Calm & Comfort

- Most often, people just need someone to talk to about their experience
- Someone to care
- Someone to really listen
- Someone to lean on or cry with
- Someone to BE PRESENT TO THEM!



Active Listening

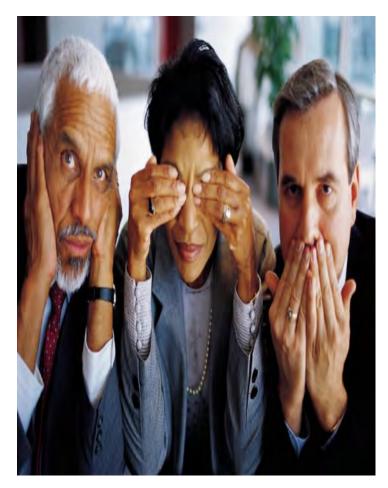
Make it clear that you are listening by displaying:

- Compassionate Presence
- Body Language
 - Eye contact
 - Facial expression
 - Tone of voice



Active Understanding

- Try not to interrupt until story ended
- Ask questions to clarify
- Establish sequence of events
- Avoid "Why?" and "Why not?" Don't judge
- Avoid evaluation of their experience and their reactions
- Silence is O.K.



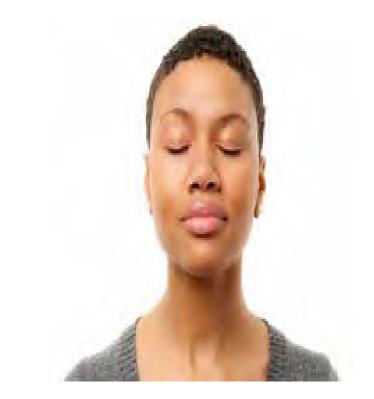
Agitation

- Sometimes, despite our best attempts, some people may become agitated
- Refusal to follow directions
- Loss of control, becoming verbally agitated
- Becoming threatening
- It is usually not personal
- This is their reaction to an UNCOMMON situation, and it has nothing to do with you



Be Kind, Calm, and Compassionate

- Express patience and compassion, even if people are being difficult.
- Speak in a calm voice.
- Remain courteous and respectful of people – even if the other person does not!



Psychological First Aid Don'ts

- Avoid asking for in-depth description of traumatic experiences.
- Follow the lead of the individual in discussing what happened during the event.
- Individuals should not be pressed to disclose details of any trauma or loss.



It is Not OK to suggest that...

• Let's talk about something else

- You should work toward getting over this
- You are strong enough to deal with this
- I know how you feel
- You'll feel better soon
- You did everything you could
- You are lucky to be alive
- You need to relax
- It's good that you are alive



It is OK to...

- Recommend substitute solutions that are:
 - more useful
 - less burdensome or
 - less likely to backfire
- If you don't know an answer, say "I don't know but I might be able to help you find out."
- Or, "I'm not sure what to do, but I will be happy to help you find someone who does."



Provide Information on Coping

- Provide basic information about common stress reactions
- Provide basic information on ways of coping
 - First Aid Card
- Teach simple relaxation techniques
 - Deep Breathing
 - Muscle relaxation



Maladaptive Coping Strategies

- Excessive withdrawal, retreat, avoidance
- High use of fantasy; poor reality testing
- Impulsive behavior
- Venting on weaker individuals
- Over-dependent behavior
- Lack of empathy for others



Positive Coping Strategies

• Actively seeking assistance

- Reacting constructively to environmental challenges and recognizing potential for growth
- Use of non-destructive defenses such as humor, exercise, good eating habits, time management, relaxation exercises



Connectedness

- Help connect with friends & loved ones
- Help connect with pets
- Connect with disaster resources and support services
- Connect with community resources and support services



Look for...

- Unresponsiveness to verbal questions or commands
- Glassy eyed and vacant stare – unable to find direction
- Disorientation (aimless disorganized behavior)
- Strong emotional responses
 - uncontrollable crying, hyperventilating, rocking



Alarm Bells/When to Refer

• Harm to self

• Saying they want to:

"End it all"

"Go to sleep and never wake up again"

- Preoccupation with death
- Giving away possessions
- Excessive use of substances
 - Driving under influence
 - In some cases working under influence



Alarm Bells/When to Refer

• Harm to others

- Child abuse
- Spouse abuse
- Loss of control
- Significant withdrawal (as change in behavior)
- Unable to care for self (cannot eat, bathe etc. -Vulnerable)



Self Empowerment

- Provide disaster and responder reintegration information
- Engage towards meeting own needs-practical problem solving
- Work to "normal life" activities
- Promote Resilience
 - Everyone who experiences a traumatic event is touched by it
 - We have the ability to "bounce forward" to a "New Normal"



Develop a Personal Resiliency Plan

- Focus beyond the short term
 DO IT NOW!
- Get to understand what triggers stress for you
- Know your personal unique stressors and Red Flags for further assistance
- Select from your own menu of positive coping responses
- Practice stress reduction and self care daily



MN PFA User Resources

- Minnesota Department of Health, Behavioral Health Web page <u>http://www.health.state.mn.us/oep/responsesystems/behavioral.html</u>
- Just-in-Time PFA Training video
 - 11 minute video based on the MDH PFA First Aid Card https://www.youtube.com/watch?v=sa7WiL1xwQg
- University of Minnesota PFA Phone Apps

http://www.sph.umn.edu/academics/ce/tools/

- Psychological First Aid
- Responder Self-Care

Psychological First Aid Online Training

- Free 45 minute 6 module course
- Includes a pre & post test and module quizzes
- Walks you through the development of your own self-care plan
- Printable Handouts, PFA card, & certificate
- .75 CEUs from the University of MN

ONLINE

For More Information

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MDH Behavioral Health Web Sites:

www.health.state.mn.us/oep/planning/mhimpact.html