

# Psychological First Aid



*Presented by*

**New Jersey Department of Human Services  
Division of Mental Health and Addiction Services  
Disaster & Terrorism Branch**

**NCTSN**



# Logistics and Housekeeping

- Course lunch and break times
- Location of restrooms
- Emergency exits (if appropriate)
- Cell phone etiquette
- Registration/sign-in sheet

# Learning Objectives

- At the end of this course, participants will be able to:
  - Identify the basic objectives and intervention strategies of Psychological First Aid.
  - Gain skills needed to implement the intervention strategies of Psychological First Aid.
  - Appreciate the importance of providing Psychological First Aid in the aftermath of disaster.
  - Identify ways to enhance provider care before, during, and after disaster care.

# Course Agenda

- Welcome and Introductions
- PFA Background and Guidelines for Delivery
- Core Action #1: Contact and Engagement
- Core Action #2: Safety and Comfort
- Core Action #3: Stabilization
- Core Action #4: Information Gathering
- Core Action #5: Practical Assistance
- Core Action #6: Connection and Social Supports
- Core Action #7: Information and Coping
- Core Action #8: Linkage with Collaborative Services
- Handouts and Provider Care
- Wrap Up

# Psychological First Aid Developed By:

- National Child Traumatic Stress Network
  - [www.NCTSN.org](http://www.NCTSN.org)
- National Center for Posttraumatic Stress Disorder
  - [www.ncptsd.va.gov](http://www.ncptsd.va.gov)

# Acknowledgements

- Substance Abuse Mental Health Services Administration (SAMHSA)
- National Association of County and City Health Officials (NACCHO)

# How Do We Know How to Respond Following Disasters?

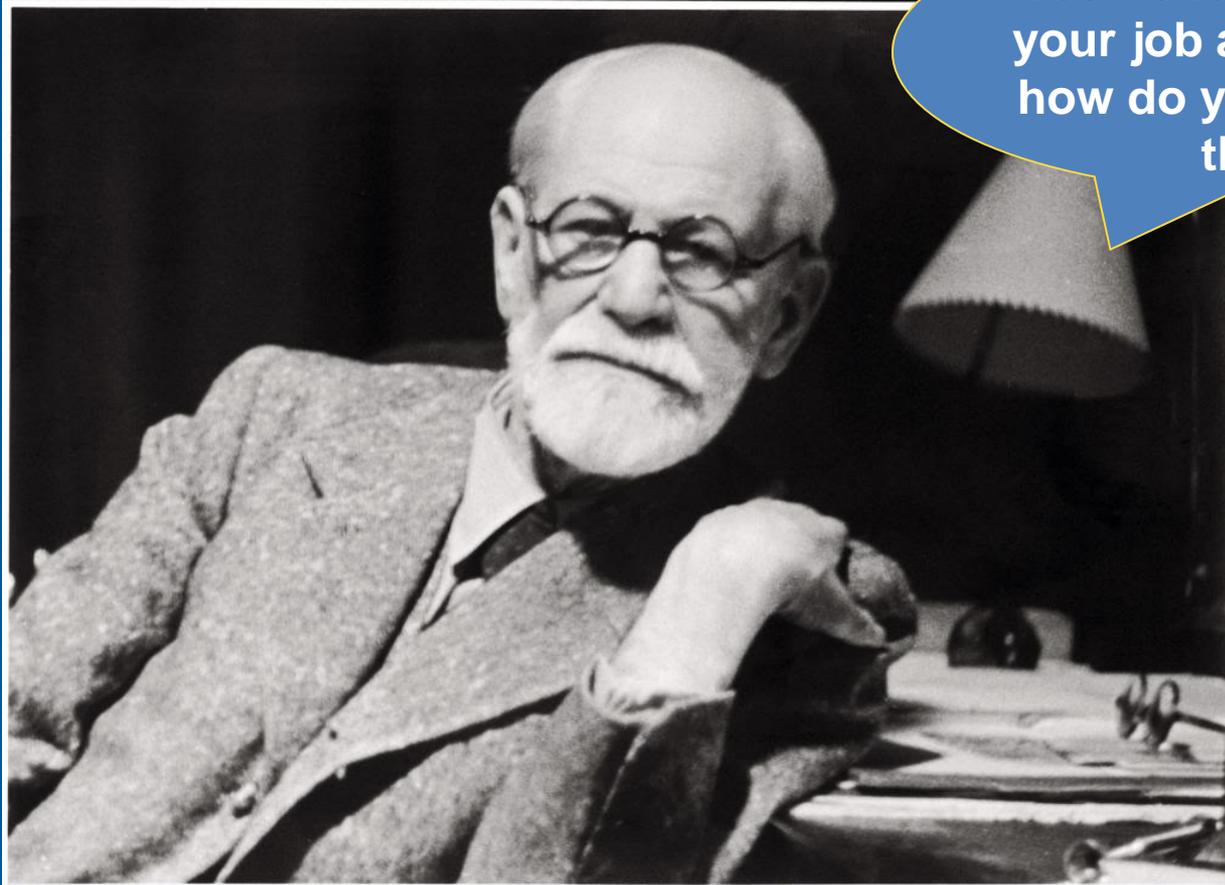


# Five Empirically-Supported Early Intervention Principles



# Psychological First Aid Core Actions

1	Contact and Engagement
2	Safety and Comfort
3	Stabilization
4	Information Gathering
5	Practical Assistance
6	Connection with Social Supports
7	Information on Coping
8	Linkage with Collaborative Services



“You’ve lost your home,  
your job and your pet—  
how do you *feel* about  
that?”

Sigmund Freud

# What is Psychological First Aid?

- PFA is:

**An evidence-informed modular approach to assist children, adolescents, adults, and families in the immediate aftermath of disaster and terrorism.**

# What are PFA's Principle Actions?

- PFA's principle actions are to:
  - Establish safety and security
  - Connect to restorative resources
  - Reduce stress-related reactions
  - Foster adaptive short- and long-term coping
  - Enhance natural resilience (rather than preventing long-term pathology)

# Who Is It For?

- PFA is for individuals:
  - Experiencing acute stress reactions
  - Who appear to be at risk for significant impairment in functioning

# Who Delivers PFA?

- PFA is delivered by disaster response workers who provide early assistance, including:
  - First responders
  - Mental health professionals
  - School personnel
  - Religious professionals
  - Disaster volunteers
  - Health and public health officials

# When is PFA Intended to be Delivered?

- PFA is intended to be delivered in the immediate aftermath of a disaster

West, Texas: A community in crisis following a large explosion at a fertilizer plant on April 18, 2013



# Where Can PFA be Delivered?

- PFA can be delivered in a broad range of emergency settings, such as:
  - General population shelters
  - Schools
  - Special needs shelters
  - Hospitals or medical triage areas
  - Family assistance centers
  - Public health emergency settings



# Strengths of Psychological First Aid

- PFA is a comprehensive intervention model that:
  - Uses evidence-informed strategies
  - Involves a modular approach
  - Includes basic information-gathering techniques
  - Offers concrete examples
  - Incorporates a developmental framework
  - Attends to cultural factors
  - Includes user-friendly handouts

# Requirements for PFA Providers

- PFA providers must have the:
  - Ability to work in chaotic and unpredictable environments
  - Capacity for rapid assessment of survivors
  - Ability to provide services tailored to timing of intervention, context, and culture
  - Ability to tolerate intense distress and reactions

# Requirements for PFA Providers (cont.)

- PFA providers must be able to:
  - Accept tasks that are not initially viewed as mental health activities
  - Work with diverse cultures, ethnic groups, developmental levels, and faith backgrounds
  - Have the capacity for self-care

## Activity:

Blue cards – write the name of a person close to you on each card

Green cards – write down one of your favorite belongings

White – write down something you enjoy, an activity, or hobby.

After you have written on each card, place them face down on the table and shuffle them around. Close your eyes and pick three cards. These are the three things you will have lost in a disaster.

Discuss with the group how you feel about losing these things or people.

## Activity:

What main attributes and skills should a Disaster Response Crisis Counselor have when offering psychological support.?

# Delivering PFA

- When delivering PFA:
  - Observe first
  - Ask simple respectful questions
  - Speak calmly and slowly without jargon
  - Be patient, responsive, and sensitive
  - Acknowledge the survivor's strength

# Some Behaviors to Avoid

- When delivering PFA avoid:
  - Making assumptions about experiences
  - Assuming everyone will be traumatized
  - Labeling reactions as “symptoms,” or speaking in terms of “diagnoses”
  - Talking down to or patronizing the survivor

# Psychological First Aid Core Actions

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# Core Action #1: Contact and Engagement

- Establish a connection with survivors in a non-intrusive and compassionate manner:
  - Introduce yourself and describe your role
  - Ask for permission to talk
  - Explain objectives
  - Ask about immediate needs



## Discussion Questions

- I am a female survivor sobbing by myself. You heard from another relief worker that I was just notified that my husband died in a fire.
- When you approach me, I have difficulty speaking because I can't stop crying.
  - To initiate contact, what do you say?
  - Do you give me a hug?



## Personal Contact

- Personal contact varies from person to person and across social groups
- If you are not familiar with the culture of the survivor, **do not:**
  - Approach too closely
  - Make prolonged eye contact
  - Touch

## Personal Contact (cont.)

- Get guidance about cultural norms
- Seek cues from the survivor regarding “personal space”
- When working with families, identify the family spokesperson

# Role Play

## Personal Space

# The PFA Skills Toolbox



# Slowing It Down

Apply the STOP approach:

- **S**it
- **T**hink
- **O**bserve
- **P**lan



# Interpersonal Communication Skills

- Non-verbal communication
- Listening and responding
- Giving feedback

# Projecting Warmth

- Soft tone
- Smile
- Interested facial expression
- Open/welcoming gestures
- Allow the person you are talking with to dictate the spatial distance between you (This can vary according to cultural or personal differences)

## Activity: Projecting Warmth

Pick a partner. Turn to your partner and say:

"My garbage pick up is on Tuesdays".

While saying this, practice looking warm, give feedback to each other (from the above list) as to what they could do to make this interaction seem warmer

# Increasing Trust and Confidence

- General behaviors (depending on culture) to increase trust and confidence:
  - Face the speaker
  - Display an open posture
  - Keep an appropriate distance
  - Frequent and soft eye contact
  - Appear calm and relaxed

# Communicating Warmth

- **SOLER**
  - **S** it squarely
  - **O** pen Posture
  - **L** ean Forward
  - **E** ye Contact
  - **R** elax

# Communication and Empathy (and Safety!)

- L-Shaped Stance:
  - Demonstrates respect
  - Decreases confrontation

# Listening and Responding

- Seek to understand first, then to be understood
- Concentrate on what is being said
- Be an active listener (nod, affirm)
- Be aware of your own biases/values
- Listen and look for feelings
- Do not rehearse your answers

# Listening and Responding (continued)

- Pause to think before answering
- Do not judge
- Use clarifying questions and statements
- Avoid expressions of approval or disapproval
- Do not insist on the last word
- Ask for additional details

# Benefits of Active Listening

- Shows empathy
- Builds relationships
- Helps people acknowledge their emotions and to talk about them instead of negatively acting on them
- Clears up misunderstandings between people

# Guidelines for Responding

- Give subtle signals that you are listening
- Ask questions sparingly
- Never appear to interview the person
- Address the content (especially feelings) of what you hear without judging
- Focus on responding to what the person is really saying or asking

# Non-Verbal Communication

- Non-verbal can include:
  - Personal Space
  - Posture
  - Body language
- Para-verbal communications refers to :
  - Voice Tone
  - Volume
  - Rate of speech.

Para-verbal communication is *how* we say something, not *what* we say

# Congruence

- Matching words and actions
  - Denotes trustworthiness
  - Shows others that we care
  - Shows we are in control
- Incongruence
  - Interpreted as being untrustworthy or inauthentic

## Seek Assistance

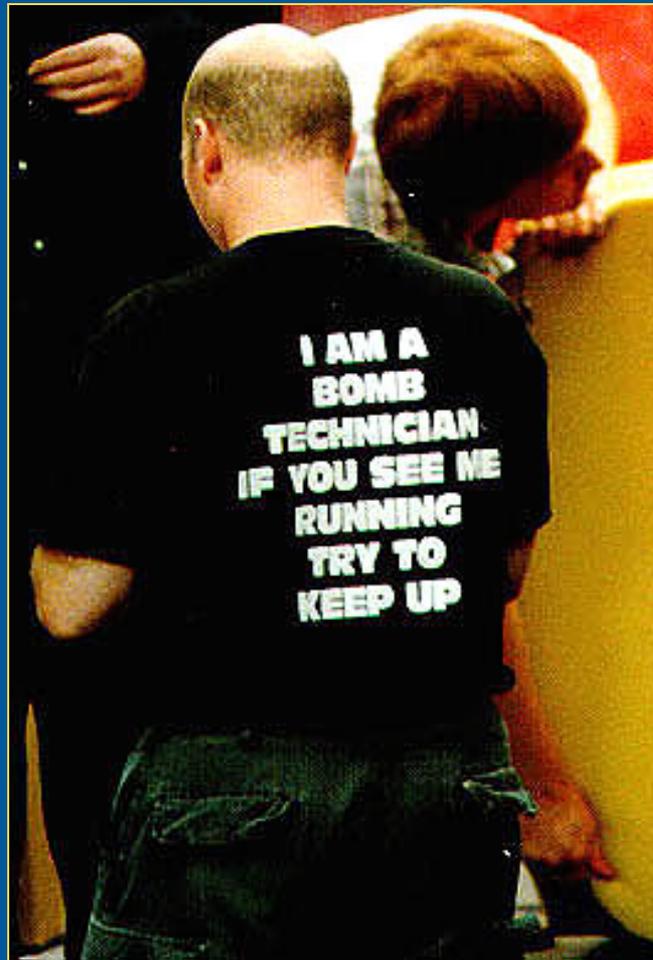
- Loss of Control, Becoming Verbally Threatening
- If the person becomes threatening or intimidating and does not respond to your attempts to calm them, seek immediate assistance

## Personal Safety in PFA

- Observe safe practices by showing concern for your own safety
- Remain calm and appear relaxed, confident and non-threatening
- Three rules for personal safety:
  - Never sacrifice safety for rapport;
  - Leaving one minute too soon, always better than one minute too late;
  - If you have to run, don't run from danger, run toward safety!



# Safety Check



What were those three rules again?

# Psychological First Aid Core Actions

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2	<b>Safety and Comfort</b>
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## Core Action #2: Safety and Comfort

- The goal is to enhance immediate and ongoing safety and provide physical and emotional comfort



# Safety and Comfort

- Ensure immediate physical safety
- Provide information about disaster response activities and/or services
- Offer physical comforts
- Offer social comforts and link to other survivors
- Protect from additional trauma and potential trauma reminders
- Discuss media viewing

## Group Activity #1

- You are working in a shelter opened by a local church after a wildfire threatens homes in a nearby county.
  - You hear mixed reports on the status of the fire
  - People are anxious
  - 500 people are currently in the shelter
  - Up to 300 more are expected
- What five initial steps do you take to provide Psychological First Aid?

# Suggested Responses

- Information
- Safety
- Basic needs
- Recruit volunteers
- Identify persons who are emotionally overwhelmed

## Discussion Question

- I am a 7-year-old boy who was brought to you by another survivor who stated that he found me about one mile away on the street by myself.
- I am not very verbal and can only say that my name is “Andy.”

What are the three actions you would want to take?

## Unaccompanied Children

- Ask basic information
- Notify appropriate authorities immediately
- Provide the child with accurate information in simple terms about:
  - Who will be supervising him
  - What he can expect
- Make sure there is a continual plan of care

## Acutely Bereaved Individuals

- Listen carefully with sympathy
- Be informed about cultural norms
- Know that grief reactions vary from person to person
- Help family members to respect differences in grieving

## Acutely Bereaved Individuals: Things to Say

- Tell them what they are experiencing is understandable and expectable
- It is okay to use the deceased person's name
- Inform them that they will most likely continue to experience periods of sadness, loneliness, or anger

# Acutely Bereaved Individuals: Things NOT to Say

- “I know how you feel.”
- “It’s good he passed away quickly.”
- “It was his time to go.”
- “Let’s talk about something else.”
- “It’s good that you are alive.”

# Video: Acute Grief

## Video Key Points

- Identifies needs
- Provides validation, support, and normalization
- Provides education about acute grief
- Provides guidance on family pressure
- Adjusts guidance to fit the context
- Provides follow-up and referral information

## Identifies Needs

- How did the counselor determine Eric's needs at this point?
  - how she The counselor may only have this opportunity to speak with Eric. So, after giving Eric a few moments to share how he is feeling, the counselor tries to focus the conversation quickly to assess can be of assistance.

## Provides Validation, Support, and Normalization

- How does the counselor perceive Eric to be feeling?
- What does the counselor do to provide validation, support, and normalization?
  - The counselor perceives Eric to be feeling overwhelmed, exhausted, and in shock.
  - She provides support by telling him that the way he is feeling is to be expected in these circumstances.

## Provides Education about Acute Grief

- What does the counselor say to Eric about acute grief?
  - The counselor provides basic psychoeducation about early grief reactions, informing Eric that it is common to feel numb just after experiencing a traumatic death.

## Provides Guidance on Family Pressure

- What guidance does the counselor give to Eric in regards to his family pressuring him to open up?
  - The counselor helps Eric to identify ways he could explain his reactions to his family, in simple terms, so that they will stop pressuring him to open up to them.

## Adjusts Guidance to Fit the Context

- What does the counselor do to help Eric not feel overloaded?
  - The counselor is careful not to overload Eric with too much information at a time when he is already feeling overwhelmed. She sticks with current concerns, assures him that he can reconnect with her, and reminds him of her hours at the shelter.

## Provides Follow-up and Referral Information

- What does the counselor do to provide Eric with follow-up and referral information?
  - The counselor refers Eric to the toll-free number and website address.
    - Eric may be feeling too overwhelmed to seek counseling in the short-term.
    - Making a positive connection with the counselor may open the door for him to get help in the future.

## Grief and Spiritual Issues

- Ask survivors if they have religious/spiritual needs
- Refer them to a clergy member of their choice
- Do not judge, contradict, or correct what they say about their religious beliefs
- If survivors want to pray, help them find a suitable place

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## Core Action #3: Stabilization

- The goal is to calm and orient emotionally-overwhelmed and distraught survivors



# Signs a Person May Need Stabilization

- Glassy eyed and vacant
- Unresponsive
- Disoriented
- Exhibiting strong emotional responses
- Uncontrollable physical reactions
- Frantic searching behavior

## Steps toward Stabilization

- Respect the survivor's privacy
- Give him/her a few minutes without active attempts to intervene
- Remain calm, quiet, and present
- Tell him/her that you will be available if he/she needs you or that you will check back with him/her in a few minutes

## Steps toward Stabilization (cont.)

- Offer support and help him/her focus on specific manageable feelings, thoughts, and goals
- Enlist support from family/friends
- Speak directly to his/her immediate concern or difficulty
- Give information that orients him/her to the surroundings

# Grounding

- Ask the person to:
  - Listen to and look at you
  - Orient him/herself to the surroundings
  - Talk about the aspect of the situation that is under control, hopeful, or positive
  - Breathe in and out slowly and deeply
  - Name five **non-distressing** things he/she can see, hear, and feel

## Grounding (cont.)

- Younger children may find it easier to identify colors that they see around them
- Get a medical consult when the situation is secure

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## Core Action #4: Information Gathering

- The goal is to identify immediate needs and concerns, gather additional information, and tailor PFA interventions.
- It is used to determine:
  - Need for immediate referral
  - Need for any additional available ancillary services
  - Which components of PFA may be helpful

## Example of Content Areas

- Nature and severity of experiences
- Death of a loved one
- Concerns about the post-disaster circumstances and threat
- Separation from or concerns about the safety of loved ones
- Physical illness, mental health conditions, and need for medications
- Losses incurred as a result of the disaster

# Clarifying Disaster-Related Experiences

- Avoid asking for in-depth description of traumatic experiences
- Follow the lead of the survivor in discussing the event
- Individuals should **not** be pressed to disclose details of any trauma or loss

# Clarifying Disaster-Related Experiences (cont.)

- If survivors are anxious to talk about their experiences, tell them:
  - For now, the basic information to help with current needs is the most helpful
  - That they can discuss their experiences in a proper professional setting in the future

## Group Activity #2

- You are working in a hospital.
- A passenger train crashed into another train that was carrying unknown chemicals.
- The hospital staff are overwhelmed with injured patients, and you have been asked to assist individuals who are concerned about exposure, those with minor injuries who are distressed, and family members.

## Group Activity (cont.)

- What information do you need to begin your work?
- What are the five actions you would take in conducting PFA?

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## Core Action #5: Practical Assistance

- Offer practical help to survivors in addressing immediate needs and concerns:
  - Identify the most immediate need
  - Clarify the need
  - Discuss an action response
  - Act to address the need

## Discussion

- You are working in a family support center at the airport.
- There has been a fatal plane crash.
- Family members of the deceased are just arriving.

What are five types of practical assistance you are able to offer?

# Setting Achievable Goals

- Set achievable goals to:
  - Reverse feelings of failure and inability to cope
  - Help individuals to have repeated experiences of success and efficacy
  - Help to reestablish a sense of control over one's environment

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# Core Action #6: Connection with Social Support

- The goal is to help establish brief or ongoing contacts with primary support persons, such as family members and friends, and to seek out other sources of support



## Connection with Social Support (cont.)

- Enhance access to primary support persons (family and significant others).
- Encourage use of immediately available support persons.
- Discuss ways to seek and give support:
  - Identify possible support persons
  - Discuss what to do/talk about
  - Explore reluctance to seek support
- Address extreme social isolation or withdrawal.

## Role Play

- You are speaking to an 84-year-old woman. She reports moving to your town from New Orleans after surviving Hurricane Katrina, which destroyed her home. Now a tornado has taken her apartment.
- She feels that connecting with others is just not worth it as she will just lose contact with them again.
- She is tired from all the moves.
- She also feels that talking with others will only burden them.

How will you assist her?

## Those Who are Withdrawn or Isolated

- Think about the type of support that is most helpful
- Think about the people the survivor can approach
- Decide who might be a good role model or mentor
- Decide ahead of time what the survivor would like to discuss or do
- Choose the right time and place to approach someone for support

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# Core Action #7: Information on Coping

- Provide information about stress reactions and coping to reduce distress and promote adaptive functioning:
  - Explain what is currently known about the event
  - Inform survivors of available resources
  - Identify the post-disaster reactions and how to manage them
  - Promote and support self-care and family care practices

# Stress Reactions and Coping

- Provide simple information about stress reactions and coping:
  - Build discussion around their individual reactions
  - Include possible negative and positive reactions
  - Avoid pathologizing responses
  - Discuss negative and positive coping actions

## Negative Coping

- These forms of coping may have unintended negative outcomes:
  - Social isolation or withdrawal
  - Extreme avoidance of thinking or talking about the event
  - “Workaholism”
  - Anger or violence
  - Frequent use of alcohol or drugs

## Positive Coping

- These adaptive coping actions lead to positive outcomes:
  - Social support
  - Positive distracting activities
  - Setting and achieving goals
  - Changing expectations / priorities
  - Breathing / relaxation / rest
  - Exercise
  - Counseling

## Duration of Reactions

- How long the reactions last will depend on (among other things):
  - The severity of trauma exposure and loss
  - The severity of post-trauma adversities
  - How often they are experiencing reminders

## Helping with Reminders

- Discuss the potential impact of trauma, loss, and change reminders
- Identify current and potential reminders
- Identify ways of coping with reminders

## Definitions

- Trauma reminders:
  - Can evoke upsetting thoughts and feelings about what happened
- Loss reminders:
  - Bring to mind the absence of a loved one
- Change reminders:
  - Things that remind a survivor how life has changed as a result of the disaster

## Key Points

- Definition of a trauma reminder
- Coping with trauma reminders
- Family coping

## Developmental Issues

- The many stresses and adversities in the aftermath of a disaster may result in key interruptions, delays, or reversals in developmental progression
- The loss of developmental opportunities or achievements can be experienced as a major consequence resulting from the disaster

## Helping with Developmental Issues

- Ask if there are any special events, goals, or things that the family was looking forward to, such as starting school, celebrating marriage, or birthday
- Increase awareness of each family member of the impact of the interruption or loss

## Discussion

- You are working in a shelter and see a couple arguing. The male is getting louder and louder and thrusts his fist in the air. Survivors nearby are starting to get anxious and ask the man to stop shouting. In response, he starts yelling at them.

What do you do?

# Anger Management Skills

- Survivors can modify their anger by:
  - Taking a “time out” or “cool down”
  - Talking to a friend about what is angering them
  - Blowing off steam through physical exercise (e.g., go for a walk, jog, do push-ups)
  - Keeping a journal in which they describe how they feel

## Anger Management Skills (cont.)

- Remind survivors that being angry will not help them achieve what they want and may harm important relationships
- Encourage survivors to distract themselves with positive activities
- Encourage survivors to have another adult temporarily supervise their children

## Addressing Highly Negative Emotions

- Help to clarify misunderstandings, rumors, and distortions
- Help survivors understand how thoughts influence emotions
- Identify and offer other ways of looking at the situations that are less upsetting

# Coping with Sleep Problems

- Encourage survivors to:
  - Keep regular sleep routines
  - Reduce alcohol consumption
  - Eliminate caffeinated beverages in the PM
  - Increase regular exercise
  - Relax before bedtime
  - Limit naps to 15 minutes, prior to 4 PM
  - Get support for immediate concerns

## Alcohol and Substance Abuse

- Explain that many survivors choose to drink, use medications, or drugs to reduce their bad feelings
- Ask the survivor to identify what he/she see as the “pro’s and con’s” of using alcohol or drugs to cope
- Mutually agree on abstinence or a safe pattern of use

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# Core Action #8: Linkage with Collaborative Services

- The goal is to link survivors with available services needed immediately or in the future



## Agencies Providing Services

- Reconnect survivors to agencies that provided them services before the disaster:
  - Mental health services
  - Medical services
  - Spiritual support
  - Alternative healers
  - Child welfare services
  - Schools
  - Drug and alcohol support groups

## If Referral to Mental Health Care is Refused

- Suggest an evaluation, rather than treatment
- Normalize the idea of treatment
- Give educational materials
- Give information about different ways to seek assistance
- Consider involving the person's spouse or partner in the discussion
- Follow-up on the issue

# Psychological First Aid Handouts

- Connecting with Others (Seeking and Giving Support)
- When Terrible Things Happen
- Parent Tips for Helping Infants and Toddlers
- Parent Tips for Helping Preschool-Age Children

# Psychological First Aid Handouts (cont.)

- Parent Tips for Helping School-Age Children
- Parent Tips for Helping Adolescents
- Tips for Adults
- Tips for Relaxation
- Alcohol and Drug Use after Disasters

# Role Play:

Scenario: A major earthquake occurred early this morning. The epicenter was close enough to sustain damage in your area. Electricity for much of the area is out, there has been damage to bridges, buildings have been evacuated and many roads are blocked. There are small fires on some streets.

A staging area for people needing help has been set up at a safe location and Disaster Response Crisis Counselors have been asked to go to this location and support people who have been sent there.

# Provider Care



# Activity: Recharging Your Batteries

Write down five things that help you relieve stress and feel calmer

# Provider Care: Management

- Mandated rotation where workers are moved from the most highly exposed assignments to varied levels of exposure.
- Enforced support by providing/encouraging:
  - Regular supervision
  - Regular case conferences
  - Peer partners and peer consultation

# Provider Care: Management (cont.)

- Monitor providers who meet certain high risk criteria
- Conduct trainings on stress management practices

# Provider Care: Personal

- Limit daily numbers of most severe cases
- Utilize the buddy system to share distressing emotional responses
- Use benefit time, vacation, personal time
- Access supervision routinely
- Practice stress management during the workday
- Stay aware of limitations and needs

# Provider Care: Personal (cont.)

- Providers should make every effort to avoid:
  - Working too long by themselves without checking in
  - Working “around the clock” with few breaks
  - Feeling like they are not doing enough
  - Excessive intake of sweets and caffeine

# Provider Care: Personal (cont.)

- Common attitudinal obstacles to self-care:
  - “It would be selfish to take time to rest.”
  - “Others are working around the clock, so should I.”
  - “The needs of survivors are more important than the needs of helpers.”
  - “I can contribute the most by working all the time.”
  - “Only I can do x, y, and z.”

# Provider Care: Following Disaster Response

- Expect a readjustment period upon returning home
- Discuss the situation with coworkers and management
- Participate in formal help if extreme stress persists
- Ask help in parenting, if you feel irritable or have difficulties adjusting

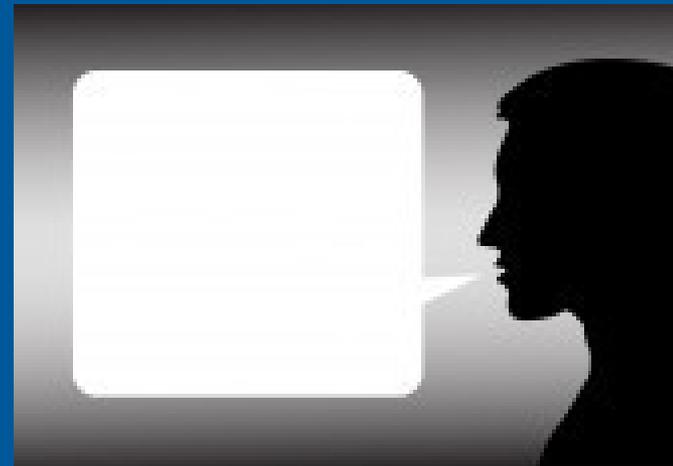
# Provider Care: Following Disaster Response (cont.)

- Prepare for worldview changes that may not be mirrored by others in your life
- Increase experiences that have spiritual or philosophical meaning to you

# Take Home Messages

- Utilize a flexible, pragmatic, approach, specific to the need, context, and phase of recovery
- Refer to the Field Operations Guide for detailed information and handouts
- Take care of yourself and your colleagues
- Document progress to move the field forward

# Wrap Up



Don't forget to sign out.

# Appendix E: Handouts

## CONNECTING WITH OTHERS

### SEEKING SOCIAL SUPPORT

- Making contact with others can help reduce feelings of distress
- Children and adolescents can benefit from spending some time with other similar-age peers
- Connections can be with family, friends, or others who are coping with the same traumatic event

#### Social Support Options

- Spouse or partner
- Trusted family member
- Close friend
- Priest, Rabbi, or other clergy
- Doctor or nurse
- Crisis counselor or other counselor
- Support group
- Co-worker
- Pet

#### Do . . .

- Decide carefully whom to talk to
- Decide ahead of time what you want to discuss
- Choose the right time and place
- Start by talking about practical things
- Let others know you need to talk or just to be with them
- Talk about painful thoughts and feelings when you're ready
- Ask others if it's a good time to talk
- Tell others you appreciate them listening
- Tell others what you need or how they could help—one main thing that would help you right now

#### Don't . . .

- Keep quiet because you don't want to upset others
- Keep quiet because you're worried about being a burden
- Assume that others don't want to listen
- Wait until you're so stressed or exhausted that you can't fully benefit from help

#### Ways to Get Connected

- Calling friends or family on the phone
- Increasing contact with existing acquaintances and friends
- Renewing or beginning involvement in church, synagogue, or other religious group activities
- Getting involved with a support group
- Getting involved in community recovery activities

# Appendix E: Handouts

## CONNECTING WITH OTHERS

### GIVING SOCIAL SUPPORT

You can help family members and friends cope with the disaster by spending time with them and listening carefully. Most people recover better when they feel connected to others who care about them. Some people choose not to talk about their experiences very much, and others may need to discuss their experiences. For some, talking about things that happened because of the disaster can help them seem less overwhelming. For others, just spending time with people one feels close to and accepted by, without having to talk, can feel best. Here is some information about giving social support to other people.

#### Reasons Why People May Avoid Social Support

- Not knowing what they need
- Feeling embarrassed or “weak”
- Feeling they will lose control
- Not wanting to burden others
- Doubting it will be helpful, or that others won’t understand
- Having tried to get help and felt that it wasn’t there before
- Wanting to avoid thinking or feeling about the event
- Feeling that others will be disappointed or judgmental
- Not knowing where to get help

#### Good Things to Do When Giving Support

- Show interest, attention, and care
- Find an uninterrupted time and place to talk
- Be free of expectations or judgments
- Show respect for individuals’ reactions and ways of coping
- Acknowledge that this type of stress can take time to resolve
- Help brainstorm positive ways to deal with their reactions
- Talk about expectable reactions to disasters, and healthy coping
- Believe that the person is capable of recovery
- Offer to talk or spend time together as many times as is needed

#### Things That Interfere with Giving Support

- Rushing to tell someone that he/she will be okay or that they should just “get over it”
- Discussing your own personal experiences without listening to the other person’s story
- Stopping the person from talking about what is bothering them
- Acting like someone is weak or exaggerating because he or she isn’t coping as well as you are
- Giving advice without listening to the person’s concerns or asking the person what works for him or her
- Telling them they were lucky it wasn’t worse

#### When Your Support is Not Enough

- Let the person know that experts think that avoidance and withdrawal are likely to increase distress, and social support helps recovery
- Encourage the person to get involved in a support group with others who have similar experiences
- Encourage the person to talk with a counselor, clergy, or medical professional, and offer to accompany them
- Enlist help from others in your social circle so that you all take part in supporting the person

# Appendix E: Handouts

## WHEN TERRIBLE THINGS HAPPEN WHAT YOU MAY EXPERIENCE

### Immediate Reactions

There are a wide variety of positive and negative reactions that survivors can experience during and immediately after a disaster. These include:

Domain	Negative Responses	Positive Responses
Cognitive	Confusion, disorientation, worry, intrusive thoughts and images, self-blame	Determination and resolve, sharper perception, courage, optimism, faith
Emotional	Shock, sorrow, grief, sadness, fear, anger, numb, irritability, guilt and shame	Feeling involved, challenged, mobilized
Social	Extreme withdrawal, interpersonal conflict	Social connectedness, altruistic helping behaviors
Physiological	Fatigue, headache, muscle tension, stomachache, increased heart rate, exaggerated startle response, difficulties sleeping	Alertness, readiness to respond, increased energy

### Common negative reactions that may continue include:

#### Intrusive reactions

- Distressing thoughts or images of the event while awake or dreaming
- Upsetting emotional or physical reactions to reminders of the experience
- Feeling like the experience is happening all over again (“flashback”)

#### Avoidance and withdrawal reactions

- Avoid talking, thinking, and having feelings about the traumatic event
- Avoid reminders of the event (places and people connected to what happened)
- Restricted emotions; feeling numb
- Feelings of detachment and estrangement from others; social withdrawal
- Loss of interest in usually pleasurable activities

#### Physical arousal reactions

- Constantly being "on the lookout" for danger, startling easily, or being jumpy
- Irritability or outbursts of anger, feeling "on edge"
- Difficulty falling or staying asleep, problems concentrating or paying attention

#### Reactions to trauma and loss reminders

- Reactions to places, people, sights, sounds, smells, and feelings that are reminders of the disaster
- Reminders can bring on distressing mental images, thoughts, and emotional/physical reactions
- Common examples include: sudden loud noises, sirens, locations where the disaster occurred, seeing people with disabilities, funerals, anniversaries of the disaster, and television/radio news about the disaster

# Appendix E: Handouts

## Positive changes in priorities, worldview, and expectations

- Enhanced appreciation that family and friends are precious and important
- Meeting the challenge of addressing difficulties (by taking positive action steps, changing the focus of thoughts, using humor, acceptance)
- Shifting expectations about what to expect from day to day and about what is considered a “good day”
- Shifting priorities to focus more on quality time with family or friends
- Increased commitment to self, family, friends, and spiritual/religious faith

## When a Loved One Dies, Common Reactions Include:

- Feeling confused, numb, disbelief, bewildered, or lost
- Feeling angry at the person who died or at people considered responsible for the death
- Strong physical reactions such as nausea, fatigue, shakiness, and muscle weakness
- Feeling guilty for still being alive
- Intense emotions such as extreme sadness, anger, or fear
- Increased risk for physical illness and injury
- Decreased productivity or difficulties making decisions
- Having thoughts about the person who died, even when you don’t want to
- Longing, missing, and wanting to search for the person who died
- Children and adolescents are particularly likely to worry that they or a parent might die
- Children and adolescents may become anxious when separated from caregivers or other loved ones

## WHAT HELPS

Talking to another person for support or spending time with others	Focusing on something practical that you can do right now to manage the situation better
Engaging in positive distracting activities (sports, hobbies, reading)	Using relaxation methods (breathing exercises, meditation, calming self-talk, soothing music)
Getting adequate rest and eating healthy meals	Participating in a support group
Trying to maintain a normal schedule	Exercising in moderation
Scheduling pleasant activities	Keeping a journal
Taking breaks	Seeking counseling
Reminiscing about a loved one who has died	

## WHAT DOESN'T HELP

Using alcohol or drugs to cope	Working too much	Extreme avoidance of thinking or talking about the event or a death of a loved one
Extreme withdrawal from family or friends	Violence or conflict	Not taking care of yourself
Overeating or failing to eat	Doing risky things (driving recklessly, substance abuse, not taking adequate precautions)	Excessive TV or computer games
Withdrawing from pleasant activities	Blaming others	

# Appendix E: Handouts

Parent Tips for Helping Infants and Toddlers after Disasters		
IF YOUR CHILD. .	UNDERSTAND	WAYS TO HELP
. . has problems sleeping, doesn't want to go to bed, won't sleep alone, wakes up at night screaming.	<ul style="list-style-type: none"> <li>▶ When children are scared they want to be with people who help them feel safe, and they worry when you are not together. ▶ If you were separated during the disaster, going to bed alone may remind your child of that separation.</li> <li>▶ Bedtime is a time for remembering because we are not busy doing other things. People often dream about things they fear and can be scared of going to sleep.</li> </ul>	<ul style="list-style-type: none"> <li>▶ If you want, let your child sleep with you. Let him know this is just for now. ▶ Have a bedtime routine: a story, a prayer, cuddle time. Tell him the routine (every day), so he knows what to expect. ▶ Hold him and tell him that he is safe; that you are there and will not leave. Understand that he is not being difficult on purpose. This may take time, but when he <u>feels</u> safer, he will sleep better.</li> </ul>
. . worries something bad will happen to you. (You may also have worries like this.)	<ul style="list-style-type: none"> <li>▶ It is natural to have fears like this after being in danger.</li> <li>▶ These fears may be even stronger if your child was separated from loved ones during the disaster.</li> </ul>	<ul style="list-style-type: none"> <li>▶ Remind your child and yourself that right now you are safe. ▶ If you are not safe, talk about how you are working to keep her safe. ▶ Make a plan for who would care for your child if something did happen to you. This may help you worry less. ▶ Do positive things together to help her think about other things.</li> </ul>
. . cries or complains whenever you leave him, even when you go to the bathroom.  . . can't stand to be away from you.	<ul style="list-style-type: none"> <li>▶ Children who cannot yet speak or say how they feel may show their fear by clinging or crying. ▶ Goodbyes may remind your child of any separation you had related to the disaster. ▶ Children's bodies react to separations (stomach sinks, heart beats faster). Something inside says, "Oh no, I can't lose her." ▶ Your child is not trying to manipulate or control you. He is scared. ▶ He may also get scared when other people (not just you) leave. Goodbyes make him scared.</li> </ul>	<ul style="list-style-type: none"> <li>▶ Try to stay with your child and avoid separations right now. ▶ For brief separations (store, bathroom) help your child by naming his feelings and linking them to what he has been through. Let him know you love him and that this goodbye is different, you'll be back soon. "You're so scared. You don't want me to go because last time we weren't together you didn't know where I was. This is different, and I'll be right back." ▶ For longer separations have him stay with familiar people, tell him where you are going, why, and when you will come back. Let him know you will think about him. Leave a photo or something of yours and call if you can. When you come back, tell him you missed him, thought about him, and did come back. You will need to say this over and over.</li> </ul>
. . has problems eating, eats too much or refuses food.	<ul style="list-style-type: none"> <li>▶ Stress affects your child in different ways, including her appetite. ▶ Eating healthy is important but focusing too much on eating can cause stress and tension in your relationship.</li> </ul>	<ul style="list-style-type: none"> <li>▶ Relax. Usually, as your child's level of stress goes down, her eating habits will return to normal. Don't force your child to eat. ▶ Eat together and make meal times fun and relaxing. ▶ Keep healthy snacks around. Young children often eat on the go. ▶ If you are worried, or if your child loses a significant amount of weight, consult a pediatrician.</li> </ul>
. . is not able to do things he used to do (like use the potty)  . . does not talk like he used to	<ul style="list-style-type: none"> <li>▶ Often when young children are stressed or scared, they temporarily lose abilities or skills they recently learned.</li> <li>▶ This is the way young children tell us that they are not okay and need our help. ▶ Losing an ability after children have gained it (like starting to wet the bed again) can make them feel ashamed or embarrassed. Caregivers should be understanding and supportive. ▶ Your child is not doing this on purpose.</li> </ul>	<ul style="list-style-type: none"> <li>▶ Avoid criticism. It makes him worried that he'll never learn. ▶ Do not force your child. It creates a power struggle. ▶ Instead of focusing on the ability (like not using the potty), help your child feel understood, accepted, loved and supported. ▶ As your child feels safer, he will recover the ability he lost.</li> </ul>
. . is reckless, does dangerous things.	<ul style="list-style-type: none"> <li>▶ It may seem strange, but when children feel unsafe, they often behave in unsafe ways. ▶ It is one way of saying, "I need you. Show me I'm important by keeping me safe."</li> </ul>	<ul style="list-style-type: none"> <li>▶ Keep her safe. Calmly go and get her and hold her if necessary. ▶ Let her know that what she is doing is unsafe, that she is important, and you wouldn't want anything to happen to her. ▶ Show her other more positive ways that she can have your attention.</li> </ul>

# Appendix E: Handouts

Parent Tips for Helping Infants and Toddlers after Disasters		
IF YOUR CHILD. .	UNDERSTAND	WAYS TO HELP
. . is scared by things that did not scare her before	<ul style="list-style-type: none"> <li>▶ Young children believe their parents are all-powerful and can protect them from anything. This belief helps them feel safe. ▶ Because of what happened, this belief has been damaged, and without it, the world is a scarier place.</li> <li>▶ Many things may remind your child of the disaster (rain, aftershocks, ambulances, people yelling, a scared look on your face), and will scare her. ▶ It is not your fault – it was the disaster.</li> </ul>	<ul style="list-style-type: none"> <li>▶ When your child is scared, talk to her about how you will keep her safe. ▶ If things remind your child of the disaster and cause her to worry that it is happening again, help her understand how what is happening now (like rain or aftershocks) is different from the disaster. ▶ If she talks about monsters, join her in chasing them out. “Go away monster. Don’t bother my baby. I’m going to tell the monster boo, and it will get scared and go away. Boo, boo.” ▶ Your child is too young to understand and recognize how you did protect her, but remind yourself of the good things you did.</li> </ul>
. . seems “hyper,” can’t sit still, and doesn’t pay attention to anything.	<ul style="list-style-type: none"> <li>▶ Fear can create nervous energy that stays in our bodies.</li> <li>▶ Adults sometimes pace when we are worried. Young children run, jump, and fidget. ▶ When our minds are stuck on bad things, it is hard to pay attention to other things.</li> <li>▶ Some children are naturally active.</li> </ul>	<ul style="list-style-type: none"> <li>▶ Help you child to recognize his feelings (fear, worry) and reassure your child that he is safe. ▶ Help your child get rid of nervous energy: stretching, running, sports, breathing deep and slow. ▶ Sit with him and do an activity you both enjoy: throw a ball, read books, play, draw. Even if he doesn’t stop running around, this helps him.</li> <li>▶ If your child is naturally active, focus on the positive. Think of all the energy he has to get things done, and find activities that fit his needs.</li> </ul>
. . plays in a violent way. . . keeps talking about the disaster and the bad things he saw.	<ul style="list-style-type: none"> <li>▶ Young children often talk through play. Violent play can be their way of telling us how crazy things were or are, and how they feel inside. ▶ When your child talks about what happened, strong feelings may come up both for you and your child (fear, sadness, anger)</li> </ul>	<ul style="list-style-type: none"> <li>▶ If you can tolerate it, listen to your child when he “talks.” ▶ As your child plays, notice the feelings he has and help him by naming feelings and being there to support him (hold him, soothe him). ▶ If he gets overly upset, spaces out, or he plays out the same upsetting scene, help him calm down, help him feel safe, and consider getting professional help.</li> </ul>
. . is now very demanding and controlling. . . seems “stubborn” insisting that things be done her way.	<ul style="list-style-type: none"> <li>▶ Between the age of 18 months to 3 years, young children often seem “controlling.” ▶ It can be annoying, but it is a normal part of growing up and helps them learn that they are important and can make things happen. ▶ When children feel unsafe, they may become more controlling than usual. This is one way of dealing with fears. They are saying “things are so crazy I need control over <u>something</u>.”</li> </ul>	<ul style="list-style-type: none"> <li>▶ Remember your child is not controlling or bad. This is normal, but may be worse right now because she feels unsafe. ▶ Let your child have control over small things. Give her choices over what she wears or eats, games you play, stories you read. If she has control over small things, it can make her feel better. Balance giving her choices and control with giving her structure and routines. She will feel unsafe if she “runs the show.” ▶ Cheer her on as she tries new things. She can also feel more in control when she can put her shoes on, put a puzzle together, pour juice.</li> </ul>
. . tantrums and is cranky. . . yells a lot – more than usual.	<ul style="list-style-type: none"> <li>▶ Even before the disaster, your child may have had tantrums. They are a normal part of being little. It’s frustrating when you can’t do things and when you don’t have the words to say what you want or need. ▶ Now, your child has a lot to be upset about (just like you) and may really need to cry and yell.</li> </ul>	<ul style="list-style-type: none"> <li>▶ Let him know you understand how hard this is for him. “Thing are really bad right now. It’s been so scary. We don’t have your toys or T.V., and you’re mad.” ▶ Tolerate tantrums more than you usually would, and respond with love rather than discipline. You might not normally do this, but things are not normal. If he cries or yells, stay with him and let him know you are there for him. Reasonable limits should be set if tantrums become frequent or are extreme.</li> </ul>
. . hits you.	<ul style="list-style-type: none"> <li>▶ For children, hitting is a way of expressing anger.</li> <li>▶ When children can hit adults they feel unsafe. It’s scary to be able to hit someone who’s supposed to protect you.</li> <li>▶ Hitting can also come from seeing other people hit each other.</li> </ul>	<ul style="list-style-type: none"> <li>▶ Each time your child hits, let her know that this is not ok. Hold her hands, so she can’t hit, have her sit down. Say something like “It’s not OK to hit, it’s not safe. When you hit, you are going to need to sit down.” ▶ If she is old enough, give her the words to use or tell her what she needs to do. Tell her “Use your words. Say I want that toy.” ▶ Help her express anger in other ways: play, talk, draw. ▶ If you are having conflict</li> </ul>

# Appendix E: Handouts

Parent Tips for Helping Infants and Toddlers after Disasters		
IF YOUR CHILD. .	UNDERSTAND	WAYS TO HELP
		with other adults, try to work it out in private, away from where your child can see or hear you. If needed, talk with a friend or professional about your feelings.
. . says go away, I hate you!  . . says this is all your fault.	<ul style="list-style-type: none"> <li>▶ The real problem is the disaster and everything that followed, but your child is too little to fully understand that.</li> <li>▶ When things go wrong, young children often get mad at their parents because they believe they should have stopped it from happening.</li> <li>▶ You are not to blame, but now is not the time to defend yourself. Your child needs you.</li> </ul>	<ul style="list-style-type: none"> <li>▶ Remember what your child has been through. He doesn't mean everything he is saying; he's angry and dealing with so many difficult feelings.</li> <li>▶ Support your child's feeling of anger, but gently redirect the anger towards the disaster. "You are really mad. Lots of bad things have happened. I'm mad too. I really wish it didn't happen, but even mommies can't make hurricanes not happen. It's so hard for both of us."</li> </ul>
. . doesn't want to play or do anything. . . seems to not really have any feelings (happy or sad).	<ul style="list-style-type: none"> <li>▶ Your child needs you. So much has happened and he may be feeling sad and overwhelmed.</li> <li>▶ When children are stressed, some yell and others shut down. Both need their loved ones.</li> </ul>	<ul style="list-style-type: none"> <li>▶ Sit by your child and keep him close. Let him know you care.</li> <li>▶ If you can, give words to his feelings. Let him know it's OK to feel sad, mad, or worried. "It seems like you don't want to do anything. I wonder if you are sad. It's OK to be sad. I will stay with you."</li> <li>▶ Try to do things with your child, anything he might like: read a book, sing, play together.</li> </ul>
. . . cries a lot.	<ul style="list-style-type: none"> <li>▶ Your family may have experienced difficult changes because of the disaster, and it is natural that your child is sad.</li> <li>▶ When you let your child feel sad and provide her with comfort, you help your child even if she remains sad.</li> <li>▶ If you have strong feelings of sadness, it may be good for you to get support. Your child's well-being is connected to your well-being.</li> </ul>	<ul style="list-style-type: none"> <li>▶ Allow your child to express feelings of sadness.</li> <li>▶ Help your child name her feelings and understand why she may feel that way. "I think you're sad. A lot of hard things have happened, like . . ." ▶ Support your child by sitting with her and giving her extra attention. Spend special time together.</li> <li>▶ Help your child feel hopeful about the future. It will be important to think and talk about how your lives will continue and the good things you will do, like go for a walk, go to the park or zoo, play with friends.</li> <li>▶ Take care of yourself.</li> </ul>
. . . misses people you are no longer able to see after the disaster.	<ul style="list-style-type: none"> <li>▶ Even though young children do not always express how they feel, be aware that it is difficult for them when they lose contact with important people.</li> <li>▶ If someone close to your child died, your child may show stronger reactions to the disaster. If the reactions appear to be strong and to last longer than two weeks, it may be helpful to seek help from a professional.</li> <li>▶ Young children do not understand death, and may think that the person can come back.</li> </ul>	<ul style="list-style-type: none"> <li>▶ For those that have moved away, help your child say in touch in some way (for example, sending pictures or cards, calling)</li> <li>▶ Help your child talk about these important people. Even when we are apart from people, we can still have positive feelings about them by remembering and talking about them.</li> <li>▶ Acknowledge how hard it is to not be able to see people we care for. It is sad.</li> <li>▶ Where someone has died, answer your child's questions simply and honestly.</li> </ul>
. . misses things you have lost because of the disaster.	<ul style="list-style-type: none"> <li>▶ When a disaster brings so much loss to a family and community, it is easy to lose sight of how much the loss of a toy or other important item (blanket) can mean to a child.</li> <li>▶ Grieving for a toy is also your child's way of grieving for all you had before the disaster.</li> </ul>	<ul style="list-style-type: none"> <li>▶ Allow your child to express feelings of sadness. It is sad that your child lost her toy or blanket.</li> <li>▶ If possible, try to find something that would replace the toy or blanket that would be acceptable and satisfying to your child.</li> <li>▶ Distract your child with other activities.</li> </ul>

# Appendix E: Handouts

Parent Tips for Helping Preschool-Age Children after Disasters		
Reactions/Behavior	Responses	Examples of things to do and say
<p><u>Helplessness and Passivity:</u> Young children know they can't protect themselves. In a disaster they feel even more helpless. They want to know their parents will keep them safe. They might express this by being unusually quiet or agitated.</p>	<p>▶ Provide comfort, rest, food, water, and opportunities for play and drawing. ▶ Provide ways to turn spontaneous drawing or playing from traumatic events to include something that would make them feel safer or better.</p> <p>▶ Reassure your child that you and other grownups will protect them.</p>	<p>▶ Give your child more hugs, hand holding, or time in your lap. ▶ Make sure there is a special safe area for your child to play with proper supervision. ▶ In play, a four year old keeps having the blocks knocked down by hurricane winds. Asked, "Can you make it safe from the winds?" the child quickly builds a double block thick wall and says, "Winds won't get us now." A parent might respond with, "That wall sure is strong" and explain, "We're doing a lot of things to keep us safe."</p>
<p><u>General Fearfulness:</u> Young children may become more afraid of being alone, being in the bathroom, going to sleep, or otherwise separated from parents. Children want to believe that their parents can protect them in all situations and that other grownups, such as teachers or police officers, are there to help them.</p>	<p>▶ Be as calm as you can with your child. Try not to voice your own fears in front of your child. ▶ Help children regain confidence that you aren't leaving them and that you can protect them. ▶ Remind them that there are people working to keep families safe, and that your family can get more help if you need to. ▶ If you leave, reassure your children you will be back. Tell them a realistic time in words they understand, and be back on time. ▶ Give your child ways to communicate their fears to you.</p>	<p>▶ Be aware when you are on the phone or talking to others, that your child does not overhear you expressing fear. ▶ Say things such as, "We are safe from the hurricane now, and people are working hard to make sure we are okay."</p> <p>▶ Say, "If you start feeling more scared, come and take my hand. Then I'll know you need to tell me something."</p>
<p><u>Confusion about the danger being over:</u> Young children can overhear things from adults and older children, or see things on TV or just imagine that it is happening all over again. They believe the danger is closer to home, even if it happened further away.</p>	<p>▶ Give simple, repeated explanations as needed, even every day. Make sure they understand the words you are using. ▶ Find out what other words or explanations they have heard and clarify inaccuracies. ▶ If you are at some distance from the danger, it is important to tell your child that the danger is not near you.</p>	<p>▶ Continue to explain to your child that the hurricane has passed and that you are away from the flooded area ▶ Draw, or show on a map, how far away you are from the disaster area, and that where you are is safe. "See? The hurricane was way over there, and we're way over here in this safe place."</p>

# Appendix E: Handouts

Parent Tips for Helping Preschool-Age Children after Disasters		
Reactions/Behavior	Responses	Examples of things to do and say
<u>Not talking</u> : Being silent or having difficulty saying what is bothering them.	<ul style="list-style-type: none"> <li>▶ Put common feelings of children into words, such as anger, sadness, and worry about the safety of parents, friends and siblings.</li> <li>▶ Do not force them to talk, but let them know they can talk to you any time.</li> </ul>	<ul style="list-style-type: none"> <li>▶ Draw simple “happy faces” for different feelings on paper plates. Tell a brief story about each one, such as, “Remember when the water came into the house and had a worried face like this?”</li> <li>▶ Say something like, “Children can feel really sad when their home is damaged.”</li> <li>▶ Provide art or play materials to help them express themselves. Then use feeling words to check out how they felt. “This is a really scary picture. Were you scared when you saw the water?”</li> </ul>
<u>Fears the disaster will return</u> : When having reminders--seeing, hearing, or otherwise sensing something that reminds them of the disaster.	<ul style="list-style-type: none"> <li>▶ Explain the difference between the event and reminders of the event.</li> <li>▶ Protect children from things that will remind them as best you can.</li> </ul>	<ul style="list-style-type: none"> <li>▶ “Even though it’s raining, that doesn’t mean the hurricane is happening again. A rainstorm is smaller and can’t wreck stuff like a hurricane can.”</li> <li>▶ Keep your child from seeing television, radio, and computer images of the disaster that can trigger fears of it happening again.”</li> </ul>
<u>Sleep problems</u> : fear of being alone at night, sleeping alone, waking up afraid, having bad dreams.	<ul style="list-style-type: none"> <li>▶ Reassure your child that s/he is safe. Spend extra quiet time together at bedtime.</li> <li>▶ Let the child sleep with a dim light on, or sleep with you for a limited time.</li> <li>▶ Some might understand an explanation of the difference between dreams and real life.</li> </ul>	<ul style="list-style-type: none"> <li>▶ Provide calming activities before bedtime. Tell a favorite story with a comforting theme.</li> <li>▶ At bedtime say, “You can sleep with us tonight, but tomorrow you’ll sleep in your own bed.”</li> <li>▶ “Bad dreams come from our thoughts inside about being scared, not from real things happening.”</li> </ul>
<u>Returning to earlier behaviors</u> : Thumb sucking, bedwetting, baby-talk, needing to be in your lap	<ul style="list-style-type: none"> <li>▶ Remain neutral or matter-of-fact, as best you can, as these may continue a while after the disaster.</li> </ul>	<ul style="list-style-type: none"> <li>▶ If your child starts bedwetting, change her clothes and linens without comment. Don’t let anyone criticize or shame the child by saying, “You’re such a baby.”</li> </ul>
<u>Not understanding about death</u> : Preschool age children don’t understand that death is not reversible. They have “magical thinking” and might believe their thoughts caused the death. The loss of a pet may be very hard on a child.	<ul style="list-style-type: none"> <li>▶ Give age-appropriate consistent explanation--that does not give false hopes--about the reality of death.</li> <li>▶ Don’t minimize their feelings over a loss of a pet or a special toy.</li> <li>▶ Take cues from what your child seems to want to know. Answer simply and ask if he has any more questions.</li> </ul>	<ul style="list-style-type: none"> <li>▶ Allow children to participate in cultural and religious grieving rituals.</li> <li>▶ Help them find their own way to say goodbye by drawing a happy memory or lighting a candle or saying a prayer for them.</li> <li>▶ “No, Pepper won’t be back, but we can think about him and talk about him and remember what a silly doggy he was.”</li> <li>▶ “The firefighter said no one could save Pepper and it wasn’t your fault. I know you miss him very much.”</li> </ul>

## Appendix E: Handouts

Parent Tips for Helping School-Age Children after Disasters		
Reactions	Responses	Examples of things to do and say
<u>Confusion about what happened</u>	<ul style="list-style-type: none"> <li>▶ Give clear explanations of what happened whenever your child asks. Avoid details that would scare your child. Correct any information that your child is unclear or confused about regarding if there is a present danger.</li> <li>▶ Remind children that there are people working to keep families safe and that your family can get more help if needed.</li> <li>▶ Let your children know what they can expect to happen next.</li> </ul>	<ul style="list-style-type: none"> <li>▶ “I know other kids said that more hurricanes are coming, but we are now in a place that is safer from hurricanes.”</li> <li>▶ Continue to answer questions your children have (without getting irritable) and to reassure them the family is safe.</li> <li>▶ Tell them what’s happening, especially about issues regarding school and where they will be living.</li> </ul>
<u>Feelings of being responsible:</u> School-age children may have concerns that they were somehow at fault, or should have been able to change what happened. They may hesitate to voice their concerns in front of others.	<ul style="list-style-type: none"> <li>▶ Provide opportunities for children to voice their concerns to you.</li> <li>▶ Offer reassurance and tell them why it was not their fault.</li> </ul>	<ul style="list-style-type: none"> <li>▶ Take your child aside. Explain that, “After a disaster like this, lots of kids—and parents too—keep thinking ‘What could I have done differently?’ or ‘I should have been able to do something.’ That doesn’t mean they were at fault.”</li> <li>▶ “Remember? The firefighter said no one could save Pepper and it wasn’t your fault.”</li> </ul>
<u>Fears of recurrence of the event and reactions to reminders</u>	<ul style="list-style-type: none"> <li>▶ Help child to identify reminders (people, places, sounds, smells, feelings, time of day) and to clarify the difference between the event and the reminders that occur after it.</li> <li>▶ Reassure them, as often as they need, that they are safe.</li> <li>▶ Protect children from seeing media coverage of the event as it can trigger fears of the disaster happening again.</li> </ul>	<ul style="list-style-type: none"> <li>▶ When they recognize that they are being reminded, say, “Try to think to yourself, ‘I am upset because I am being reminded of the hurricane because it is raining, but now there is no hurricane and I am safe.’”</li> <li>▶ “I think we need to take a break from the TV right now.”</li> </ul>
<u>Retelling the event</u> or playing out the event over and over	<ul style="list-style-type: none"> <li>▶ Permit the child to talk and act out these reactions. Let them know that this is normal.</li> <li>▶ Encourage positive problem-solving in play or drawing.</li> </ul>	<ul style="list-style-type: none"> <li>▶ “I notice you’re drawing a lot of pictures of what happened. Did you know that many children do that?”</li> <li>▶ “It might help to draw about how you would like your school to be rebuilt to make it safer.”</li> </ul>

## Appendix E: Handouts

Parent Tips for Helping School-Age Children after Disasters		
Reactions/Behavior	Responses	Examples of things to do and say
<u>Fear of being overwhelmed by their feelings</u>	▶ Provide a safe place for them to express their fears, anger, sadness, etc. Allow children to cry or be sad; don't expect them to be brave or tough.	▶ "When scary things happen, people have strong feelings, like being mad at everyone or being very sad. Would you like to sit here with a blanket until you're feeling better?"
<u>Sleep problems</u> , including bad dreams, fear of sleeping alone, demanding to sleep with parents.	▶ Let your child tell you about the bad dream. Explain that bad dreams are normal and they will go away. Do not ask the child to go into too many details of the bad dream. ▶ Temporary sleeping arrangements are okay; make a plan with your child to return to normal sleeping habits.	▶ "That was a scary dream. Let's think about some good things you can dream about and I'll rub your back until you fall asleep." ▶ "You can stay in our bedroom for the next couple of nights. Then we will spend more time with you in your bed before you go to sleep. If you get scared again, we can talk about it."
<u>Concerns</u> about the safety of themselves and others.	▶ Help them to share their worries and give them realistic information.	▶ Create a "worry box" where children can write out their worries and place them in the box. Set a time to look these over, problem-solve, and come up with answers to the worries.
<u>Altered behavior</u> : Unusually aggressive or restless behavior.	▶ Encourage the child to engage in recreational activities and exercise as an outlet for feelings and frustration.	▶ "I know you didn't mean to slam that door. It must be hard to feel so angry." ▶ "How about if we take a walk? Sometimes getting our bodies moving helps with strong feelings."
<u>Somatic complaints</u> : Headaches, stomachaches, muscle aches for which there seem to be no reason.	▶ Find out if there is a medical reason. If not, provide comfort and assurance that this is normal. ▶ Be matter-of-fact with your child; giving these non-medical complaints too much attention may increase them.	▶ Make sure the child gets enough sleep, eats well, drinks plenty of water, and gets enough exercise. ▶ "How about sitting over there? When you feel better, let me know and we can play cards."
<u>Closely watching a parent's responses and recovery</u> : not wanting to disturb parent with their own worries.	▶ Give children opportunities to talk about their feelings as well as your own. ▶ Remain as calm as you can, so as not to increase your child's worries.	▶ "Yes, my ankle is broken, but it feels better since the paramedics wrapped it. I bet it was scary seeing me hurt, wasn't it?"
<u>Concern</u> for other victims and families.	▶ Encourage constructive activities on behalf of others, but do not burden with undo responsibility.	▶ Help children identify projects that are age-appropriate and meaningful (e.g., clearing rubble from school grounds, collecting money or supplies for those in need).

## Appendix E: Handouts

Parent Tips for Helping Adolescents after Disasters		
Reactions	Responses	Examples of things to do and say
<u>Detachment, shame, and guilt</u>	<ul style="list-style-type: none"> <li>▶ Provide a safe time to discuss with your teen the events and their feelings.</li> <li>▶ Emphasize that these feelings are common, and correct excessive self-blame with realistic explanations of what actually could have been done.</li> </ul>	<ul style="list-style-type: none"> <li>▶ “Many kids—and adults—feel like you do, angry and blaming themselves that they couldn’t do more. You’re not at fault—remember; even the firefighters said there was nothing more we could have done.”</li> </ul>
<u>Self-consciousness</u> about their fears, sense of vulnerability, fear of being labeled abnormal	<ul style="list-style-type: none"> <li>▶ Help teens understand that these feelings are common.</li> <li>▶ Encourage relationships with family and peers for needed support during the recovery period.</li> </ul>	<ul style="list-style-type: none"> <li>▶ “I was feeling the same thing. Scared and helpless. Most people feel like this when a disaster happens, even if they look calm on the outside.”</li> <li>▶ “My cell phone is working again, why don’t you see if you can get a hold of Pete to see how he’s doing.”</li> <li>▶ “And thanks for playing the game with your little sister. She’s much better now.”</li> </ul>
<u>Acting out behavior</u> ; using alcohol and drugs, sexual acting out, accident-prone behavior.	<ul style="list-style-type: none"> <li>▶ Help teens understand that acting out behavior is a dangerous way to express strong feelings (like anger) over what happened.</li> <li>▶ Limit access to alcohol and drugs.</li> <li>▶ Talk about the danger of high-risk sexual activity.</li> <li>▶ On a time-limited basis, have them let you know where they are going and what they’re planning to do.</li> </ul>	<ul style="list-style-type: none"> <li>▶ “Many teens—and some adults—feel out of control and angry after a disaster like this. They think drinking or taking drugs will help somehow. It’s very normal to feel that way—but it’s not a good idea to act on it.”</li> <li>▶ “It’s important during these times that I know where you are and how to contact you.”</li> </ul> <p>Assure them that this extra checking-in is temporary, just until things have stabilized.</p>
<u>Fears of recurrence and reactions to reminders</u>	<ul style="list-style-type: none"> <li>▶ Help to identify different reminders (people, places, sounds, smells, feelings, time of day) and to clarify the difference between the event and the reminders that occur after it.</li> <li>▶ Explain to teens that media coverage of the disaster can trigger fears of it happening again.</li> </ul>	<ul style="list-style-type: none"> <li>▶ “When you’re reminded, you might try saying to yourself, ‘I am upset now because I am being reminded, but it is different now because there is no hurricane and I am safe.’”</li> <li>▶ Suggest “Watching the news reports could make it worse, because they are playing the same images over and over. How about turning it off now?”</li> </ul>

## Appendix E: Handouts

Parent Tips for Helping Adolescents after Disasters		
Reactions	Responses	Examples of things to do and say
<u>Abrupt shifts in interpersonal relationships</u> : Teens may pull away from parents, family, and even from peers; they may respond strongly to parent's reactions in the crisis.	<ul style="list-style-type: none"> <li>▶ Explain that the strain on relationships is expectable. Emphasize that we need family and friends for support during the recovery period.</li> <li>▶ Encourage tolerance for different family member's courses to recovery. ▶ Accept responsibility for your own feelings.</li> </ul>	<ul style="list-style-type: none"> <li>▶ Spend more time talking as a family about how everyone is doing. Say, "You know, the fact that we're crabby with each other is completely normal, given what we've been through. I think we're handling things amazingly. It's a good thing we have each other." ▶ You might say, "I appreciate your being calm when your brother was screaming last night. I know he woke you up too." ▶ "I want to apologize for being irritable with you yesterday. I am going to work harder to stay calm myself."</li> </ul>
<u>Radical changes in attitude</u>	<ul style="list-style-type: none"> <li>▶ Explain that changes in people's attitudes after a disaster are common, but will return back to normal over time.</li> </ul>	<ul style="list-style-type: none"> <li>▶ "We are all under great stress. When people's lives are disrupted this way, we all feel more scared, angry—even full of revenge. It might not seem like it, but we all will feel better when we get back to a more structured routine."</li> </ul>
<u>Wanting premature entrance into adulthood</u> : (e.g., wanting to leave school, get married)	<ul style="list-style-type: none"> <li>▶ Encourage postponing major life decisions. Find other ways to make the adolescent feel more in control over things.</li> </ul>	<ul style="list-style-type: none"> <li>▶ "I know you're thinking about quitting school and getting a job to help out. But it's important not to make big decisions right now. A crisis time is not a great time to make major changes."</li> </ul>
<u>Concern for other victims and families</u>	<ul style="list-style-type: none"> <li>▶ Encourage constructive activities on behalf of others, but do not burden with undo responsibility.</li> </ul>	<ul style="list-style-type: none"> <li>▶ Help teens to identify projects that are age-appropriate and meaningful (e.g., clearing rubble from school grounds, collecting money or supplies for those in need).</li> </ul>

# Appendix E: Handouts

Tips for Adults after Disasters		
Reactions/Behavior	Responses	Examples of things to do and say
<p><u>High anxiety/arousal</u> -Tension and anxiety are common after disasters. Adults may be excessively worried about the future, have difficulties sleeping, problems concentrating, and feel jumpy and nervous. These reactions can include rapid heart beat and sweating.</p>	<p>► Use breathing and/or other relaxation skills</p>	<p>► Take time during the day to calm yourself through relaxation exercises to make it easier to sleep, concentrate, and give you energy. ► Try a breathing exercise as follows: Inhale slowly through your nose and comfortably fill your lungs all the way down to your stomach, while saying to yourself, "My body is filled with calmness." Exhale slowly through your mouth and comfortably empty your lungs, while silently saying to yourself, "My body is releasing the tension." Do this five times slowly, and as many times a day as needed.</p>
<p><u>Concern or shame</u> over your own reactions. Many people have strong reactions after a disaster, including fear and anxiety, difficulty concentrating, shame over how you react and feeling guilty about something. It is expectable and understandable to feel many things in the aftermath of an extremely difficult event.</p>	<p>► Find a good time to discuss your reactions with a family member or trusted friend. ► Remember that these reactions are common and it takes time for them to subside. ► Correct excessive self-blame with realistic assessment of what actually could have been done.</p>	<p>► When talking with someone, find the right time and place, and ask if it is okay to talk about your feelings. ► Remind yourself that your feelings are expectable and you are not "going crazy," and that you are not at fault for the disaster. ► If these feeling persist for a month, or more you may wish to seek professional help.</p>
<p><u>Feeling overwhelmed</u> by tasks that need to be accomplished (for example, housing, food, paperwork for insurance, child care, parenting)</p>	<p>► Identify what your top priorities are. ► Find out what services are available to help get your needs met. ► Make a plan that breaks down the tasks into manageable steps.</p>	<p>► Make a list of your concerns and decide what to tackle first? Take it a step at a time. ► Find out which agencies can help with your needs and how to access them. ► Where appropriate, rely on your family, friends, and community for practical assistance.</p>
<p><u>Fears of recurrence and reactions to reminders</u> - it is common for survivors to fear that another disaster will occur, and to react to things that are reminders of what happened</p>	<p>► Be aware that reminders can include people, places, sounds, smells, feelings, time of day. ► Remember that media coverage of the disaster can be a reminder and trigger fears of it happening again.</p>	<p>► When you are reminded, try saying to yourself, "I am upset because I am being reminded of the disaster, but it is different now because the disaster is not happening and I am safe." ► Monitor and limit your viewing of news reports so you just get the information that you need.</p>
<p><u>Changes in attitude, view of the world and of oneself</u> -Strong changes in people's attitudes after a disaster are common. These can include questioning ones spiritual beliefs, trust in others and social agencies, and concerns about ones own effectiveness, and dedication to helping others.</p>	<p>► Postpone any major unnecessary life changes in the immediate future ► Remember that dealing with post-disaster difficulties increases your sense of courage and effectiveness. ► Get involved with community recovery efforts.</p>	<p>► Remember that getting back to a more structured routine can help improve decision-making. ► Remind yourself that going through a disaster can have positive effects on what you value and how you spend your time. ► Consider engaging in community recovery projects.</p>

# Appendix E: Handouts

Tips for Adults after Disasters		
Reactions/Behavior	Responses	Examples of things to do and say
<p><u>Using alcohol and drugs, or engaging in gambling or high-risk sexual behaviors</u> -Many people feel out of control, scared, hopeless, or angry after a disaster and engage in these behaviors to feel better. This can especially be a problem if there was pre-existing substance abuse or addiction.</p>	<p>► Understand that using substances and engaging in addictive behaviors can be a dangerous way to cope with what happened. ► Get information about local support agencies</p>	<p>► Remember that substance use and other addictive behaviors can lead to problems with sleep, relationships, jobs, and physical health. ► Get appropriate help.</p>
<p><u>Shifts in interpersonal relationships</u> -People may feel differently towards family and friends; for example, they may feel overprotective and very concerned for each other's safety, frustrated by the reactions of a family member or friend, or they may feel like pulling away from family and friends.</p>	<p>► Understand that family and friends are a major form of support during the recovery period. ► It is important to understand and tolerate different courses of recovery among family members. ► Rely on other family members for help with parenting or other daily activities when you are upset or under stress.</p>	<p>► Don't withdraw from seeking support just because you feel you might burden someone else. Most people do better after disasters with good support from others. ► Don't be afraid to ask your friends and family how they are doing, rather than just giving advice, or trying to get them to "get over it." Let them know you understand, and offer a supportive ear or lend a helping hand. ► Spend more time talking with family and friends about how everyone is doing. Say, "You know, the fact that we're crabby with each other is completely normal, given what we've been through. I think we're handling things amazingly. It's a good thing we have each other."</p>
<p><u>Excessive anger</u> - Some degree of anger is understandable and expected after a disaster, especially when something feels unfair. However, when it leads to violent behavior, extreme anger is a serious problem.</p>	<p>► Find ways to manage your anger in a way that helps you rather than hurts you.</p>	<p>► Manage your anger by taking time to cool down, walk away from stressful situations, talk to a friend about what is making you angry, get physical exercise, distract yourself with positive activities or problem-solve the situation that is making you angry. ► Remind yourself that being angry will not get you what you want, and may harm important relationships. ► If you become violent, get immediate help.</p>
<p><u>Sleep difficulties</u> - Sleep problems are common after a disaster, as people are on edge and worried about adversities and life changes. This can make it more difficult to fall asleep and lead to frequent awakenings during the night.</p>	<p>► Make sure you have good sleep routines.</p>	<p>► Try to go to sleep at the same time every day. ► Don't drink caffeinated beverages in the evening. ► Reduce alcohol consumption. ► Increase daytime exercise. ► Relax before bedtime. ► Limit daytime naps to 15 minutes, and do not nap later than 4 pm.</p>

# Appendix E: Handouts

## TIPS FOR RELAXATION

Tension and anxiety are common after disasters. Unfortunately, they can make it more difficult to cope with the many things that must be done to recover. There is no easy solution to coping with post-disaster problems, but taking time during the day to calm yourself through relaxation exercises may make it easier to sleep, concentrate, and have energy for coping with life. These can include muscular relaxation exercises, breathing exercises, meditation, swimming, stretching, yoga, prayer, exercise, listening to quiet music, spending time in nature, and so on. Here are some basic breathing exercises that may help:

### FOR YOURSELF:

1. Inhale slowly (one-thousand one; one-thousand two; one-thousand three) through your nose and comfortably fill your lungs all the way down to your belly.
2. Silently and gently say to yourself, "My body is filled with calmness." Exhale slowly (one-thousand one, one-thousand two, one-thousand three) through your mouth and comfortably empty your lungs all the way down to your abdomen.
3. Silently and gently say to yourself, "My body is releasing the tension."
4. Repeat five times slowly and comfortably.
5. Do this as many times a day as needed.

### FOR CHILDREN:

Lead a child through a breathing exercise:

1. "Let's practice a different way of breathing that can help calm our bodies down.
2. Put one hand on your stomach, like this [demonstrate].
3. Okay, we are going to breathe in through our noses. When we breathe in, we are going to fill up with a lot of air and our stomachs are going to stick out like this [demonstrate].
4. Then, we will breathe out through our mouths. When we breathe out, our stomachs are going to suck in and up like this [demonstrate].
5. We are going to breathe in really slowly while I count to three. I'm also going to count to three while we breathe out really slowly.
6. Let's try it together. Great job!"

Make a game of it:

- Blow bubbles with a bubble wand and dish soap
- Blow bubbles with chewing gum
- Blow paper wads or cotton balls across the table
- Tell a story where the child helps you imitate a character who is taking deep breaths

# Appendix E: Handouts

## ALCOHOL, MEDICATION, AND DRUG USE AFTER DISASTER

Some people increase their use of alcohol, prescription medications, or other drugs after a disaster. You may feel that using drugs and alcohol seem to help you escape bad feelings or physical symptoms related to stress responses (for example, headaches, muscle tension). However, they can actually make these things worse in the long term because they interrupt natural sleep cycles, create health problems, interfere with relationships, and create potential dependence on the substance. If your use of alcohol or drugs has increased since the disaster or is causing problems for you, it is important for you to reduce your level of use or seek help in gaining control over your use.

### Managing alcohol, medication, and drug use

- Pay attention to any change in your use of alcohol and/or drugs.
- Correctly use prescription and over-the-counter medications as indicated.
- Eat well, exercise, get enough sleep, and use your family and others for support.
- If you feel like using larger amounts of either prescribed or over-the-counter medications, consult a healthcare professional.
- Consult with a healthcare professional about safe ways to reduce anxiety, depression, muscle tension, and sleep difficulties.
- If you find that you have greater difficulty controlling alcohol/substance use since the hurricane, seek support in doing so.
- If you believe you have a problem with substance abuse, talk to your doctor or counselor about it.

### If you have had an alcohol, medication, or drug problem in the past

For people who have successfully stopped drinking or using drugs, experiencing a disaster can sometimes result in strong urges to drink or use again. Sometimes it can lead them to strengthen their commitment to recovery. Whatever your experience, it is important to consciously choose to stay in recovery.

- Increase your attendance at substance abuse support groups.
- If you are receiving disaster crisis counseling, talk to your counselor about your past alcohol or drug use.
- If you have been forced to move out of your local community, talk to disaster workers about helping to locate nearby alcohol or drug recovery groups, or ask them to help organize a new support group.
- Talk with family and friends about supporting you to avoid use of alcohol or substances.
- If you have a 12-Step sponsor or substance abuse counselor, talk to him or her about your situation.
- Increase your use of other supports that have helped you avoid relapse in the past.