

FACT SHEET FOR PROVIDERS

COURAGE TO CARE



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A Health Promotion Campaign from

Uniformed Services University of the Health Sciences, your federal medical school, Bethesda, Maryland • www. usuhs.mil

PSYCHOLOGICAL FIRST AID Helping Victims in the Immediate Aftermath of Disaster

As a healthcare provider, first responder, leader or manager of disaster operations, this fact sheet describes an evidenced-based approach for helping victims cope in the immediate aftermath of a disaster known as *Psychological First Aid*, and explains how to administer it.

Psychological First Aid aims to mollify the painful range of emotions and physical responses experienced by people exposed to disaster. These reactions include combinations of confusion, fear,

Do's and Don'ts for Promoting an Environment of Safety, Calm, Connectedness, Self-Efficacy and Hope The primary objective of *Psychological First Aid* is to create and sustain an environment of 1) safety, 2) calm, 3) connectedness to others, 4) self-efficacy or empowerment, and 5) hope.

DO:

Promote Safety

- Help people meet basic needs for food & shelter, and obtain emergency medical attention.
- Provide repeated, simple and accurate information on how to obtain these.

Promote Calm

- Listen to people who wish to share their stories and emotions and remember there is no wrong or right way to feel.
- Be friendly and compassionate even if people are being difficult.
- Offer accurate information about the disaster or trauma, and the relief efforts underway to help victims understand the situation.

Promote Connectedness

- Help people contact friends or loved ones.
- Keep families together. Keep children with parents or other close relatives whenever possible.

mistrustfulness, guilt, shame, shaken religious faith, and loss of confidence in self or others. There is consensus among international disaster experts and researchers that *Psychological*

First Aid can help alleviate these painful emotions and reduce further harm that can result from initial reactions to disasters. Please share this fact sheet with your disaster outreach colleagues.

hopelessness, helplessness, sleeplessness, physical

pain, anxiety, anger, grief, shock, aggressiveness,

Promote Self-Efficacy

- Give practical suggestions that steer people towards helping themselves.
- Engage people in meeting their own needs.

Promote Hope

- Find out the types and locations of government and non-government services and direct people to those services that are available.
- Remind people (if you know) that more help and services are on the way when they express fear or worry.

DON'T:

- Force people to share their stories with you, especially very personal details (this may decrease calmness in people who are not ready to share their experiences).
- Give simple reassurances like "everything will be OK" or "at least you survived" (statements like these tend to diminish calmness).
- Tell people what you think they should be feeling, thinking or doing now or how they should have acted earlier (this decreases self-efficacy).
- Tell people why you think they have suffered by alluding to personal behaviors or beliefs of victims (this also decreases self-efficacy).

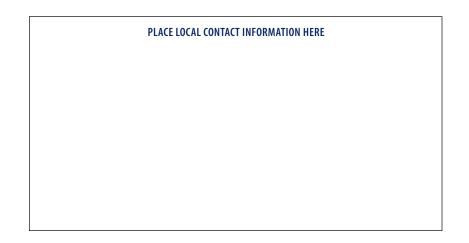


Don't, continued

- Make promises that may not be kept (un-kept promises decrease hope).
- Criticize existing services or relief activities in front of people in need of these services (this undermines an environment of hope and calm).



UN aerial photographs of Indonesia following the tsunami of 26 December, 2004. All photos courtesy of the United Nations.



COURAGE TO CARE is a new health promotion campaign of Uniformed Services University. Its purpose is two-fold: to provide quality health information reflecting our University's excellence in military medicine and to present it in a friendly, appealing format for immediate distribution for the health promotion needs in your community.



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