

PREVENTING FURTHER HARM: PRACTICAL INSIGHTS

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OFFICE OF
PREPAREDNESS
AND EMERGENCY
MANAGEMENT

OBJECTIVES

1. Understand that stress is a normal reaction to abnormal situations
2. Learn how to offer practical assistance and support in the immediate aftermath of disaster and terrorism
3. Become familiar with mental/behavioral health resources in the Commonwealth



ADVERSE REACTIONS TO A DISASTER

- **Physical:** Difficulty breathing, chest pain, elevated blood pressure
- **Emotional:** Fear, anxiety, anger, loneliness, sadness
- **Cognitive:** Difficulty concentrating or remembering things, limited attention span
- **Behavioral:** Isolating self from others, startling easily, sleeping problems,
- **Spiritual:** Crisis of faith, questioning basic religious beliefs, displaced anger



POST-TRAUMA REACTIONS VARY

Feeling overwhelmed, hopeless	GI issues
Experiencing anxiety, fear	Heart Palpitations
Anger, resentment	Appetite change
Insomnia, fatigue	Increased use of alcohol or other drugs
General confusion	Feeling guilty
Reduced attention span	Overly critical, blaming
Frantic or agitated	Shaking, trembling
Crying spells	Headaches
Hyperventilating	Withdrawal and isolation
Substance abuse	Questioning faith

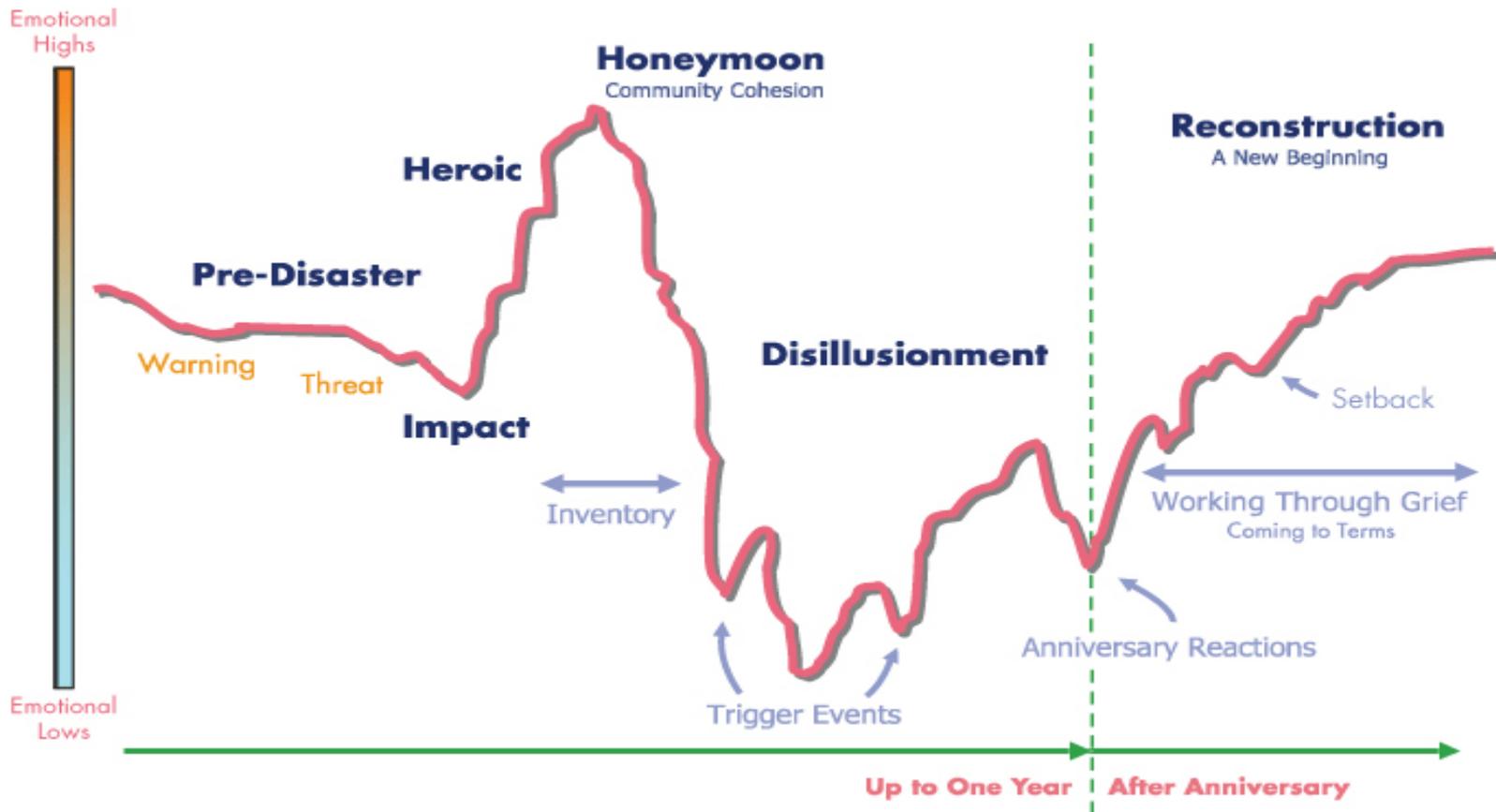


5 PHASES OF DISASTER REACTIONS

1. Warning or Threat: people may feel vulnerable, unsafe
2. Rescue: also known as the “heroic” phase, people are in the “fight-or-flight” mode
3. Honeymoon: people feeling thankful, empowered
4. Disillusionment: People begin to realize the true impact of the event
5. Reconstruction/recovery: People coming to terms with their circumstances and the recovery task they are facing



Transition to Recovery Focus



WHAT IS PSYCHOLOGICAL FIRST AID?

- PFA is:

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



PSYCHOLOGICAL FIRST AID DEFINED

- PFA consists of practices intended to provide comfort, care and support to those suffering from disaster-related stress
- Offered in the immediate aftermath of disaster
- It is designed to reduce the initial distress caused by traumatic events
- It can hopefully help mitigate any acute or long-term psychological harm
- Culturally informed and delivered in a flexible manner
- PFA can be done by anyone



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



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



CORE ACTION #2: SAFETY AND COMFORT

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



CORE ACTION #3: STABILIZATION

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



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



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



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



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



CORE ACTION #8: LINKAGE WITH COLLABORATIVE SERVICES

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



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



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



KEEP IN MIND....

- What type of disaster is it? Natural or human causes?
- Did people have any warning of the event?
- When did the event occur? Are families separated because it happened during the day time?
- Were there injuries? Deaths?
- How long will people be impacted?
- Are there enough first responders?



- Children may not understand. They only know that their loved ones are upset.
- Seniors may have vision, hearing or issues with being confused.
- Be sensitive to cultural and ethnical differences. Our style of grieving, reacting, and responding may be different from their style.
- For those who speak English as their 2nd language, they may revert to their primary language during times of stress.



- Attitudes towards authority figures may be shaped by past experiences.
- Have they experienced disasters in the past?
- If their financial resources are limited, this situation may be even more stressful.



REMEMBER

- Survivors react in a variety of ways
- Stress is a normal reaction to abnormal situations
- Do not force people to share their experience
- Give practical suggestions that promote self-efficacy
- Don't make assumptions about what survivors are experiencing
- Additional mental health support and services can be accessed, if needed
- Anniversary dates can “trigger” stress



RESPONDERS AND RESILIENCY

○ Possible First Responder Reactions

- Unrelenting fatigue
- Pace change
- Cynicism
- Dissatisfaction with routine work

***Online Training & Info**

“Dealing with Stress in Disasters: Building Psychological Resilience”

www.masslocalinstitute.org

○ Self-Care

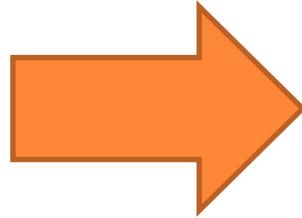
- Be aware of signs of stress
- Get in a routine
- Maintain a healthy diet and exercise regimen
- Maintain social connections
- Take time off
- Practice relaxation techniques



Disaster Behavioral Health Pre-Planning

Massachusetts Disaster Behavioral Health Committee

- Coordinated by MA Department of Mental Health & Department of Public Health
- Share information, lessons learned, and trainings



MassSupport Network

- Behavioral Health Partnership for Disasters
- Behavioral Health Response Guidance, SOPs, Mutual Aid
- Goal:
 - Address immediate needs (0 – 15 days)
 - Encourage referrals to community-based organizations and traditional providers (16+ days)

*Committee Co-chairs:

Louise Carcione, DMH

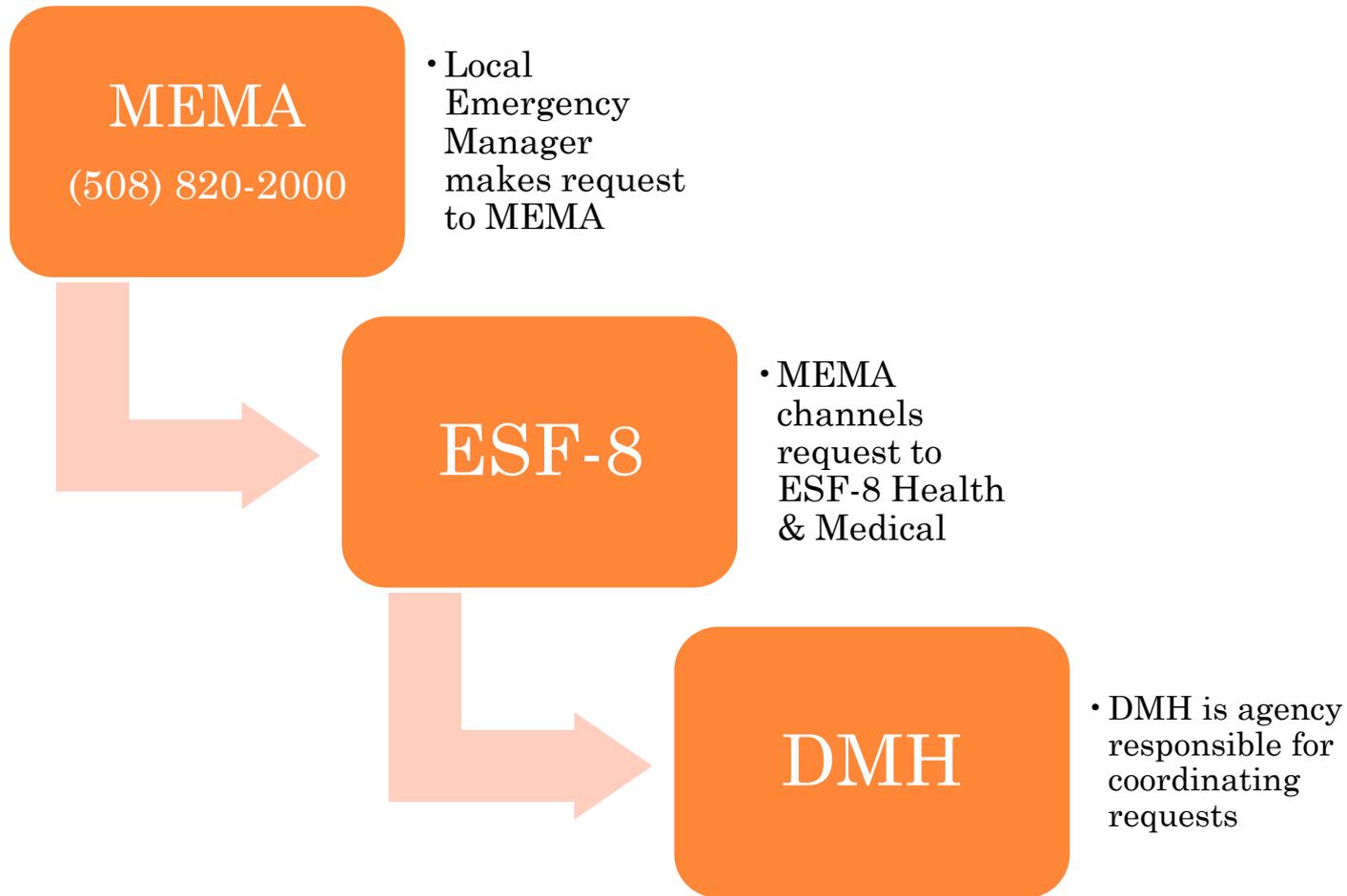
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REQUESTING DISASTER BEHAVIORAL HEALTH RESOURCES



WHO MAY SUPPORT YOUR RESPONSE

- Community Behavioral Health Providers
 - Medical Reserve Corps
 - School Counselors and Nurses
 - Community Health Centers
 - Pastoral Council
- State, Regional, and Non-Governmental Behavioral Health Providers
 - DMH “A-Teams”
 - Contracted Behavioral Health/Trauma Providers
 - Medical Reserve Corps/MA Responds
 - Emergency Services Teams
 - Peer Support Network
 - American Red Cross
 - Salvation Army



RESOURCES

○ Hotlines

- SAMHSA Disaster Distress Hotline, 24/7 1-800-985-5990 or text “TalkWithUs” to 66746
- MA 2-1-1, Information and referrals, Dial 211 or visit www.mass211.org
- Samaritans 24-hour hotline 1-800-252-8336

○ Printed Materials

- SAMHSA Disaster Distress, <http://disasterdistress.samhsa.gov/>
- PFA Field Manual: <http://www.nctsn.org/content/psychological-first-aid>

○ Smartphone Apps

- SAMHSA Behavioral Health Disaster Response App
- Search the Apple and Google stores for more



RESOURCES

- Volunteers and Personnel:
 - American Red Cross-Disaster Mental Health services: 1-800-564-1234, www.redcross.org/massachusetts
 - Salvation Army: www.SalvationArmyMA.org
 - MA Responds: www.maresponds.org
 - Massachusetts Medical Reserve Corps: <http://www.mamedicalreservecorps.org/>
 - Massachusetts Behavioral Health Partnership: 1-877-382-1609, www.masspartnership.com
 - Employee Assistance Programs (EAP)
- For Victims of Traumatic/Intentional Events
 - MA Office of Victim Assistance(MOVA): 617-586-1340, www.mass.gov/mova



PFA & RESILIENCY TRAININGS

○ Online

- “Dealing with Stress in Disasters: Building Psychological Resilience” www.masslocalinstitute.org
- “PFA Online,” 6-hour, interactive course
<http://learn.nctsn.org/course/index.php?categoryid=11>
- NACCHO 3 Modules, with closed caption features.
http://pfa.naccho.org/pfa/pfa_start.html

○ Classroom

- Disaster Mental Health Training (American Red Cross)
- Post Traumatic Stress Management/Psychological First Aid (Riverside Trauma Center; fee for training)
<http://www.riversidetraumacenter.org/trainings.html>



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