



The Center for the Study of Traumatic Stress (CSTS) is part of the Department of Psychiatry, Uniformed Services University of the Health Sciences

PSYCHOLOGICAL FIRST AID: *How You Can Support Well-Being in Disaster Victims*

People often experience strong and unpleasant emotional and physical responses to disasters. Reactions may include combinations of confusion, fear, hopelessness, helplessness, sleeplessness, physical pain, anxiety, anger, grief, shock, aggressiveness, 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 painful emotions and reduce further harm from initial reactions to disasters. Your actions and interactions with others can help provide psychosocial first aid to people in distress. Psychological first aid creates and sustains an environment of (1) safety, (2) calming, (3) connectedness to others, (4) self efficacy—or empowerment, and (5) hopefulness.

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PSYCHOLOGICAL FIRST AID

DO:

- Do help people meet basic needs for food & shelter, and obtain emergency medical attention. Provide repeated, simple and accurate information on how to obtain these. (safety)
- Do listen to people who wish to share their stories and emotions and remember there is no wrong or right way to feel (calming).
- Do be friendly and compassionate even if people are being difficult (calming).
- Do provide accurate information about the disaster or trauma and the relief efforts. This will help people to understand the situation (calming).
- Do help people contact friends or loved ones (connectedness).

- Do keep families together. Keep children with parents or other close relatives whenever possible. (connectedness)
- Do give practical suggestions that steer people towards helping themselves (self-efficacy).
- Do engage people in meeting their own needs (self-efficacy).

- Do find out the types and locations of government and non-government services and direct people to services that are available (hopefulness).
- If you know that more help and services are on the way do remind people of this when they express fear or worry (hopefulness)

DON'T:

- 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).
- Don't give simple reassurances like “everything will be ok” or “at least you survived” (statements like these tend to diminish calmness).
- Don't tell people what you think they should be feeling, thinking or doing now or how they should have acted earlier (this decreases self-efficacy).
- Don't tell people why you think they have suffered by giving reasons about their personal behaviors or beliefs (this also decreases self-efficacy).
- Don't make promises that may not be kept (un-kept promises decrease hope).
- Don't criticise existing services or relief activities in front of people in need of these services (this may decrease hopefulness or decrease calming).

