



Psychological First Aid: Increasing Resiliency of Healthcare Workers During COVID-19

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Trauma Recovery Innovations

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ACKNOWLEDGMENTS

> Adapted from:

- World Health Organization *Psychological First Aid: Guide for Field Workers* and *Psychological First Aid Adapted for the Ebola Outbreak*
- National Child Traumatic Stress Network *PFA Manual, 2nd edition*
- Materials developed by Dr. Debra Kaysen, Stanford University

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- Department of Psychiatry and Behavioral Sciences
- UW COVID-19 Mental Health Working Group
- Mollie Forrester, Rebecca Sladek, Rosemary Whitright

TRAINING OBJECTIVES: WHY, WHAT, WHEN, WHO, & HOW OF PSYCHOLOGICAL FIRST AID (PFA)

- > **WHY:** The need for resilience training following a pandemic
- > **WHAT:** The foundations of PFA, what it is and is not
- > **WHEN:** The timing of PFA delivery
- > **WHO:** Identifying those who are most likely to benefit from PFA
- > **HOW:** Delivery of PFA, strategies and tips

PFA: THE WHY

Resilience is the process of adapting well in the face of adversity or significant sources of stress



- Resilience is ordinary & common, not extraordinary.
- Being resilient does not mean the absence of difficulty or distress.
- Resilience is not a trait -- it can be learned and acquired.

RESILIENCE ISN'T ONE SIZE FITS ALL



SITUATIONAL RISK FACTORS

General Risk Factor	Pandemic Examples Of High-Risk Health Care Workers
Severity of Event	Those working directly on COVID units, the ER, or ICU Those who have observed patients die Those with possible exposure themselves Those who develop active infections
Life Stress	Those with loved ones who are ill or vulnerable Those with numerous competing demands (childcare, financial concerns)
Social Support	Those with limited contact with supportive loved ones Those with partners who are limited in their ability to provide support due to their own life demands Those with loved ones who are negatively judging response to pandemic

PRE-EXISTING RISK FACTORS

General Risk Factor	Pandemic Examples Of High-Risk Health Care Workers
Previous Experiences	Those who have past trauma exposure, especially those who continue to struggle from that exposure
Mental health problems	Those with prior or ongoing mental health problems (example: depression, anxiety, PTSD, substance use problems)
Maladaptive coping strategies	Those with prior or ongoing maladaptive coping strategies (example: using alcohol or other substances to cope)

WHAT HAPPENS DURING THE ACUTE AND CHRONIC STRESS PHASES MATTERS FOR WHO RECOVERS



PFA: THE WHAT

Psychological First Aid (PFA) is a humane, supportive response to someone suffering



Acute intervention to reduce initial distress caused by traumatic events



Evidence informed



Increase sense of safety, connection, calmness, and hope



Increase access to social, physical and emotional support



Increase self-efficacy

PFA CORE THEMES: Provide practical care and support, which does not intrude



PFA differs from traditional treatment

- PFA is not therapy
- It will not look like your standard therapy setting or structure
- It will not be the time or place to offer interpretations, do exposure, or dig into past learning experiences
- It is NOT psychological debriefing

General PFA guidelines



Operate within a framework of an **organized response system (part of a team)**



Maintain **confidentiality**



Respect their **right to make their own well-informed decisions**



Be **culturally sensitive** and aware



Remain within **scope of your expertise, role, and training**



Practice self-care and be aware of your own physical and emotional reactions

PFA: THE WHEN

PFA CAN BE DELIVERED

- ✓ **During** a mass disaster
- ✓ In the **immediate** aftermath

**PFA can serve as a framework for the
support calls provided by PBSCI's COVID
Support Program**

PFA: THE WHO

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PFA DOES NOT REQUIRE A MENTAL HEALTH SPECIALIST FOR DELIVERY AND CAN BE HELPFUL TO RANGE OF INDIVIDUALS

Providers

Do not need to have a mental health background

Do need to be trained in PFA

Do need to have met their own needs first

Recipients

Do need to express interest in support and/or stabilization

Are often those at higher risk for developing negative outcomes due to proximity to crisis and/or other risk factors

There may be situations when someone needs more advanced mental health support



Know your limits



Know when and where to refer

HOW MIGHT COVID-19 AFFECT HEALTHCARE WORKERS?

Front Lines Healthcare Workers

- High workload and increased stress
- Possible loss of coworkers
- Anxiety about their coworkers, patients, and families
- Distress about decisions about prioritizing & allocating care

PFA: THE HOW

PFA is comprised of 8 core actions that are:



Not necessarily sequential



Flexible



Based on the person's specific needs and concerns

PFA has 8 core actions:



1. Contact and engagement



2. SAFETY AND COMFORT



3. STABILIZATION



4. Information gathering



5. Practical assistance



6. LINKS TO SOCIAL SUPPORTS



7. INFORMATION ON COPING



8. LINKS TO SERVICES

PFA CORE ACTIONS:

1. CONTACT & ENGAGEMENT

2. SUPPORT SAFETY AND COMFORT

GOALS:

- Build rapport
- Support and enhance emotional and physical safety
- COVID-19 context
 - Concerns about safety and wellbeing of self, loved ones, patients, & coworkers

PFA: Good Communication in Crisis



Be calm and show understanding to help individuals in distress feel more safe and secure, understood, respected and cared for appropriately



Focus on what they want to tell you and how you can be of help



Allow some silence to give the person space and encourage them to share with you if they wish

Use **simple, concrete terms** without jargon

Acknowledge what they have done already to take care of themselves and others

PRO-TIP: RESPONDING TO STRONG EMOTIONS

Sit with emotions	Validate emotions
Provide a safe place for individual to grieve	Remind them there is no single or correct way to grieve
Let them tell you what they feel and need	Acknowledge they will probably continue to feel different emotions for a while
Remain calm , control your emotions, and don't rush things	Expect widely varying reactions to grief and do not judge
Remember: You can't take away their pain and you don't need to	Help support parents and caregivers about how to talk to their children about death

PRO-TIP: RESPONDING TO ACUTE GRIEF DURING COVID-19

Typical grief processes, rituals, and supports are interrupted

Acknowledge potential departures from

- Cultural, religious, and/or spiritual rituals
- One's own or loved one's wishes

Help them identify

- Achievable rituals
- Ways to engage virtual supports and comfort

PFA CORE ACTION

3. Stabilization

Goal:

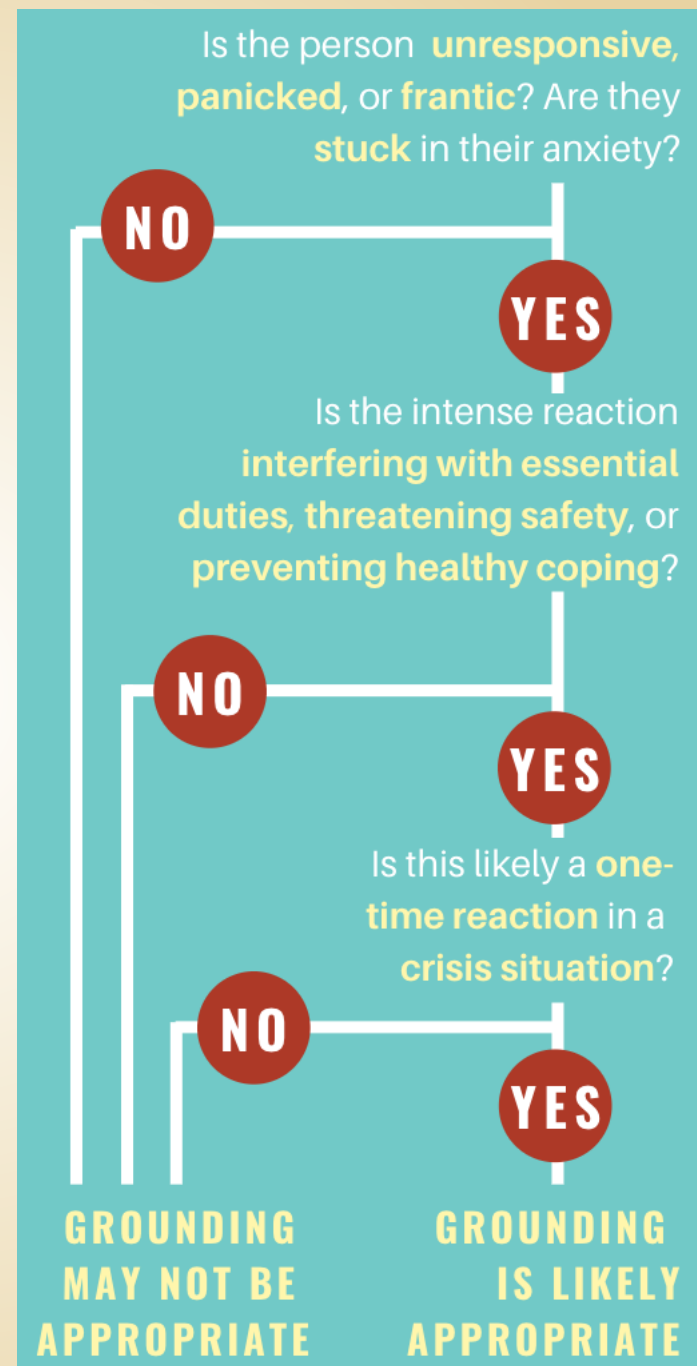
To calm and orient
emotionally
overwhelmed/
disoriented survivors

- Not all individuals will need stabilization
- Pay attention to individuals whose reactions are so **intense and persistent** that it is impacting their **ability to function**

PRO-TIP FOR STABILIZATION: WHEN TO USE GROUNDING



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PRO-TIP FOR STABILIZATION: HOW TO USE GROUNDING



Sit comfortably and **breathe** slowly and deeply

1

Name 5 non-distressing things you can **see**.



Pause and **breathe**.

2

Name 5 non-distressing sounds you can **hear**.



Pause and **breathe**.

3

Name 5 non-distressing things you can **feel**.



Pause and **breathe**.

PFA CORE ACTIONS:

4. Information Gathering

5. Practical Assistance

Goals:

- 1) Identify immediate needs & concerns, gather information, & prioritize**
- 2) Clarify needs & develop action plan**

PRO-TIPS

- PFA **is not** one-size fits all
- Use active listening skills
- Prioritization should be collaborative
- Know what resources are available and/or know how to find out

PRO-TIP: PROBLEM SOLVING FOR MAKING A PLAN



PFA CORE ACTION:

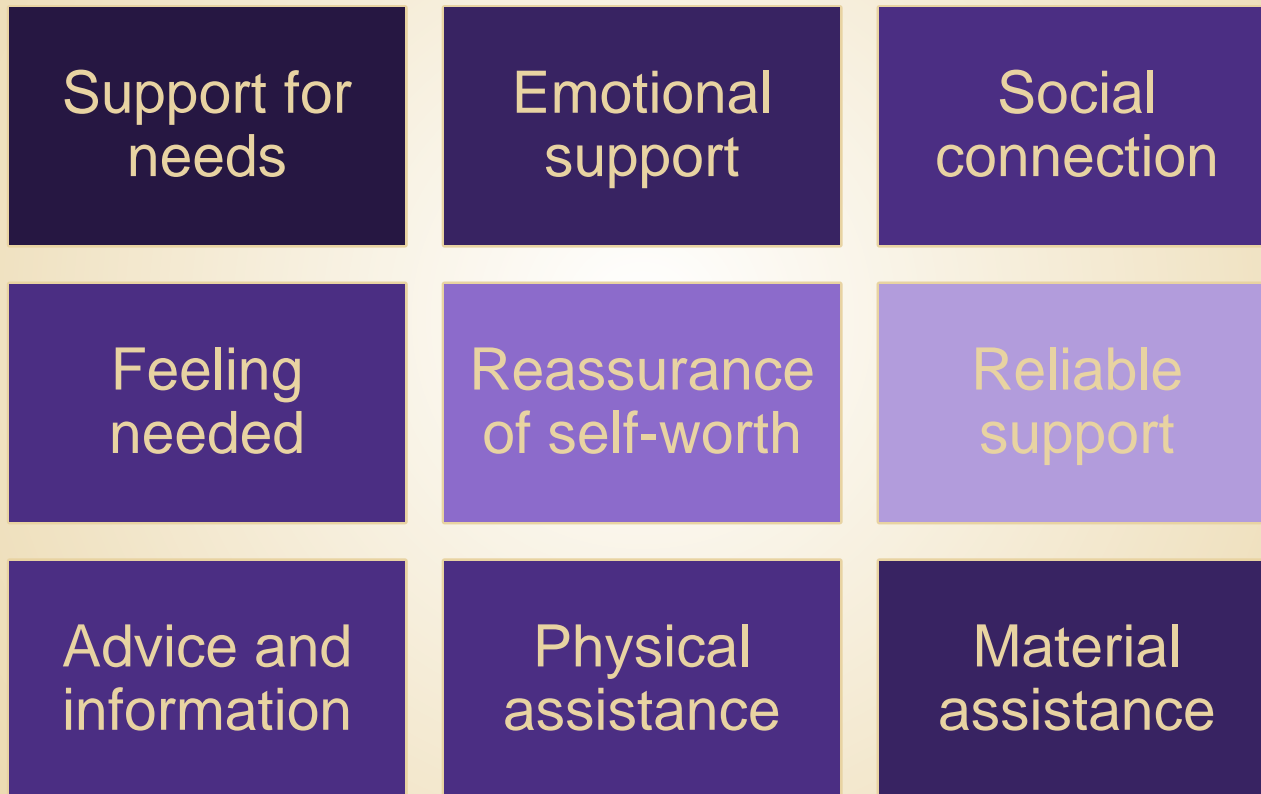
6. Connection with Social Supports

Goal:

Links to Social
Supports

- Help establish brief or ongoing contacts with primary support persons and other sources of support
 - *family*
 - *friends*
 - *community*

PRO-TIP: SOCIAL SUPPORT HAS MANY FORMS



PFA CORE ACTION

7. Coping

Goals:

Provide information about

- stress reactions
- practical ways to cope, reduce stress, and promote adaptive functioning

REMEMBER: Any information you provide and skills you introduce or teach will be tailored to the individual's concerns and priorities

PRO-TIP: Common Stress Reactions

Intrusive Reactions

- ways the event comes back to mind

Avoidance

- attempts to remove themselves from or protect themselves from distress

Physical Arousal

- The body reacts as if danger is still present

Grief

- Response to death of loved ones

Depressive Symptoms

- Sleep problems, fatigue, worthlessness/guilt, suicidality

Physical Reactions

- Headaches, dizziness, muscle aches, rapid heartbeat, hyperventilation

PRO-TIP: Normalize & Develop a Plan for Common Stress Reactions

- These reactions are **natural, expected, and common**
- Develop a plan to manage reminders of traumatic events, losses, & life changes

It may be time to get more help
if they:



continue
more than 2
months

worsen and
impair
functioning

PRO-TIP: Identify existing coping strategies and potential new coping strategies

Talking to others

Positive
distracting
activities

Resting and
eating healthy
meals

Keeping a normal
schedule

Taking regular
breaks

Using humor

Scheduling
pleasant activities

Focusing on
something
practical you can
do right now

Using relaxation
methods

Engaging in
support
groups/counseling

Exercising

Journaling

PRO-TIP: Addressing Sleep

Establish

a regular sleep schedule and limit daytime naps

Reduce

alcohol

Eliminate

afternoon/evening caffeine

Increase

regular exercise

Cultivate

relaxation before bedtime by doing something calming

PRO-TIP: Addressing Problematic Substance Use

Ask them about the positives and negatives of using substances to cope

- Together, identify alternatives for use

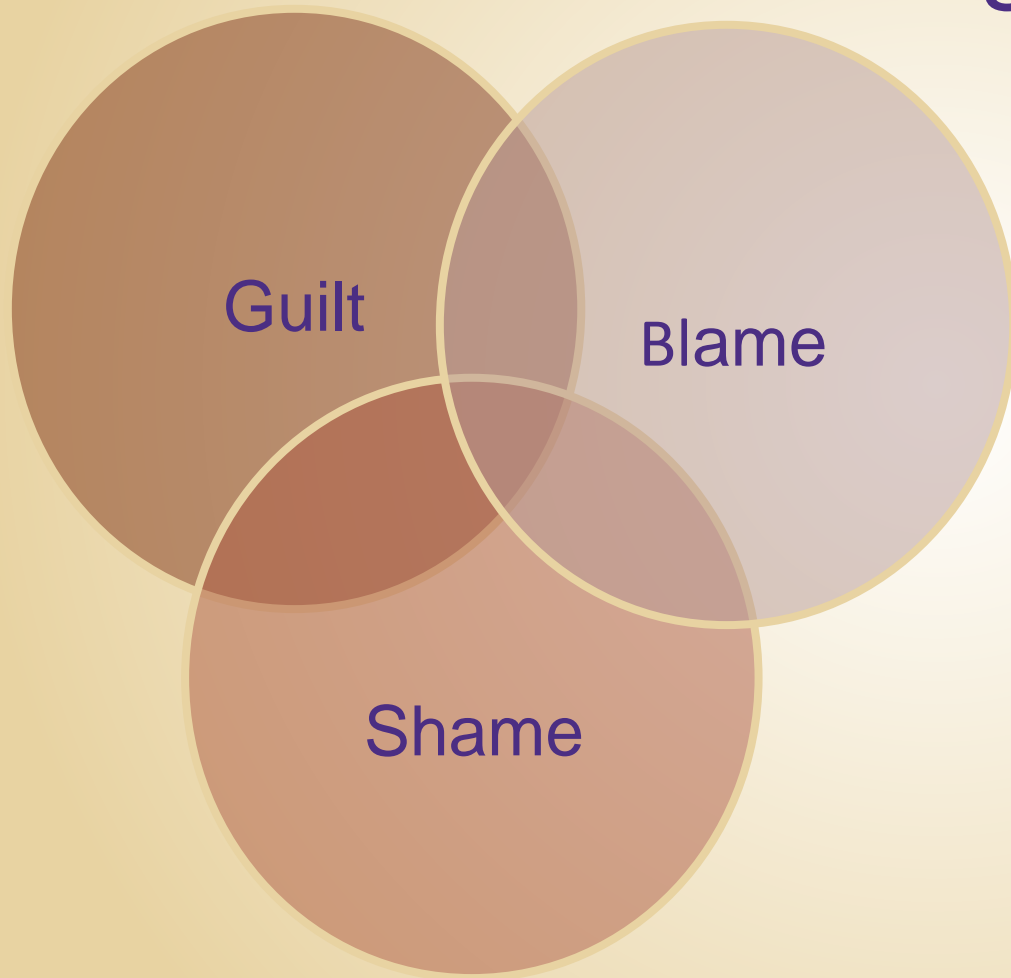
Discuss

- their goals for use
- difficulties in changing use

Refer for treatment

- if appropriate and desired by them

PRO-TIP: Addressing Unhelpful Thoughts



Gentle, curious questions can help address unhelpful thoughts and the strong emotions linked to them:

- What would your kindest self say about this?
- What are other ways to look at this situation?

PFA CORE ACTION

8. Link with other services

Key Action:

Connect

- to additional resources or services to address current needs **as needed**

Know

- what is available
- how to connect them to services (or who to ask)

Collaborate

- to identify what they need

Offer

- to follow up and check-in

PFA is a Framework for Building Resilience: Apply as Self-Care



General Resources & References

Detailed PFA training

<https://learn.nctsn.org/course/index.php?categoryid=11>

PFA skills
training manual

https://www.ptsd.va.gov/professional/treat/type/SR/SPR_Manual.pdf

The PFA Mobile
App

<https://mobile.va.gov/app/pfa-mobile>

PTSD Coach

<https://www.ptsd.va.gov/apps/ptsdcoachonline/default.html>

<https://mobile.va.gov/app/ptsd-coach>

UW Specific Resources

COVID Support
Program

Consult Office
Hour

Monday 9-10am
Details to follow via email

Psychiatry Dept
Website

<https://psychiatry.uw.edu/clinical-care-consultation/covid-19-resources-for-mental-well-being/>

PSYCHOLOGICAL FIRST AID

FOR THOSE AFFECTED BY THE COVID-19 PANDEMIC

It's normal for people affected by a pandemic to have a wide range of reactions, but not all will develop long-term problems.

People supporting those affected by a pandemic can play a key role in promoting their resilience and emotional healing.



COMMUNICATE CALM, COMPASSION, AND RESPECT

through what you do, what you say, and how you say it. Don't rush; meet them where they are.



LISTEN TO PEOPLE WHO WANT TO SHARE

without pressuring them to share. There is no right or wrong way to feel or react.



GIVE ACCURATE INFORMATION

without giving false promises or reassurances, like "it will be OK" or "at least things aren't worse."



HELP PEOPLE COPE IN HEALTHY WAYS

such as prioritizing and focusing on what's in their control, and identifying and using existing coping skills.



CONNECT PEOPLE WITH SERVICES & SOCIAL SUPPORTS

that are tailored to what they need. Assess what they need rather than making assumptions.

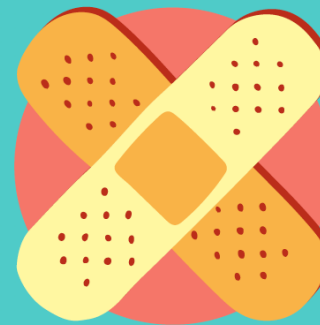


TEACH SHORT-TERM WAYS TO MANAGE STRONG EMOTIONS

like grounding or deep breathing, if emotions interfere with functioning or prevent healthy coping.

GROUNDING

A SHORT-TERM COPING SKILL FOR INTENSE REACTIONS



IS GROUNDING APPROPRIATE?

Is the person **unresponsive, panicked, or frantic**? Are they **stuck** in their anxiety?

NO

YES

Is the intense reaction **interfering with essential duties, threatening safety, or preventing healthy coping**?

NO

YES

Is this likely a **one-time reaction** in a **crisis situation**?

NO

YES

**GROUNDING
MAY NOT BE
APPROPRIATE**

**GROUNDING
IS LIKELY
APPROPRIATE**

HOW TO PRACTICE GROUNDING



Sit comfortably and **breathe** slowly and deeply into your belly.

1

Name 5 non-distressing things you can **see** around you.



Pause and **breathe**.

2

Name 5 non-distressing sounds you can **hear** around you.



Pause and **breathe**.

3

Name 5 non-distressing things you can **feel** against your skin.

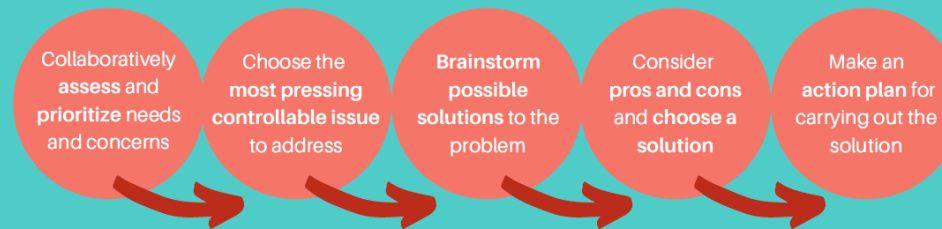


Pause and **breathe**.

HELPING PEOPLE COPE IN HEALTHY WAYS



Use a problem-solving approach to define the problem and make a coping plan.



HEALTHY COPING IS...

Consistently meeting basic needs for sleep, nutrition, and health

Reaching out to others and finding ways to connect, even at a distance

Expressing your feelings (e.g., journaling, crying, talking to supportive people)

Doing daily activities that give a sense of pleasure or achievement (e.g., exercise)

Trying to **maintain a normal schedule** as much as possible, or creating a new routine

Using calming and compassionate **self-talk**

Focusing on things you can control and what you can do about those things

...RATHER THAN

Sleeping, eating, or taking medicine **inconsistently** or on an **irregular schedule**

Withdrawing from family and friends or waiting for others to reach out to you

Suppressing negative feelings, including with drugs or alcohol

Withdrawing from activities or focusing only on activities that aren't possible at the moment

Working too many hours or **avoiding responsibilities**

Using **negative self-talk** or treating worries like they're facts

Ruminating about things you can't control or hypothetical situations

PSYCHOLOGICAL FIRST AID

FOR THE
COVID-19
PANDEMIC

Psychological First Aid is a strategy for promoting resilience and well-being in a crisis. This document is intended to serve as a quick reference guide for individuals conducting peer support calls with healthcare workers at UW.



4 ADDRESS SPECIFIC NEEDS

- If the person is overwhelmed by many different issues

PROVIDE PRACTICAL ASSISTANCE



Collaboratively prioritize needs and concerns, select an issue to focus on, develop an action plan

- If the person shares negative emotions or thoughts



LISTEN AND PROVIDE COMFORT

Use active listening, sit with and validate emotions, ask gentle and curious questions about negative thoughts

- If the person is having a serious distress reaction that interferes with duties, risks safety, or prevents coping



PROVIDE STABILIZATION

With permission, teach short-term coping strategies like grounding or deep breathing

5 PROVIDE COPING INFORMATION & REFERRALS



- Provide basic information about common stress reactions (e.g., intrusive thoughts, avoidance, bodily symptoms, strong negative emotions)



- Work together to identify the person's existing helpful coping strategies and provide information about potential new coping strategies



- Provide referrals and other appropriate links to services if needed (e.g., UW CareLink)
- Encourage brief, ongoing contacts with social supports

6 WRAP UP

- Summarize key take-aways and next steps
- Offer a follow-up if indicated

1 SETUP

- Identify a private place
- Use the HIPAA-compliant version of Zoom, if conducting a video call

2 CONTACT & ENGAGEMENT

- Introduce yourself and your organizational affiliation
- Confirm that person is in a private setting
- Orient to the purpose of the contact (i.e., providing supportive listening and/or practical coping skills and resources, not therapy or a crisis line)
- Set a time expectation
 - Build rapport and communicate calm, respect, and compassion

3 GATHER INFORMATION

- Collaboratively assess needs and priorities without making assumptions

DO • DON'T

- | | |
|--|---|
| Collaboratively assess needs and priorities | Make assumptions about their needs or priorities |
| Meet them where they are | Pressure them into sharing details of their story |
| Share concrete, simple, factual information | Make false promises or reassurances, use jargon |
| Communicate calm, compassion, and respect | Rush the person or talk about your own troubles |
| Take the person's culture into account | Assume their worldview or way of coping is the same as yours |
| Acknowledge strengths | Judge their reactions, focus only on problems |
| Be aware of the limitations of your role | Think or act as if you need to solve all of their problems |
| Sit with and acknowledge difficult emotions | Try to take their pain away or cheer them up |

HOW TO PRACTICE GROUNDING

- Sit comfortably and **breathe** slowly and deeply
- 1 Name 5 non-distressing things you can **see**.
- 2 Pause and **breathe**.
- 2 Name 5 non-distressing sounds you can **hear**.
- 3 Pause and **breathe**.
- 3 Name 5 non-distressing things you can **feel**.
- 4 Pause and **breathe**.

ENHANCING COPING

- Collaboratively **assess** and **prioritize** needs and concerns
- Choose the **most pressing** controllable issue to address
- Brainstorm possible **solutions** to the problem
- Consider **pros and cons** and choose a **solution**
- Make an **action plan** for carrying out the solution



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Is this likely a one-time reaction in a crisis?

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HEALTHY COPING IS... ..RATHER THAN

- | | |
|--|---|
| Consistently meeting basic needs for sleep, nutrition, and health | Sleeping, eating, or taking medicine inconsistently |
| Reaching out to others and finding ways to connect, even at a distance | Withdrawing from family and friends or waiting for others to reach out |
| Expressing feelings (e.g., journaling, crying, talking to supportive people) | Suppressing negative feelings, including with drugs or alcohol |
| Doing daily activities that give a sense of pleasure or achievement (e.g., exercise) | Withdrawing from activities or focusing on activities that aren't possible |
| Maintaining a normal schedule when possible, or creating a new routine | Working too many hours or avoiding responsibilities |
| Using calming and compassionate self-talk | Using negative self-talk or treating worries like they're facts |
| Focusing on what you can control and what you can do about those things | Ruminating about things you can't control or hypothetical situations |

**Please complete the
evaluation survey!**

<http://tiny.cc/4ugrmz>