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Disaster Psychology

Psychological first aid is not therapy; rather, it is a set of techniques to provide emotional intervention during field operations. It can help to manage one's personal situation, including fellow MCC members. Working together and looking out for each other are important aspects of successful MCC teams. Being able to work within the framework of an organization and also have the emotional connection to a team, helps many go through traumatic events. Helping during a disaster allows incorporates the volunteer into the disaster. You also can feel the pain of fear, anger, sadness, frustration, and grief.

It is possible to over-identify with survivors, taking on survivors' feelings as your own, which can affect your ability to do the job as a rescuer. Knowing some steps to take to alleviate stress is important. Also, "vicarious trauma" is a hazard for rescuers. This is also called compassion fatigue or secondary traumatic stress. So, labeling the primary responses to stress helps understanding of where to start to reduce stress.

The Five F's

There are **five primary responses to stress**:

- Freeze
- Flight
- Fight
- Fright
- Faint

Our bodies have both physical and psychological responses to stressful events. Being able to recognize these responses in survivors and volunteers can assist you in knowing how best to provide support.

Possible Psychological Symptoms

Emotional: nervousness, helplessness, shock, numbness, apathy, abandonment, agitation, detachment, feeling of being unreal, out of control, denial, overwhelmed, fragility, exhilaration.

Mental: indecision, disturbing dreams, memories and flashbacks, constant alertness, dissociation, distortion of time or space, racing thoughts, continual replay of events.

Spiritual: loss of hope, intense prayer, loss of self-efficacy, despair, disillusionment, questioning, redefining the meaning of life, limited expectations about life.

Possible Physical Symptoms

- Loss of appetite
- Headaches
- Chest pain
- Diarrhea, stomach pain, nausea
- Hyperactivity
- Nightmares
- Insomnia
- Fatigue, listlessness
- Alcohol or drug dependence

Self-Care and Team Well-Being

One step in dealing with the onslaught of changing emotions during a disaster event is knowing that it happens. This is where you want make an effort to reduce the stress effects on your own life. Simple preventative steps are as follows:

- Get enough sleep
- Exercise regularly
- Eat a balanced diet
- Drink water
- Balance work, play, rest
- Allow to receive help as well as give
- Connect with others
- Use spiritual resources

It is important to the team that they take time to regroup, rest, eat, and pray together. Working in a disaster event can have a great impact on the psychological well-being of everyone. Accept that verbalization of events may important to some members, and less to others. Drinking caffeinated or sugar laden beverages tends to diminish the brains ability of discernment and judgment. Rotate the teams from high stress roles to less stress roles to decompress gradually before they are to return home. Talk about the event and how they respond to it at the end of their shifts.

Working with Survivors' Emotional Responses

There are many emotional phases a crisis survivor is likely to experience. Additionally, evacuation of family members or causing a separation adds to the emotional disruptions. Individuals and communities process through phases at different rates. The rescuer may be the on the receiving end of some of these emotions, good or bad.

Pre-Disaster Phase:

Sometimes warning that an event will happen is given; other times can be an unexpected, immediate event. Without a warning, survivors may feel more unsafe, vulnerable, and fearful of the future. Also, if there is a warning which is unheeded, and a loss is suffered, feelings of guilt can be overwhelming.

Impact Phase:

Disasters can be quick like tornados or slow like hurricanes. The greater the scope of destruction, the greater the psychosocial effects. Survivors tend to focus on themselves and their loved ones. Anxiety can be intense if family members are separated.

Heroic Phase:

In the immediate aftermath of a disaster, there can be elevated activity levels, while actual productivity is low. There may be post-impact disorientation. Evacuations are occurring here also. Altruism is prominent in both survivors and rescuers.

Honeymoon Phase:

In the weeks and months after a disaster, many government and volunteer groups are assisting. There can be a spurt of optimism. Behavioral health workers are visible and seen as being helpful so that the community can return to normal.

Disillusionment Phase:

Disappointment is a slower than desired pace of recovery can trigger this phase. Often this is after the first anniversary of the disaster.

Reconstruction Phase:

The reconstruction of physical property and recovery of emotional well-being may continue for years following a disaster. Survivors realize that they need to solve their own problems gradually take responsibility for rebuilding on their own. There is a new recognition of the losses incurred. Emotional and social support may be worn thin. With recognition of the life changing event, comes progress to new strengths and priorities.

Traumatic Crisis

A traumatic crisis is an event experienced or witnessed in which people's ability to cope is overwhelmed. There are several factors which contribute to a crisis.

- Death, injury to self or others
- Serious injury
- Destruction of home, neighborhood, possessions
- Loss of contact with family, friends

This crisis can affect cognitive function. People may act out of character; they may have trouble making decisions. The stress can bring on new health problems itself. Personality changes can occur, either short or long term. This makes older relationships stressed.

MCC members cannot know, and should not assume to know, what someone is thinking or feeling. Do not take survivors' surface attitudes personally. The survivor may not be responding to the rescuer, rather the overlay of all the other emotions they are dealing with now.

The goal of the MCC member is to remain calm, calm the scene by stabilizing individuals as possible.

Listen, Protect, Connect

Psychological First Aid is an evidence informed approach to assist people in a disaster's aftermath. This is how you provide initial support to survivors.

Listen:

The first important step to help is to listen and pay attention to what they say and how they say it, how they act, and what they need right now. If they are not ready to talk, tell them "okay" and come back on a regular basis to see if that reaction has changed. Listen for the meaning, not just the words.

Protect:

This is step two. The survivor needs to feel protected from the added stress. By providing information, answering questions, empathizing, letting them talk is reinforcing the idea that you are there to help them. Watch for environment stressors that could re-traumatize them. Help them decide what their basic needs are and how to find solutions.

Connect:

Help the survivor contact friends, loved ones, or other resources will have a positive impact on recovery. Paraphrasing periodically to make sure that he is understood is a useful tool.

Refer a case to EMS or Mental Health quickly when the survivors are showing signs of being suicidal, psychotic, or unable to care for themselves.

DO NOT USE THE FOLLOWING LINGO:

- I understand
- Don't feel bad
- You're strong
- Don't cry
- It is Gods will
- It could be worse
- It will be okay.

Instead, try I'm sorry for your pain. What do you need? I can't imagine what this is like for you. Is it all right if I help you with...

Managing a death scene

You may not pronounce a victim as being dead. But you may treat the body as being dead by:

- Cover the body. Treat it with respect.
- Follow local laws and protocols for handling the deceased.
- Talk with local authorities to determine the plan.

Spiritual Resources

Find a small transportable Bible to take with you. A paper copy does not need batteries or charging to be usable. Mark your Bible with Bible studies that you think may be helpful to you. For instance, State of Dead, Second coming of Jesus, Salvation by believing in Jesus.

Write Notes in the blank pages of favorite verses, promises, or quotations.

- Troubles hit your life:
- Nahum 1:7 The Lord is good, a stronghold in the day of trouble; and He knows them that trust in Him.
- 2Corth 4:8,9
- John 14:1
- Ps 138:7
- Is 43:2
- Ps 121:2
- 1 Pet 5:7
- Is 51:11

Reading books like Christian Service and Medical Ministry by Ellen White, it is likely to find many quotations that can be helpful later. Write these in your Bible.

Don't be afraid to give away your Bible if someone needs it. A pre-marked Bible full of studies is a treasure. Some members will take a second small Bible to be able to give away one as the Lord leads.

Exercise

1. Gather into your teams. Review the most meaningful content covered to your team members. Discuss your favorite Bible stories and texts.

2. Working in teams, practice approaching a survivor and initiating a conversation. Describe how this is part of a Head to toe assessment.

3. What would be your favorite book to take with you on deployment?

4. Is memorizing scripture of value for today's times. Will people listen to your quoting or reading it to them?

Disaster Psychology

For course certification, the form must be filled out.

Member Name (Print) _____

Instructor Name (Print) _____

Member Position Number _____

Instructor Position Number _____

Member FEMA SID _____

Instructor FEMA SID _____

Date of Instruction _____



Recognize Five F's of responses to trauma.



Describe some of the physical and psychological signs and symptoms of survivors..



Know methods to reduce your stress before you deploy.



List the Phases the survivors go through in time regarding the disaster as a psychological event. .

_____ Mark a Bible for your use on Deployment.

With a complete sheet of initials, the instructor's signature signifies certification of completion for the Disaster Psychology course.

Instructor Signature _____