AMERICAN GROUP PSYCHOTHERAPY ASSOCIATION, INC.
Toll Free: (877) 668-AGPA (2472) Fax: (212) 979-6627
E-mail: dfeirman@agpa.org Website: www.agpa.org

Notes on the Use of Psychological First Aid

Suzanne B. Phillips Psy. D.,ABPP,CGP
Dianne Kane DSW, CGP

American Group Psychotherapy Association (AGPA)

What is Psychological First Aid?

"A supportive and compassionate presence designed to reduce acute psychological distress and/or facilitate continued support, if necessary."

Everly, & Flynn (2005)

Consensus on Best Practices: U.S Departments of Health and Human Services, Defense, Veterans Affairs, Justice and American Red Cross.

"In the first hours after a disaster, at least 25% of the population may be stunned and dazed, apathetic and wandering- suffering from the disaster syndrome- especially if impact has been sudden and totally devastating…At this point, psychological first aid and triage…are necessary…"

(Raphael,1986, p.257)

When Do You Use Psychological First Aid?

- **Psychological First Aid is an endorsed intervention for the acute stage of trauma when medical needs, basic needs(food, water, shelter) and restoration of safety are of prime importance.**

The Acute Stage of Disaster

The stages of disaster are a function of the nature of the disaster and the events that follow in its aftermath. The Acute stage is considered the time immediately following the event which involves rescue and relief efforts. It usually spans a number of weeks to a month but may vary.

Guidelines for Delivering Psychological First Aid (NIMH/SAMSA Conference(2002)

- The Goal of PFA is to reduce distress, assist with current needs, and promote adaptive functioning, not to elicit details of trumatic experiences and losses
- Psychological First Aid is based on a consensus model and doesn't expect disclosure or the expression of emotion

Psychological First Aid Core Actions

- Establish a human connection: non-intrusive, compassionate manner.
- Enhance immediate and ongoing safety: physical and emotional comfort.
- Help survivors to articulate immediate needs and concerns
- Offer practical assistance and information
- Connect survivors to social support networks, including family members, friends, and community helping resources.
- Support positive coping, acknowledge coping efforts and strengths
- Provide psycho-education
- Refer to higher levels of care

National Center for PTSD

In the acute stage of trauma three symptom clusters reflect normal human response to abnormal situations. Symptoms that persist for more than a month may warrant a referral for a higher level of care.

- Hyperarousal – "The persistent expectation of danger"
- Re-experiencing – "The indelible imprint of the traumatic moment"
- Constriction – "The numbing response of surrender"

- Judith Herman's Theory of Trauma & Recovery (1992)

- The Majority of Individuals Exposed to a Traumatic Event will NOT need Formal Psychological Intervention.
- The nature and level of a person's response is a function of three factors:
  - Characteristics of Event
  - Individual Exposure
  - Resiliency Factors including culture

Differences between:

Traditional Mental Health

and/or

Disaster Intervention Services

- ***Traditional***
- **Site-based**
- **Diagnosis and treatment**
- **Impacts personality**
- **Probes content**
- **Historical issues**
- **Psycho-therapeutic focus**

- ***Disaster Intervention***
- **Community based (varies)**
- **Adaptation of coping skills**
- **Restores functioning**
- **Accepts at Face Value**
- **Normalizes the present**
- **Psycho-ed/ Med-ed) focus**

(Adapted from Extreme Behavior Risk Management, 2005)

Large Group Psychological First Aid

- Provide information
- Provide a sense of leadership
- Reduce sense of chaos
- Enhance credibility
- Rumor control
- Provide coping resources
- Engender unit cohesion, morale
- Re-establish a sense of "community"
- Psychological screening

Everly, 2005

References

- Department of Veterans' Affairs, Department of Defense (2004). *VA/DoD Guideline for the Management of Posttraumatic Stress.* Wash., D.C.: Author.
- Everly, G.S., Jr. & Flynn, B.W. (2005). Principles and practice of acute psychological first aid after disasters. In G. S. Everly, Jr. & C. L. Parker (Eds.). *Mental Health Aspects of Disasters: Public Health Preparedness and Response, Revised* (pp. 79-89). Baltimore: Johns Hopkins Center for Public Health Preparedness.
- Everly, G., Phillips, S., Kane, D., Feldman, D.(2006) "Introduction to and Overview of Group Psychological First Aid (GroupPFA)," Brief Treatment. and Crisis Intervention, Vol.6. No.2, May 2006 Oxford University Press.
- Herman, J. (1997) *Trauma and recovery*. New York: Basic Books.
- Greene, P., Kane, D., Christ, G., Lynch, S., Corrigan, M. (2006): *FDNY Crisis Counseling: Innovative Responses to 9/11 Firefighters, Families, and Communities*, New York,: Wiley

- Klein, R. & Phillips S. B. (in press) Public Mental Health Service Delivery Protocols: Group Interventions for Disaster Preparedness and Response. New York: American Group Psychotherapy Association .
- Klein, R. H. & Schermer,V.L.(Eds.).(2000). *Group Psychotherapy for Psychological Trauma*.New York: the Guilford Press.
- *New England Journal of Medicine,* July 1, 2004, Vol. 351, pp. 13-22.
- National Child Traumatic Stress Network and National Center for PTSD, (2002)
- *Psychological First Aid: Field Operations Guide,* September, 2002.
- National Institute of Mental Health. (2002). *Mental health and mass violence*. Wash., D.C.: US Government Printing Office.
- Norris, F.H, Friedman, M., Watson, P., Byrne, C.M., Diaz, E., & Kaniasty, K. (2002). 60,000 disaster victims speak: Part I. A review of the empirical literature, 1981-2001.. *Psychiatry*, 65, 207-239.

- Phillips, S.B. (2004). "Countertransference: Effects on the Group Therapist Working with Trauma,"in Group Interventions for Treatment of Psychological Trauma, B. Buchele & H.Spitz (Eds.). New York: American Group Psychotherapy Association
- Van der Kolk, B., McFarlane, A.C. and Weisaeth, L. (Eds.). (1996) *Traumatic stress: The effects of overwhelming experience on mind, body and society*. New York: The Guilford Press