

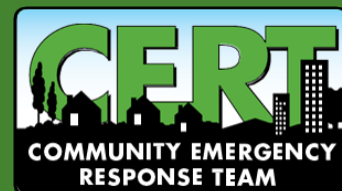


CERT Unit 5: Disaster Psychology

Participant Manual



FEMA





CERT Unit 5: Disaster Psychology

In this unit, you will learn about:

- **Disaster Psychology:** The psychological impact a disaster has on rescuers and survivors, and lessons on providing components of “psychological first aid.”
- **Caring for Yourself and Survivors:** Steps volunteers can take individually and as part of a CERT before, following, and after a disaster.

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SECTION 1: UNIT 5 OVERVIEW

CERT volunteers encounter things during a disaster that are unpleasant and uncomfortable. In responding to both natural disasters and acts of violence, CERT volunteers must be prepared to deal with the psychological effects of the trauma. These may include fear, anger, intense sadness, frustration, and traumatic grief. Survivors and CERT volunteers alike are at risk for experiencing these psychological effects.

CERT volunteers prepare themselves for their role during and following a disaster by learning about the possible emotional and physical impact of disasters on them and others. This knowledge helps CERT volunteers understand and manage their reactions to the event while enabling them to work better with others.

Remember what you have learned about team organization. Team organization concepts can help you both operationally and psychologically. Working together and looking out for each other are important aspects of successful teams.

Psychological first aid is not therapy; rather, it is a set of techniques to provide emotional intervention during field operations. The techniques covered in this unit will help you manage personal situations, so you can meet the needs of all survivors, including your fellow CERT volunteers.

Unit Objectives

At the end of this unit, you should be able to:

1. Understand disaster trauma for survivors and rescuers, including CERT volunteers.
2. List steps to take for personal and team well-being.
3. Demonstrate key steps to apply when providing aid to someone with survivor's trauma.

SECTION 2: DISASTER REACTIONS

During a disaster, you may encounter things that will be extremely unpleasant. Normal stress reactions to disaster environments can result from:

1. Dealing with your own personal losses;
2. Working in your neighborhood;
3. Assisting neighbors, friends, or coworkers who have been injured; and
4. Feeling unsafe and insecure.

“Vicarious trauma” is a common occupational hazard for disaster response volunteers. Vicarious trauma—also referred to as compassion fatigue, secondary victimization, or secondary traumatic stress—is a natural reaction of an individual exposed to a survivor’s trauma. A person who identifies too strongly with a survivor may take on that survivor’s feelings.

Taking on the survivors’ feelings as your own can affect your ability to do your job as a rescuer and it can have long-term impact. Taking ownership of others’ problems will compound your own stress and negatively affect your overall effectiveness.

Be alert to signs of disaster trauma in yourself, as well as in disaster survivors and others, such as fellow CERT volunteers, so you can take steps to alleviate stress. The term “burnout” is different from trauma. Typically, individuals suffering from burnout can overcome it by distancing themselves from their work for a period of time.

The Five Fs

Humans typically have five primary responses to stress. We refer to those as the 5 Fs: (1) freeze, (2) flight, (3) fight, (4) fright, and (5) faint. Our bodies have both physical and psychological responses to stressful events. Recognizing examples of each of these responses in both CERT volunteers and survivors can assist you in determining how best to provide support.

1. **Freeze:** “Stop, look, and listen,” or be on guard and watchful.
2. **Flight:** Flee.
3. **Fight:** Attempt to combat the threat.
4. **Fright:** Tonic immobility when in contact with a predator or playing dead.
5. **Faint:** Fear-induced fainting.

Possible Psychological Symptoms

You may experience or observe others experience varied types of disaster-related psychological and physiological responses.

- **Emotional:** nervousness; helplessness; shock; numbness; inability to feel love or joy; feelings of abandonment; agitation; feelings of detachment; exhilaration as a result of surviving; unreal feelings; feelings of being out of control; instances of denial; feelings of being overwhelmed; and feelings of fragility.
- **Cognitive:** difficulty making decisions; occurrence of disturbing dreams; memories and flashbacks; feelings of always being on guard or on constant alert;

feelings of dissociation; distortion of time and space; rumination or racing thoughts; or repeatedly replaying the traumatic event.

- **Spiritual:** loss of hope; limited expectations about life, intense use of prayer; loss of self-efficacy; feelings of despair and disillusionment; questioning (“Why Me?”); redefining meaning and importance of life.

Possible Physical Symptoms

- Loss of appetite
- Headaches or chest pain
- Diarrhea, stomach pain, or nausea
- Hyperactivity
- Increase in alcohol or drug consumption
- Nightmares
- The inability to sleep
- Fatigue or low energy

SECTION 3: SELF-CARE AND TEAM WELL-BEING

There is a range of actions you can take before, during, and after an incident to help manage the emotional impact of disaster response work.

Knowing in advance the possible psychological and physiological symptoms of disaster trauma covered in this unit is one-step in managing the impact.

Some other aspects of stress management for CERT volunteers include actions that CERT volunteers can take for themselves and actions CERT leaders can take during a response.

Ways to Reduce Your Own Stress

Only you know how to reduce your stress levels. It is worthwhile to spend the time and effort to find personal stress reducers before an incident occurs.

You can take the following preventive steps in your everyday life.

- Get enough sleep.
- Exercise regularly.
- Eat a balanced diet.
- Balance work, play, and rest.
- Allow yourself to receive as well as give; you should remember that your identity is broader than that of a helper.
- Connect with others.
- Use spiritual resources.

In addition to preventive steps, you should explain to your loved ones and friends how to support you when you return from a disaster area.

- Listen when you want to talk.
- Do **not** force you to talk if you are not ready

You may also want to share with your loved ones and friends the information on possible disaster-related psychological and physiological symptoms discussed earlier.

Exercise 5.1: Self-Care Toolbox

Purpose: This activity is to provide you with the opportunity to outline a number of self-care tools that you can perform both before and during a crisis so that you are ready to respond during an emergency.

Instructions: Complete this activity individually and at your own pace. When everyone has finished, you will have the opportunity to share your responses with the class if you would like.

Image 5.1: Self-Care Toolkit (Part 1)

What is likely to be your greatest challenge?
List out in rank order, what kinds of events may be most difficult for you. Examples of events that are difficult for lots of people: events involving pets, animals, children, or the elderly; contagious disease, intentional human-to-human harm.

What skills do you have that may come in handy during a crisis?

How do you know that you are feeling stressed? List symptoms that characterize you when you are feeling stressed (e.g., thoughts, feelings, body sensations, or behaviors).

Make a list of things that help you relax (e.g., listening to music, taking a walk, reading a book, laughing, and talking with a loved one).

Make a list of things you need to avoid (and that you would likely do without consideration) that will only add to your stress (e.g., drinking too much caffeine, overindulging in media, sitting for the whole day/shift, and taking on someone else's tasks).

We all need to talk about our experiences from time to time. Who are the top five people you can go talk to during or after a crisis?

What things can others do for you when you are feeling stressed?

Image 5.1: Self-Care Toolkit (Part 1)

How can you tell others what you need? How will you tell them?

The following areas are daily things that we either do or do not do that affect our ability to respond to emergencies. Following each one, rank how well you do in that area (1 = very poor, 10 = excellent) and then write down one action you can take to improve that area by one point.

Nutrition	1	2	3	4	5	6	7	8	9	10
What can you do:										
Sleep	1	2	3	4	5	6	7	8	9	10
What can you do:										
Manage Workload	1	2	3	4	5	6	7	8	9	10
What can you do:										
Balanced Lifestyle	1	2	3	4	5	6	7	8	9	10
What can you do:										
Stress Management	1	2	3	4	5	6	7	8	9	10
What can you do:										
Having fun	1	2	3	4	5	6	7	8	9	10
What can you do:										
Social network	1	2	3	4	5	6	7	8	9	10
What can you do:										
Exercise (30 min/day)	1	2	3	4	5	6	7	8	9	10
What can you do:										

How Team Leaders Reduce Stress During the Incident

There are steps that CERT TLs can take to reduce the stress on rescue workers before, during, and after an incident.

- Brief CERT personnel before the effort begins on what they can expect to see and what they can expect in terms of emotional response in the survivors and themselves.
- Emphasize the team aspect of CERT. Sharing the workload and emotional load can help defuse pent-up emotions.
- Encourage rescuers to rest and regroup to avoid becoming overtired.
- Direct rescuers to take breaks away from the incident area for relief from the stress of the effort.
- Establish a culture of acceptance amongst the team. Encourage volunteers to verbalize their experiences and normalize open communication.
- Encourage rescuers to eat properly and maintain fluid intake during the operation. Encourage them to drink water or other electrolyte-replacing fluids, avoiding drinks with caffeine or refined sugar.
- Encourage volunteers to be aware of changes in their teammates that may indicate personal stress and the need for a break or change of assignment.
- Rotate teams for breaks or new duties (e.g., from high-stress to low-stress jobs). Encourage volunteers to talk with each other about their experiences to promote psychological health.
- Do **not** send home volunteers who just completed a high-stress operation; instead, assign them to a low-stress responsibility so they can decompress gradually.
- Conduct a brief discussion with rescue workers after their shift during which they can describe and express their feelings about what they encountered.

SECTION 4: WORKING WITH SURVIVORS' EMOTIONAL RESPONSES

Crisis survivors can go through a variety of emotional phases, and as a rescuer, you should be aware of what you may encounter. The conditions associated with evacuation and relocation have psychological significance. When there are physical hazards or family separations during the evacuation process, survivors often experience post-traumatic reactions. When the family unit is not together due to shelter requirements or other factors, anxiety regarding the welfare of those not present may detract from the attention necessary for immediate problem solving.

- **Pre-Disaster Phase:** Communities will have varying degrees of warning depending on the type of disaster. For example, earthquakes typically hit without warning; whereas, hurricanes and floods typically strike within hours to days of a warning. When there is no warning, survivors may feel more vulnerable, unsafe, and fearful of future unpredicted tragedies. The perception they had no control over protecting themselves or their loved ones can be deeply distressing. Meanwhile, when people do not heed warnings and suffer losses as a result, they may experience guilt and self-blame. While they may have specific plans for how they might protect themselves in the future, survivors often feel guilty or responsible for what has occurred.
- **Impact Phase:** The impact phase of a disaster varies from the slow, low threat buildup associated with some types of floods to the violent, dangerous, and destructive outcomes associated with tornadoes and explosions. The greater the scope, community destruction, and personal losses associated with the disaster, the greater the psychosocial effects.

Depending on the characteristics of the incident, people's reactions may range from constricted, stunned, shock-like responses to the less common overt expressions of panic and hysteria. Typically, people respond initially with confusion and disbelief and focus on the survival and physical well-being of themselves and their loved ones. When families are in different geographic locations during the impact of a disaster (e.g., children at school, adults at work), survivors will experience considerable anxiety until reunification.

- **Heroic Phase:** In the immediate aftermath of a disaster, survival, rescuing others, and promoting safety are priorities. Evacuation to shelters, motels, or other homes may be necessary. For some, post-impact disorientation gives way to adrenaline-induced rescue behavior to save lives and protect property. While activity level may be high, actual productivity is often low. The capacity to assess risk may be impaired, and injuries can result. Altruism is prominent among both survivors and emergency responders.
- **Honeymoon Phase:** In the weeks and months following a disaster, formal governmental and volunteer assistance may be readily available. Community bonding occurs from the shared experience of surviving a catastrophic experience and the giving and receiving of community support. Survivors may experience a short-lived sense of optimism that the help they will receive will make them "whole" again. When disaster behavioral health workers are visible

and perceived as helpful during this phase, they are more readily accepted and have a foundation from which to aid in the difficult phases ahead.

- **Disillusionment Phase:** Disappointment in a slower-than-expected pace of recovery can trigger this phase. Disillusionment typically occurs in the second half of the year immediately following a disaster and, again, after the disaster's first anniversary.
- **Reconstruction Phase:** The reconstruction of physical property and recovery of emotional well-being may continue for years following a disaster. At this point, survivors have realized they will need to solve the problems of rebuilding their own homes, businesses, and lives largely by themselves and have gradually assumed the responsibility for doing so.

Traumatic Crisis

A traumatic crisis is an event experienced or witnessed in which people's ability to cope is overwhelmed by:

- Actual or potential death or injury to self or others;
- Serious injury;
- Destruction of their homes, neighborhood, or valued possessions; and/or
- Loss of contact with family volunteers or close friends.

Traumatic stress may affect:

- **Cognitive Function:** Those who have suffered traumatic stress may act irrationally, in ways out of character for them, and they may have difficulty making decisions. Additionally, they may have difficulty sharing or retrieving memories.
- **Physical Health:** Traumatic stress can cause physical symptoms and health problems.
- **Interpersonal Relationships:** Survivors of traumatic stress may undergo temporary or long-term personality changes that make interpersonal relationships difficult.

Mediating Factors

The strength and type of personal reaction to trauma vary depending on a combination of the following factors:

- A person's prior experience with the same or a similar event; the emotional effect of multiple events can be cumulative, leading to greater stress reactions.
- Intensity of the disruption in the survivors' lives; the more the survivors' lives are disrupted, the greater their psychological and physiological reactions may become.
- The meaning of the event to the individual; the more catastrophic the victim perceives the event to be to him or her personally, the more intense his or her stress reaction will be.

- The emotional well-being of the individual and the resources (especially social) that he or she has to cope. People who have had other recent traumas may not cope well with additional stresses.
- The length of time that has elapsed between the event's occurrence and the present; the reality of the event takes time to "sink in."

CERT volunteers cannot know—and should never assume to know—what someone is thinking or feeling.

Do not take the survivors' surface attitudes personally. Rescuers should expect to see a range of responses that will vary from person to person, but the responses they see will be part of the psychological impact of the event—and probably will not relate to anything that the CERTs have or have not done.

Stabilizing Survivors

The goal of on-scene psychological intervention on the part of CERT volunteers should be to calm the incident scene by stabilizing individuals. Address any medical needs then use the methods below to psychologically stabilize individuals.

- Observe survivors to determine their level of responsiveness and decide whether they pose a danger to themselves or to others.
- Get uninjured people involved in helping. Engaging survivors in focused activity helps them cope. Give them constructive jobs to do such as organizing supplies. This strategy is especially effective for survivors who are being disruptive.

Provide support by:

- **Listening:** Let them talk about their feelings and their physical needs. Survivors often need to talk about what they have been through – and they may want someone to listen to them.
- **Empathizing:** Caring responses show survivors that someone else shares their feelings of pain and grief.
- **Connecting:** Help survivors connect to natural support systems, such as family, friends, or clergy.

Listen, Protect, Connect

Psychological First Aid (PFA) is an evidence-informed approach to assist children, adolescents, adults, and families in a disaster's aftermath. Just as you learned basic first aid in Units 3 and 4 to support the physical needs of survivors, PFA provides the initial support for survivors' psychological well-being. "Listen, Protect, Connect" is one method of PFA that can assist survivors in taking steps to bounce back more quickly.

- **Listen:** The first important step to help your survivors after an event is to listen and pay attention to what they say (and how they say it), how they act, and what they need right now. We talked previously about the many ways in which people may react after experiencing a traumatic event. Remember that not all reactions are verbal or can be seen.

Let the survivor(s) know you are willing to listen and talk about the event when or if they would like to. Understand that sometimes survivors are not ready to talk or do not want to talk and that is okay. Check back with them on a regular basis to see if their reactions or needs have changed.

- **Protect:** This step helps survivors feel protected and allows you to protect them from added stress. This step helps survivors feel better by taking actions to provide support, encouragement, and reassurance. The listening step should have provided you with enough information to make informed decisions about each survivor's needs.
 - Provide information or resources.
 - Answer questions simply and honestly, clearing up any confusion they may have.
 - Empathize and let them know they are not alone in their reactions to the event.
 - Provide opportunities for them to communicate, but do not force them.
 - Talk to them about what is being done to keep everyone safe from harm.
 - Watch for anything in the environment that could re-traumatize them such as sights, smells, or sounds and help them reduce contact with those elements.
 - Help them decide what their basic needs are and how to get access to them (e.g., encouraging healthy behaviors such as food and rest).
- **Connect:** Connecting survivors to their friends, loved ones, and other resources has a positive impact on their recovery.
 - Assist survivors in reconnecting with friends or loved ones after a disaster.
 - Ensure you are connecting with them on a regular basis.
 - Help them find access to resources that can offer support.

Being an Empathetic Listener

Being an empathetic listener requires the listener to listen and to let the survivor talk.

Good listeners will:

- Put the listener in the speaker's shoes to understand the speaker's point of view more profoundly. Draw upon experiences or try to imagine how the speaker is feeling. To limit the effects of vicarious trauma, be careful not to completely take on the speaker's feelings.
- Listen for meaning, not just words, and pay close attention to the speaker's nonverbal communication, such as body language, facial expressions, and tone of voice.
- Paraphrase the speaker periodically to make sure he or she fully understood what the speaker said and to indicate to the speaker that you are listening. This reinforces the communication process.

Survivors can show evidence of being suicidal, psychotic, or unable to care for themselves. Be sure to refer these cases to EMS and/or mental health professionals for support as soon as possible.

What Not to Say

When providing support, you should avoid saying the following phrases. On the surface, you may say these phrases to comfort the survivors, but they can be misinterpreted or not well received. In general, avoid the statements below:

- “I understand.” In most situations, we cannot understand unless we have had the same experience.
- “Don’t feel bad.” The survivor has a right to feel bad and will need time to feel differently.
- “You’re strong” or “You’ll get through this.” Many survivors do not feel strong and question if they will recover from the loss.
- “Don’t cry.” It is okay to cry.
- “It’s God’s will.” With a person you do not know, giving religious meaning to an event may insult or anger the person.
- “It could be worse,” “At least you still have...”, or “Everything will be okay.” It is up to the individual to decide whether things could be worse or if everything will be okay.

Rather than provide comfort, these types of responses could elicit a strong negative response or distance the survivor from the listener.

It is okay to apologize if the survivor reacts negatively to something you said.

Learn to be comfortable with silence. Do not say something just to alleviate your own discomfort.

Say This Instead

Always ask permission to enter their space, provide help, or interact with them.

Allow people to say what they need. Normalize what they are feeling and thinking using common phrases similar to those below.

- “I’m sorry for your pain.”
- “I’m so sorry this has happened.”
- “Is it all right if I help you with...?”
- “I can’t imagine what this is like for you.”
- “What do you need?”

Managing Death Scene

One unpleasant task that CERT volunteers may face is dealing with a victim who dies while under the team’s care. The guidelines below are useful for dealing with this situation.

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

UNIT 5 SUMMARY

The key points from this unit are:

- A disaster may expose rescuers to extremely unpleasant or uncomfortable situations. These experiences will be stressful and may be traumatic.
- Over-identifying with survivors may subject rescuers to vicarious trauma.
- Survivors and rescuers may have both psychological and physiological symptoms of trauma after a disaster.
- CERT leaders can take steps to reduce stress on rescue workers before, during, and after an incident.
- CERT volunteers can take steps to reduce stress on themselves.
- Psychological First Aid is an evidence-informed approach for assisting children, adolescents, adults, and families in the aftermath of disaster.
- The steps *listen, protect, and connect* can provide actions associated with supporting survivors after a disaster.
- Research shows that survivors go through the following distinct emotional phases following a disaster:
 - Pre-Disaster
 - Impact
 - Heroic
 - Honeymoon
 - Disillusionment
 - Reconstruction
- Traumatic stress may affect cognitive functioning, physical health, and interpersonal reactions.
- Different people react differently to traumatic stress based on a variety of mediating factors.
- A traumatic crisis occurs when a person's ability to cope is overwhelmed.
- The goal of on-scene psychological intervention is to stabilize the incident by stabilizing individuals.
- Provide support for survivors by being an empathetic listener.

Homework Assignment

Read and become familiarize yourself with the unit that will be covered in the next session.