

Not ReLIVING— But LIVING

Psychological First Aid for Refugee Care: Helpful Do's and Don'ts



A **rapid response psychology tool** to aid the public's assistance to Ukrainian refugees arriving in Ireland

Authored by the Psychological Society of Ireland's Special Interest Group in Human Rights and Psychology

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The crisis in Ukraine has reminded us how fragile and resilient the human condition is, whether we be refugees fleeing from Ukraine or receiving them into our care. This short guide has been created by the Psychological Society of Ireland (PSI) Special Interest Group in Human Rights and Psychology to offer clear and practical guidance for those who meet, greet and care for fellow Ukrainians, their families and children.

How Can I Help?

Drawing on **principles of psychological first aid**, these **do's and don'ts** and hints and tips put together by our experienced trauma and crisis intervention clinicians, will facilitate your first steps in caring for those affected by the crisis, including adolescents and children.



What is Psychological First Aid?

Psychological first aid (PFA) is humane, supportive and practical assistance to fellow human beings who recently suffered exposure to serious stressors. It is not counselling or psychological debriefing, neither of which is recommended for people in this situation. PFA is a way of providing support from one human to another human who is experiencing distress.

It involves:

- ⇒ non intrusive, practical care and support
- ⇒ assessing needs and concerns
- ⇒ helping people to address basic needs (food, shelter, transport costs)
- ⇒ listening, but not pressuring people to talk
- ⇒ comforting people and helping them to feel calm
- ⇒ helping people connect to information, services, and social support
- ⇒ protecting people from further harm

It is **NOT** asking people to analyse what happened, drawing out their experiences or looking for details or pressuring people to tell you their feelings or reactions to an event.

What Does Psychological First Aid Look Like?

People do better over the long term if they feel safe, connected to others, calm and hopeful. It is important that they have access to social, physical and emotional support and ultimately regain a sense of control by being able to help themselves.

Engaging in activities to keep active and busy, especially trying to keep to a routine or schedule can be important in the first few days. Practicing self-compassion by using calming strategies such as breathing and exercise/movement or engagement in religious or spiritual practices or activities they are accustomed to can work well. For example, key to feeling calm and hopeful may be a sense of routine, access to understandable and correct information about available services, being involved in decision-making, and being able to contact or regain contact with loved ones.

Next, we outline key **psychological first aid—do's and don'ts** to help you address the needs of people following a refuge-seeking crisis event.



Do's

- Do provide basic needs (safety, shelter, food and warmth)
- Do facilitate familiar routines (sleeping, eating, self-care)
- Do offer non-intrusive, practical care and support
- Do listen and not pressure people to talk
- Do ensure privacy and confidentiality in disclosure unless waived
- Do help people feel calm and hopeful
- Do connect people to correct information, services and social supports (especially access to or location of loved ones)
- Do help people regain control of their lives and involve themselves in decision-making

... and for Children and Adolescents

- Do help children and adolescents to engage in recreation (e.g., playing, drawing, baking, listening to music, watching movies, outdoor games)
- Do help children and adolescents re-establish daily routines (e.g., sleeping, eating, exercising and introduce some schooling)

What is Trauma and What Helps?

Events that are especially horrible, frightening or life-threatening are often called traumatic events. Traumatic stress reactions are normal reactions to such highly stressful events. Initial reactions to traumatic events can include exhaustion, confusion, sadness, anxiety, agitation, numbness, disconnection, and remaining on 'high alert'. Not everybody reacts in the same way and there is no 'right' way to respond. Most survivors show immediate reactions, yet these typically resolve with time. This is because people are resilient and develop appropriate coping strategies, including the use of social supports, to deal with the aftermath and effects of trauma. For a small percentage of people their recovery is slower and they may need professional help to overcome what happened.

In the past it was assumed that all survivors need to express emotions associated with trauma and talk about the trauma; more recent research shows that survivors who choose not to process their trauma are just as psychologically healthy as those who do.



Don'ts

- Don't intrude or ask people to analyse what happened, rather provide personal space
- Don't encourage re-telling of traumatic events, rather listen when volunteered
- Don't force help on those who do not want it. Make clear that help is available at any time in the future should they need it
- Don't exaggerate what you don't know, voice your opinion or draw from personal experiences; just listen
- Don't touch the person, for example 'hug', unless they make it clear that it is ok to do so
- Don't request public outpouring of grief or share this grief without consent

... and for Children and Adolescents

- Don't play 24-hour news channel coverage of the conflict, rather decide a reliable news slot for adults to relay to children or adolescents
- Don't encourage re-telling of traumatic events, rather listen when volunteered

How to Prepare



The principles of psychological first aid do's and don'ts apply when you come upon first contact with someone who has experienced a serious stressor, such as displacement from their home country due to war and conflict. Remember not everyone will need or want psychological first aid. What you can do in these situations is make sure they are aware support is available should they decide to call on you. It may help to prepare with the **Look—Listen—Link** approach.

Look - Listen - Link



- ⇒ **Look** and learn about the crisis event
- ⇒ **Listen** and learn about available supports
- ⇒ **Link** with refugee supports and community; learn about safety and security concerns

Those with severe or long-lasting symptoms may require more support. Next we will offer some hints and tips to help you listen well and help people feel calm. We will also outline how you can help by directing you to supports from the Health Service Executive (HSE) and the Psychological Society of Ireland (PSI).

Look—Listen—Link

It is important to prepare, and we recommend that you:

- ⇒ Learn about the crisis event and
- ⇒ Learn about available services and support

LOOK

- ⇒ Look out for people with urgent basic needs. Although some needs are obvious, always ask. Find out a person's priorities – what is most important to them.
- ⇒ Look out for people with serious distress reactions. Indicators of more severe reactions include: continuous distress without periods of relative calm or rest; and intense intrusive recollections that continue despite a return to safety.
- ⇒ We must watchfully wait and be aware if these symptoms continue for over a month. Specialist care may be required.

LISTEN

- ⇒ Listen to people and help them feel calm. If you remain calm, quiet and present, speak softly and slowly, and keep your body relaxed, the distressed person may begin to relax too.
- ⇒ Listen with undivided attention and acknowledge feelings rather than trying to draw out details. This can help people feel understood and supported.
- ⇒ Some individuals may share experiences about their home country or about their displacement. Listen with empathy, but do not probe for more details. Try to listen without interrupting.

LINK

- ⇒ Help people address the needs they have identified and find information about how they can access services.
- ⇒ Don't overlook the needs of vulnerable or marginalised people.
- ⇒ Displaced children and families who have positive social support systems are better able to tolerate stressors that lie ahead.
- ⇒ Affected people may be able to help each other – create opportunities to bring them together.
- ⇒ Identify group activities that match the individual's interests, such as, educational, recreational wellness, religious/spiritual and support groups.

LOOK— When more advanced or clinical help may be required... PTSD

Post-traumatic stress disorder (PTSD) is sometimes experienced by those affected by conflict, displaced or fleeing from their home. If you are unsure but believe someone is experiencing PTSD, they may need clinical help.

Possible symptoms for adults and children include nightmares, repetitive trauma-related play, intrusive thoughts, avoiding things related to the event, increased behavioural difficulties, problems concentrating, hypervigilance, and difficulties sleeping. As a general rule if these symptoms persist beyond one month, intervention by a GP or psychologist or both may be required. If this occurs refer to the advice and contacts in this document (See pages 10 and 11).



LISTEN— Help People Feel Calm

1. Use a calm and soft tone of voice
2. Make careful and soft eye contact; not too intensely
3. If someone describes feeling 'unreal' help them to make contact with themselves with a grounding exercise

For example, ask people to **'tap their feet on the ground'**, notice objects around them or **'describe their immediate surroundings out loud'**. Breathing directions will also help such as asking to **'focus on your breath and breathing'**, and **'breathe slowly'** for a count of 3 or more deep breaths.

Most people recover well over time with a sense of a new normality often returning within several weeks. If you are unsure but believe someone is experiencing PTSD, they may need clinical help.

See the Psychological Society of Ireland's website resources for those requiring help in times of war
www.psychologicalsociety.ie

We have also provided some useful emergency contacts on the next page, page 10, affording shelter and legal information.



Most people recover well over time. They may have witnessed stressful and traumatic events. For now they can be feeling overwhelmed and confused by their new environment. It is perfectly normal for them to experience nightmares, intrusive thoughts, avoid relating to the event, have behavioural difficulties, problems concentrating, and difficulties sleeping. However, we must watchfully wait and be aware. If these symptoms continue for over a month, those with severe or long-lasting distress may require support by specialist services. See below for links to relevant emergency contacts.

Links to Emergency Contacts

For mental health and medical supports visit the **HSE** site:

[https://www2.hse.ie/services/healthcare-in-ireland/
ukrainian-refugees.html](https://www2.hse.ie/services/healthcare-in-ireland/ukrainian-refugees.html)

For support, information, family reunification FAQs, and legal advice visit the Irish Refugee Council site:

www.irishrefugeecouncil.ie

To offer your support visit **Irish Red Cross** pledge pages:

www.registerofpledges.redcross.ie/#/pledging/room



Other Useful References

Psychological Society of Ireland

- www.psychologicalsociety.ie/footer/Time-of-War-Resources
- www.psychologicalsociety.ie/groups/Special-Interest-Group-in-Human-Rights--Psychology

Post-traumatic stress disorder

- <https://www2.hse.ie/conditions/mental-health/post-traumatic-stress-disorder/post-traumatic-stress-disorder-ptsd-treatment.html>

Psychological first aid

- The 'Your Mental Health' information line is an HSE phone service you can call any time, which will identify the mental health supports and services available to you locally and how to access different services provided by the HSE and funded partners. Freephone: [1800 111 888](tel:1800111888)
- Not reLiving—But Living: Psychological First Aid for Refugee Care: Helpful Do's and Don'ts. Psychological Society of Ireland/ SIG Human Rights and Psychology
- <https://aftertheevent.org/>
- For Field Workers—See this World Health Organisation (WHO) World Health Organization, War Trauma Foundation and World Vision International (2011). Psychological first aid: Guide for field workers. WHO: Geneva.
- National Institute for Health and Care Excellence. (2018) *Post-traumatic stress disorder NG116*, <https://www.nice.org.uk/guidance/ng116>
- <https://www.youtube.com/watch?v=cst4J6u3b5s>

On Ukrainian Conflict—Trauma

- <https://krisepsykologi.no/war-in-ukraine-what-do-we-tell-the-children/>





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