

Advice to Mental Health Professionals

Your compassionate help will be remembered forever.

You do make a difference however informal the intervention.

If you have not been trained in crisis intervention, you may be unsure of your clinical role with victims. Those trained in psychological debriefings may have the expectation that a standard CISD will be the intervention of choice. In reality, natural or cultural healing rituals and/or more informal and subtle interventions by MHP and other support personnel appear to be the intervention of choice. Don't be surprised if you find yourself just hanging-out with victims in a very informal fashion – listening to their stories and meeting basic needs (information, drink, food) etc. You may not feel like you are doing much, but you are. In fact, your informal connecting with people often opens the door for more personal and in depth conversations. On the other hand, you may find that the interaction between community members is meeting many of their needs. When this is the case, let it happen, be supportive, and do what you think is needed.

If you find yourself in an interpersonal support role with a victim, consider the following informal protocol (and I mean consider ... use your common sense and behave in a way that you sense will meet the need):

INDIVIDUAL

1. Find out the nature of their situation – how they have been affected by the disaster. Be gently curious.
2. Listen to their story – validate their experience ... thoughts and feelings ... treat them like a friend who has been through a distressing event.
3. Find out how it has impacted them – what it was like to go through the experience and cope.
4. If they present clinical issues, intervene as you were trained as a counsellor.
5. If the timing is right, coach them on how the event “may” impact them – symptoms such as sleep problems, trigger reactions, emotional ups and downs, etc. Having a handout would be useful.
6. Once you have had a chance to hear them out, find out how they are having had a chance to talk. Find out what plans they have to manage the stress. Make sure they are grounded before they leave.
7. Remember, this is a short-term intervention. You want to be a compassionate, educational and solution focused crisis intervenor.

GROUP

If you have been asked to meet with a group of people from the same community, behave in much the same way. Note, you must be skilled with group process. This is not the time to learn as these can be very challenging sessions. Also note that you are a stranger or outsider to them. You need to be seen as a “safe” support person. You have to earn the right to be inside their group. Behave as a guest. Here are my suggestions:

1. Float around the group offering to meet basic needs – information, food, drink, etc.
2. If you have been asked to meet with them as a group, when the time is right, ask for their attention in some respectful way. If there is an informal leader, you may approach this person in advance and have him or her get the group started. Make sure they know the purpose of your presence and have him/her explain this to the group. This helps with you gaining credibility. If you find out from the leader that your goal and their needs are different, see if you can help them meet these needs and alter your plans.

3. When you have their attention, speak from your heart. Empathize with their situation. Never say: "I know how you feel." Rather, say something like: "I can't imagine what this must be like for you given what you have been through". If you have been through a tragedy, you could briefly share some of your experience indicating its impact on you. But, only do this as a form of empathy not as a "war story".
4. If the tragedy is "raw", meaning they are just dealing with the shock, don't even think of conducting a typical group session. Rather, meet the needs you determined from their informal leader. They are most likely wanting information, funds, or other "basic" things. For example, they may be more concerned about what they are going to do now rather than how this event has impacted them.
5. If their basic needs have been met, they may gain from sharing their experiences with each other, learning about typical symptoms and self-care, and making plans on how to support each other. Here is a suggested process:
 - a. Listen to their story – validate their experience ... thoughts and feelings ... treat them like a friend who has been through a distressing event. You may wish to do this one person at a time. My experience is that it tends to be a bit of a free-for-all with some order provided by you. Don't be too controlling for fear of being irritating. If you have to set limits, explain why first and do it with a friendly voice.
 - b. Find out how it has impacted them – what it was like to go through the experience – if they haven't already done this. I find in community debriefings, story, thoughts, and feeling come out all at the same time.
 - c. Find out what symptoms are currently being experienced (triggers, flashbacks, sleep disturbances, etc.). Teach them about how tragedies like this have affected others (symptoms) – i.e., what to expect.
 - d. Spend some time discussing how they can care for themselves and their children. Problem-solve where necessary.
 - e. Find out what they would like as a follow-up from this. They may simply want to meet alone as a group or they may wish to have you return.
 - f. End by thanking them for their trust and openness.
 - g. Hang out at the end to deal with issued individuals were uncomfortable bringing up in the group or connecting with individuals that you were concerned about.
6. Remember, this is a short-term intervention. You want to be a compassionate, educational and solution focused group crisis intervener. It will not be a "tidy" group process. Be flexible. It is your compassionate support that will be most remembered.