



Brian Sandoval
Governor



Richard Whitley
Director

State of Nevada
Department of Health and Human Services

Reacting to Catastrophic Event

What to Expect

How to Respond

Based on the PFA Field Operations Guide
Division of Public and Behavioral Health

Leon Ravin, MD

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Reaction to a traumatic/catastrophic event among survivors

Common reactions:

Intrusive reactions are ways in which the traumatic experience comes back to mind. These reactions include distressing thoughts or mental images of the event (for example, picturing what one saw), or dreams about what happened. Among children, bad dreams may not be specifically about the disaster. Intrusive reactions also include upsetting emotional or physical reactions to reminders of the experience. Some people may feel and act like one of their worst experiences is happening all over again. This is called a “flashback.”



Reaction to a traumatic/catastrophic event among survivors

Common reactions:

Avoidance and withdrawal reactions are ways people use to keep away from, or protect against, distress. These reactions include trying to avoid talking, thinking, and having feelings about the traumatic event, and avoiding any reminders of the event, including places and people connected to what happened. Emotions can become restricted, even numb, to protect against distress. Feelings of detachment and estrangement from others may lead to social withdrawal. There may be a loss of interest in usually pleasurable activities.



Reaction to a traumatic/catastrophic event among survivors

Common reactions:

Physical arousal reactions are physical changes that make the body react as if danger is still present. These reactions include constantly being “on the lookout” for danger, startling easily or being jumpy, irritable or having outbursts of anger, difficulty falling or staying asleep, and difficulty concentrating or paying attention.



Reaction to a traumatic/catastrophic event among survivors

Grief Reactions will be prevalent among those who survived the disaster but have suffered many types of losses, including the death of loved ones, and loss of home, possessions, pets, schools, and community. Loss may lead to feelings of sadness and anger, guilt or regret over the death, missing or longing for the deceased, and dreams of seeing the person again.



Reaction to a traumatic/catastrophic event among survivors

Traumatic Grief Reactions occur when children and adults have suffered the traumatic death of a loved one. Some survivors may stay focused on the circumstances of the death, including being preoccupied with how the death could have been prevented, what the last moments were like, and who was at fault. These reactions may interfere with grieving, making it more difficult for survivors to adjust to the death over time.



Reaction to a traumatic/catastrophic event among survivors

Depression is associated with prolonged grief reactions and strongly related to the accumulation of post-disaster adversities. Reactions include persistent depressed or irritable mood, loss of appetite, sleep disturbance, greatly diminished interest or pleasure in life activities, fatigue or loss of energy, feelings of worthlessness or guilt, feelings of hopelessness, and sometimes thoughts about suicide. Demoralization is a common response to unfulfilled expectations about improvement in post-disaster adversities and resignation to adverse changes in life circumstances.



Reaction to a traumatic/catastrophic event among survivors

Physical Reactions may be commonly experienced, even in the absence of any underlying physical injury or illness. These reactions include headaches, dizziness, stomachaches, muscle aches, rapid heart beat, tightness in the chest, hyperventilation, loss of appetite, and bowel problems.



Reaction to a traumatic/catastrophic event among survivors

Reactions can be worsened by

- trauma reminders (i.e. sights, sounds, places, smells, specific people, the time of day, situations, or even feelings, like being afraid or anxious);
- loss reminders (i.e. seeing a picture of a lost loved one, or seeing their belongings, like their clothes);
- change reminders (i.e. people, places, things, activities, or hardships that remind someone of how life has changed as a result of the disaster).



Reaction to a traumatic/catastrophic event among survivors

Trauma reminders can evoke upsetting thoughts and feelings about what happened (such as sadness, nervousness, uncertainty about what life will be without them, anger, feeling alone or abandoned, or hopelessness).

Over time, avoidance of reminders can make it hard for people to do what they normally do or need to do.



Ways of coping with a traumatic/catastrophic event

Coping methods that are likely to be helpful include:

- Talking to another person for support
- Getting needed information
- Getting adequate rest, nutrition, exercise
- Engaging in positive distracting activities (sports, hobbies, reading)
- Trying to maintain a normal schedule to the extent possible
- Telling yourself that it is natural to be upset for some period of time
- Scheduling pleasant activities



Ways of coping with a traumatic/catastrophic event

Coping methods that are likely to be helpful include:

- Eating healthful meals
- Taking breaks
- Spending time with others
- Participating in a support group
- Using relaxation methods
- Using calming self talk
- Exercising in moderation



Ways of coping with a traumatic/catastrophic event

Coping methods that are likely to be helpful include:

- Seeking counseling
- Keeping a journal
- Focusing on something practical that you can do right now to manage the situation better
- Protecting self from additional trauma (exposure to media/web coverage, contacts with reporters or attorneys)
- Using coping methods that have been successful for you in the past



Ways of coping with a traumatic/catastrophic event

Coping methods that are likely to be ineffective include:

- Using alcohol or drugs to cope
- Withdrawing from activities
- Withdrawing from family or friends
- Working too many hours
- Getting violently angry
- Excessive blaming of self or others



Ways of coping with a traumatic/catastrophic event

Coping methods that are likely to be ineffective include:

- Overeating or undereating
- Watching too much TV or playing too many computer games
- Doing risky or dangerous things
- Not taking care of yourself (sleep, diet, exercise, etc.)



If you are approaching
someone who might need
Psychological First Aid



What to do

- Operate only within the framework of an authorized disaster response system.
- Model healthy responses; be calm, courteous, organized, and helpful.
- Be visible and available.
- Maintain confidentiality as appropriate.
- Remain within the scope of your expertise and your designated role.
- Make appropriate referrals when additional expertise is needed or requested by the survivor.
- Be knowledgeable and sensitive to issues of culture and diversity.
- Pay attention to your own emotional and physical reactions, and practice self-care.



What to do (cont.)

- Politely observe first; don't intrude. Then ask simple respectful questions to determine how you may help.
- Often, the best way to make contact is to provide practical assistance (food, water, blankets).
- Initiate contact only after you have observed the situation and the person or family, and have determined that contact is not likely to be intrusive or disruptive.
- Be prepared that survivors will either avoid you or flood you with contact.
- Speak calmly. Be patient, responsive, and sensitive.
- Speak slowly, in simple concrete terms; don't use acronyms or jargon.



What to do (cont.)

- If survivors want to talk, be prepared to listen. When you listen, focus on hearing what they want to tell you, and how you can be of help.
- Acknowledge the positive features of what the survivor has done to keep safe.
- Give information that directly addresses the survivor's immediate goals and clarify answers repeatedly as needed.
- Give information that is accurate and age-appropriate for your audience.
- When communicating through a translator or interpreter, look at and talk to the person you are addressing, not at the translator or interpreter.
- Remember that the goal of Psychological First Aid is to reduce distress, assist with current needs, and promote adaptive functioning, not to elicit details of traumatic experiences and losses.



What not to do

- Do not make assumptions about what survivors are experiencing or what they have been through.
- Do not assume that everyone exposed to a disaster will be traumatized.
- Do not pathologize. Most acute reactions are understandable and expectable given what people exposed to the disaster have experienced. Do not label reactions as “symptoms,” or speak in terms of “diagnoses,” “conditions,” “pathologies,” or “disorders.”



What not to do (cont.)

- Do not talk down to or patronize the survivor, or focus on his/her helplessness, weaknesses, mistakes, or disability. Focus instead on what the person has done that is effective or may have contributed to helping others in need, both during the disaster and in the present setting.
- Do not assume that all survivors want to talk or need to talk to you. Often, being physically present in a supportive and calm way helps affected people feel safer and more able to cope.
- Do not “debrief” by asking for details of what happened.
- Do not speculate or offer possibly inaccurate information. If you cannot answer a survivor’s question, do your best to learn the facts.



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Addendum
**Helping Those Affected
by a Catastrophic Event**

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Parent tips for helping infants and toddlers

If the child is scarred

- talk to her about how you will keep her safe, explain how what is happening now (like rain or aftershocks) is different from the disaster

If the child is “hyper”

- Help your child get rid of nervous energy: stretching, running, sports, breathing deep and slow; sit with him and do an activity you both enjoy

If the child is very demanding

- Let your child have control over small things. Give her choices over what she wears or eats, games you play, stories you read. Balance giving her choices and control with giving her structure and routines.



Parent tips for helping infants and toddlers

If the child has tantrums

- Tolerate tantrums more than you usually would, and respond with love rather than discipline. If he cries or yells, stay with him and let him know you are there for him. Reasonable limits should be set if tantrums become frequent or are extreme.

If the child hits you

- Each time your child hits, let her know that this is not ok. Hold her hands, so she can't hit, have her sit down. If she is old enough, give her the words to use or tell her what she needs to do. Help her express anger in other ways: play, talk, draw. If you are having conflict with other adults, try to work it out in private, away from where your child can see or hear you. If needed, talk with a friend or professional about your feelings.



Parent tips for helping infants and toddlers

If the child says go away, I hate you or blames you

- Remember, he doesn't mean everything he is saying; he's angry and dealing with so many difficult feelings. Support your child's feeling of anger, but gently redirect the anger towards the disaster.

If the child doesn't want to play, do anything or seems to not really have any feelings

- Sit by your child and keep him close. Let him know you care. If you can, give words to his feelings. Let him know it's OK to feel sad, mad, or worried. Try to do things with your child, anything he might like: read a book, sing, play together.



Parent tips for helping infants and toddlers

If the child cries a lot

- Allow your child to express feelings of sadness. Help your child name her feelings and understand why she may feel that way. Support your child by sitting with her and giving her extra attention. Spend special time together. Help your child feel hopeful about the future. It will be important to think and talk about how your lives will continue and the good things you will do.

If the child misses people you are no longer able to see after the disaster.

- For those that have moved away, help your child say in touch in some way. Help your child talk about these important people. Even when we are apart from people, we can still have positive feelings about them by remembering and talking about them. Acknowledge how hard it is to not be able to see people we care for. Where someone has died, answer your child's questions simply and honestly.



Parent tips for helping infants and toddlers

If the child misses things you have lost because of the disaster

- Allow your child to express feelings of sadness. If possible, try to find something that would replace the toy or blanket that would be acceptable and satisfying to your child. Distract your child with other activities.



Parent tips for helping preschool-age children

If the child feels helpless

- Provide comfort (more hugs, hand holding, or time in your lap), rest, food, water, and opportunities for play and drawing. Provide ways to turn spontaneous drawing or playing from traumatic events to include something that would make them feel safer or better.
- Reassure your child that you and other grownups will protect them.

If the child feels fearful

- Be as calm as you can with your child. Try not to voice your own fears in front of your child. Help children regain confidence that you aren't leaving them and that you can protect them. Remind them that there are people working to keep families safe, and that your family can get more help if you need to. If you leave, reassure your children you will be back. Tell them a realistic time in words they understand, and be back on time. Give your child ways to communicate their fears to you.



Parent tips for helping preschool-age children

If the child feels confused about the danger being over

- Give simple, repeated explanations as needed, even every day. Make sure they understand the words you are using. Find out what other words or explanations they have heard and clarify inaccuracies. If you are at some distance from the danger, it is important to tell your child that the danger is not near you.

If the child is not talking

- Put common feelings of children into words, such as anger, sadness, and worry about the safety of parents, friends and siblings. Do not force them to talk, but let them know they can talk to you any time.

If the child fears the disaster will return

- Explain the difference between the event and reminders of the event. Protect children from things that will remind them as best you can.



Parent tips for helping preschool-age children

If the child has sleep problems

- Reassure your child that s/he is safe. Spend extra quiet time together at bedtime. Provide calming activities before bedtime. Let the child sleep with a dim light on, or sleep with you for a limited time. Try to explain the difference between dreams and real life.

If the child returns to earlier behaviors

- Remain neutral or matter-of-fact, as best you can, as these may continue a while after the disaster. If your child starts bedwetting, change her clothes and linens without comment.

If the child does not understand about death

- Give age-appropriate consistent explanation--that does not give false hopes--about the reality of death. Don't minimize their feelings over a loss of a pet or a special toy. Take cues from what your child seems to want to know. Answer simply and ask if he has any more questions.



Parent tips for helping school-age children

If the child has confusion about what happened

- Give clear explanations of what happened whenever your child asks. Avoid details that would scare your child. Correct any information that your child is unclear or confused about regarding if there is a present danger. Remind children that there are people working to keep families safe and that your family can get more help if needed. Let your children know what they can expect to happen next.

If the child feels being responsible

- Provide opportunities for children to voice their concerns to you. Offer reassurance and tell them why it was not their fault.

If the child fears recurrence of the event

- Help child to identify reminders and to clarify the difference between the event and the reminders that occur after it. Reassure them, as often as they need, that they are safe. Protect children from seeing media coverage of the event as it can trigger fears of the disaster happening again.



Parent tips for helping school-age children

If the child retelling or playing out the event over and over

- Permit the child to talk and act out these reactions. Let them know that this is normal. Encourage positive problem-solving in play or drawing.

If the child fears of being overwhelmed by his/her feelings

- Provide a safe place for them to express their fears, anger, sadness, etc. Allow children to cry or be sad; don't expect them to be brave or tough.

If the child has sleep problems

- Let your child tell you about the bad dream. Explain that bad dreams are normal and they will go away. Do not ask the child to go into too many details of the bad dream. Temporary sleeping arrangements are okay; make a plan with your child to return to normal sleeping habits.



Parent tips for helping school-age children

If the child is concerned about safety

- Help them to share their worries and give them realistic information.

If the child has aggressive or restless behavior

- Encourage the child to engage in recreational activities and exercise as an outlet for feelings and frustration.

If the child has somatic complaints

- Find out if there is a medical reason. If not, provide comfort and assurance that this is normal. Be matter-of-fact with your child; giving these non-medical complaints too much attention may increase them.



Parent tips for helping school-age children

If the child is closely watching a parent's responses and recovery

- Give children opportunities to talk about their feelings as well as your own. Remain as calm as you can, so as not to increase your child's worries.

If the child is concerned for other victims and families

- Encourage constructive activities on behalf of others, but do not burden with undo responsibility. Help children identify projects that are age-appropriate and meaningful.



Parent tips for helping adolescents

If the teen feels detachment, shame, and guilt

- Provide a safe time to discuss with your teen the events and their feelings. Emphasize that these feelings are common, and correct excessive self-blame with realistic explanations of what actually could have been done.

If the teen demonstrates self-consciousness about their fears, sense of vulnerability, fear of being labeled abnormal

- Help teens understand that these feelings are common. Encourage relationships with family and peers for needed support during the recovery period.

If the teen demonstrates acting out behavior; using alcohol and drugs, sexual acting out, accident-prone behavior

- Help teens understand that acting out behavior is a dangerous way to express strong feelings (like anger) over what happened. Limit access to alcohol and drugs. Talk about the danger of high-risk sexual activity. On a time-limited basis, have them let you know where they are going and what they're planning to do.



Parent tips for helping adolescents

If the teen fears the recurrence and reactions to the reminders

- Help to identify different reminders and to clarify the difference between the event and the reminders that occur after it. Explain to teens that media coverage of the disaster can trigger fears of it happening again.

If the teen has abrupt shifts in interpersonal relationships

- Explain that the strain on relationships is expectable. Emphasize that we need family and friends for support during the recovery period. Encourage tolerance for different family member's courses to recovery. Accept responsibility for your own feelings.

If the teen has radical changes in attitude

- Explain that changes in people's attitudes after a disaster are common, but will return back to normal over time.



Parent tips for helping adolescents

If the teen wants premature entrance into adulthood

- Encourage postponing major life decisions. Explain how a crisis time is not a great time to make major changes . Find other ways to make the adolescent feel more in control over things.

If the teen has concerns for other victims and families

- Encourage constructive activities on behalf of others, but do not burden with undo responsibility. Help teens to identify projects that are age-appropriate and meaningful.



Managing reactions to catastrophic event in adults

High anxiety/arousal

- Use breathing and/or other relaxation skills

Concern or shame over your own reactions.

- Find a good time to discuss your reactions with a family member or trusted friend. Remember that these reactions are common and it takes time for them to subside. Correct excessive self-blame with realistic assessment of what actually could have been done.

Feeling overwhelmed by tasks that need to be accomplished

- Identify what your top priorities are. Find out what services are available to help get your needs met. Make a plan that breaks down the tasks into manageable steps.



Managing reactions to catastrophic event in adults

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- Use breathing and/or other relaxation skills

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- Find a good time to discuss your reactions with a family member or trusted friend. Remember that these reactions are common and it takes time for them to subside. Correct excessive self-blame with realistic assessment of what actually could have been done.

Feeling overwhelmed by tasks that need to be accomplished

- Identify what your top priorities are. Find out what services are available to help get your needs met. Make a plan that breaks down the tasks into manageable steps.



Managing reactions to catastrophic event in adults

Fears of recurrence and reactions to reminders

- Be aware that reminders can include people, places, sounds, smells, feelings, time of day. Remember that media coverage of the disaster can be a reminder and trigger fears of it happening again.

Changes in attitude, view of the world and of oneself

- Postpone any major unnecessary life changes in the immediate future. Remember that dealing with post-disaster difficulties increases your sense of courage and effectiveness. Get involved with community recovery efforts.

Using alcohol and drugs, or engaging in gambling or high-risk sexual behaviors

- Understand that using substances and engaging in addictive behaviors can be a dangerous way to cope with what happened. Get information about local support agencies.



Managing reactions to catastrophic event in adults

Shifts in interpersonal relationships

- Understand that family and friends are a major form of support during the recovery period. It is important to understand and tolerate different courses of recovery among family members. Rely on other family members for help with parenting or other daily activities when you are upset or under stress.

Excessive anger

- Find ways to manage your anger in a way that helps you rather than hurts you. Take time to cool down, walk away from stressful situations, talk to a friend about what is making you angry, get physical exercise, distract yourself with positive activities or problem-solve the situation that is making you angry.

Sleep difficulties

- Make sure you have good sleep routines.



References and additional resources

- Psychological First Aid: Field Operations Guide
<https://www.ptsd.va.gov/professional/materials/manuals/psych-first-aid.asp>
- Information on coping after a disaster or tragedy
<https://www.psychiatry.org/patients-families/coping-after-disaster-trauma>
- Information on coping with mental illnesses. Learn about common mental disorders, including symptoms, risk factors and treatment options. <https://www.psychiatry.org/patients-families>
- Talking to Children About Disasters
<https://www.psychiatry.org/news-room/apa-blogs/apa-blog/2015/08/talking-to-children-about-disasters>
- Talking to Children about the Shooting
http://www.nctsn.org/sites/default/files/assets/pdfs/talking_to_children_about_the_shooting.pdf
- The NPA has compiled a list of psychiatrists and other mental health professionals who are available to provide counseling and support through this difficult time. Contact The NPA at office@nvpsychiatry.org