# Person-Centered

# Stress First Aid for Patients, Clients and

Customers









### **National Center for PTSD**

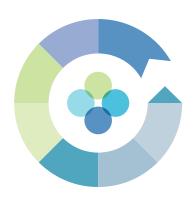
VA's National Center for PTSD is a world leader in research and education programs focusing on PTSD and other psychological and medical consequences of traumatic stress. Mandated by Congress in 1989, the Center is a consortium of seven academic centers of excellence providing research, education, and consultation in the field of traumatic stress.



# Person-Centered

# Stress First Aid for Patients, Clients and Customers





# Acknowledgements



THIS MANUAL WAS ADAPTED by Patricia Watson and Richard Westphal from the Fire/EMS public-facing version of SFA called *Curbside Manner: Stress First Aid for the Streets*. It has been adapted for those in public health, public mental health, and healthcare settings who work with people affected by adversity.

The original *Curbside Manner: SFA for the Streets* manual was authored by Richard Gist, Ph.D., of the Kansas City (MO) Fire Department, Patricia Watson, Ph.D., of the National Center for PTSD, Vickie Taylor of Prince William (VA) Community Services/ NFFF Behavioral Health Specialist and Erika Elvander of the Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury. Captain Frank Leto of the FDNY Counseling Unit,

Captain Bob Martin of the Chicago Fire Department,
Captain Jim Tanner of Prince William (VA) Fire and Rescue
and District Chief Don Vaught of the Eugene (OR) Fire
& EMS Department served as subject matter experts,
reviewers and contributors. Amy de Boinville (NFFF)
provided design and graphic support, Tricia Hurlbutt
(NFFF) provided editorial guidance, and JoEllen Kelly, Ph.D.
served as Project Manager.

The Curbside Manner: SFA for the Streets manual is a civilian adaptation of the Combat and Operational Stress First Aid (COSFA) Field Operations Manual, developed by the Bureau of Medicine and Surgery, Department of the Navy, in cooperation with the Combat and Operational Stress Control, Manpower & Reserve Affairs, Headquarters



Marine Corps, the Navy Operational Stress Control, Chief of Naval Personnel, Total Force N1 and the National Center for PTSD, Department of Veterans Affairs. The principal authors of the COSFA Field Operations Guide included: William Nash, M.D., Captain, MC, USN (Retired), Richard J. Westphal, Ph.D., PMHCNSBC, Captain, NC, USN (Retired), Patricia Watson, Ph.D., of the National Center for PTSD and Brett Litz, Ph.D., of the Mental Health Core of the Massachusetts Veterans Epidemiological Research and Information Center at the VA Boston Healthcare System. We are grateful to the military units and bureau listed above for allowing the adaptation of their work in order to help our nation's professional caregivers who are dedicated to helping those in crisis and with stress injuries.

Some examples in this manual were taken from *Curbside Manner: SFA for Pretrial and Probation Officers*, which was authored by Patricia Watson and Vickie Taylor, with assistance from federal probation officers, including Melissa Alexander, Toni Baker, Matthew Bennett, Kristy Burton, Jaime Chairez, Scott Christensen, Richard Cortinaz, Scott Davidson, Mary Jean Gagnon-Odom, Wilt Johnston, Brent Keith, Lisa Feuerbach, Kevin Lavigne, Jaime L'Lairez, Kristin Moran, Levi Metzger, Kit Myers, Ellen Phillips, Kristen Simmer, Jessica Soileau, BrendaTate, Jessie Thompson-Kelley, Brian Topor, Kathryn Uren, Sheryll Vilcinskas, Kimberly Weaver, Brittany Warren, Wade Warren, and Vakida Wilson.

# **Stress First Aid Model**



The SFA Model is a framework that includes seven actions, the Seven C's. The cycle begins with the onset of stressors that are accompanied by distress or loss of function, and continues to wellness. Check and Coordinate actions are repeated throughout the cycle, and the other five C's are used as needed.

# Table of Contents

National Center for PTSD 2
Acknowledgements4
SFA: Actions and Examples 6
Overview6
1.Check11
2.Coordinate: Referral12
3.Cover13
4.Calm14
5.Connect
6.Competence
7.Confidence
8.Self-Care
9.Summary25
Appendix 1: Active Listening Tips
Appendix 2: Possible Reactions
During Adverse Events
Appendix 3: Helpful Thinking
During Adverse Events
Appendix 4: Conflict Resolution and Positive
Communication38



# SFA: Actions and Examples



# **Overview**

THOSE WHO WORK IN PUBLIC HEALTH OR HEALTHCARE SETTINGS regularly encounter people affected by stressful or adverse situations. The support people need to get through such events starts with their first encounter with you. When they see you as a source of support, they will be more able to regain their sense of control and self-efficacy (the feeling that they can cope with what is happening) and better able to recover from stressful situations.

What people you assist will remember most is not what you did as much as what it meant to them that you did it.

They may not understand or remember the exact words you say, but they will never forget how you made them feel. Most importantly, you made them feel that they mattered.

Whether you are working with someone in a hospital, a clinic, or in some other setting — virtually or in person — it is your caring and respect that really make the difference. Stress First Aid (SFA) was originally designed to improve self-care and peer support in high-stress occupations, but the same framework can be utilized to help you offer the most person-centered care in every



encounter with patients, clients, customers, or anyone receiving services or support. It is based on empirically identified elements from more than two decades of research into what helps people who have experienced adverse circumstances recover from those experiences. While the elements apply to any adverse experience, the way they are used differs depending on the context within which they are applied.

### What is Stress First Aid?

The SFA framework incorporates simple, supportive actions that can be used as needed with distressed or disoriented individuals. These should be integrated into your work in a natural, seamless way. While they may involve only a small amount of effort, these actions can make a huge difference in how readily the people you work with recover from stress. Equally important, providing a more compassionate and helpful level of care can make you feel better about the quality of service you provide.

SFA offers a range of basic actions to assist individuals who are experiencing reactions to stressful circumstances and helps to create bridges to higher levels of care when needed.

### SFA is Guided by a Set of Essential Principles

SFA is based upon five essential principles that were derived from a review of more than two decades of research. These five principles are empirically linked to improved recovery across many settings:

- 1. Helping people regain a sense of safety (cover).
- 2. Restoring calm by reducing intense physiological arousal and negative emotions.
- 3. Helping people connect to sources of social support.
- 4. Increasing the person's sense of self-efficacy, or competence to handle situations that create stress.

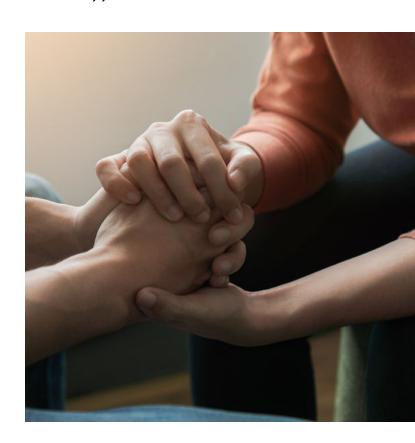
5. Helping restore a sense of hope, or confidence in themselves and the world.

The five core actions of SFA are based on these five essential principles: **Cover, Calm, Connect, Competence** and **Confidence**. The use of these core actions helps people deal with stress, crisis and loss.

These approaches should be:

- Used flexibly and naturally, wherever or whenever needed.
- Individualized to the needs of each person in the context of the situation — there are no one-size-fitsall solutions.
- Used in collaboration with others to create the most effective solutions.

The most basic principle in SFA is to treat people as you would want to be treated. But SFA also strives to treat them as they most need to be treated, even if it is different from the way you would want to be treated.





### **Basic Objectives of SFA**

The basic objectives of SFA are to:

- Establish a connection in a helpful and respectful manner.
- Help the person feel heard, supported and understood.
- Restore and support a sense of safety.
- · Calm and orient distressed individuals.
- Connect individuals to sources of social support.
- Help improve people's ability to address their most crucial needs and concerns.
- Help increase hope and confidence, and limit selfdoubt and guilt.

One size does not fit all. The action you take depends on what is wrong and your assessment of how best to help.

You are most likely already performing many of these actions in the course of your work. However, as you start to use SFA, you will find that you get a better sense of which



core actions are most needed in any given situation. Your actions will be guided by the information you collect, and through observation, conversation and experience.

### Components of Each SFA Action

Each SFA action has three parts:

- APPROACH: How you establish rapport with the person through respect and compassion.
- INFORMATION: What information to both collect and give, and how to manage the process.
- DIRECTION: How to direct a person's actions in a way that supports the person and increases their ability to comply with your requests.

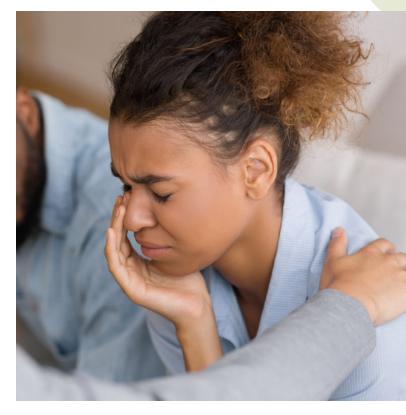
### **APPROACH**

Your attitude and approach with a stressed individual may be the most significant part of your interaction with them. If you demonstrate interest and calm concern, you can be more helpful to a person who is feeling overwhelmed or confused. If you utilize a respectful and compassionate approach, you can establish a partnership with the person. You can then collect information that allows you to identify their most crucial needs and concerns, increase willingness to discuss difficult situations and emotions, and increase the person's receptiveness to further assistance. The following actions will support these goals:

- Demonstrate a respectful, courteous and helpful attitude. Listen carefully, paying close attention to how you can best be of assistance.
- Speak clearly and in simple language, avoiding terms the person may not understand.
- Introduce yourself and convey your role and what you can provide.
- Ask how you may help and if suitable also ask the name of the person. Accept that under certain circumstances, they may not want to give you their name, but if they do give you their name, refer to it



- thereafter: "How may I help you? May I also ask your name, so I know what to call you?"
- Show understanding. Use your tone of voice, comments, and a show of empathy and respect to become an ally they feel they can trust. Convey that your attention is personal and that you want to understand their situation and their feelings about it. Ask how they are feeling, let them know it is understandable that they would be feeling that way under the circumstances, listen carefully and respond in ways that demonstrate that you have heard them (see appendix 1 on active listening skills).
- Make an effort to show concern, a focus on what can be achieved in the present moment, and clear thinking, to give the person the sense that they can rely on you.
- Address the person's most crucial needs and concerns whenever possible.
- Set some helpful boundaries by mentioning how much time you can spend with the person, so they are prepared for the amount of time you can spend with them. For instance, you could say something like:
  - "There seems to be a lot on your mind, and there are also a lot of things that need to happen in the next [x] minutes. Help me understand your top priorities and concerns right now, and then together we can decide how to proceed."
  - "When we have talked for about 10 minutes, we can take stock and decide how best to proceed."
- Validate what the person has been through and acknowledge, as realistically as possible, their resilience and coping efforts thus far.
- Take your cues from the person to ensure that your comments or questions aren't perceived as intrusive.
- When giving suggestions for actions the person can take, make sure the person understands what you are saying. If needed, ask them to repeat directions back to you.



# EXAMPLES FROM THE FIELD: **APPROACH**

"Your approach to working with people sets the tone of how things are going to go for that person. It's vital. If you have an 'I don't care' attitude, you're going to lose that person. Rather, you should be caring and genuine with active listening."

"I try to relate to them, try to find common ground.

I explain the role that we have, and that we can help them stay on track."

"You need to treat them with respect. You don't have to agree in any way, shape or form with their behaviors, but you have to go forward in a respectful manner."



### INFORMATION

The way you both collect and give information can affect the way a person focuses, processes what is happening and feels about their interaction with you. The general principles of collecting information will be covered in detail in the Check core action of SFA.

- Each element of SFA includes different strategies for collecting and giving information that will both maximize your ability to do your job and reinforce the principles of safety, calming, connectedness, selfefficacy and hope.
- When giving information, do your best to make it simple and accurate, focused on how the person can potentially take the next steps towards addressing their concerns. Additionally:
  - Be open and direct about what you do not yet know. Use your judgment as to whether and when to present information. Make sure the person appears able to understand what is being said and is ready to hear the content of the message.
  - Do your best to make sure information or instructions are practical, achievable, succinct, and specific.
  - If you do not have an answer to the person's question, do not guess in order to provide reassurance. Instead, let them know that you will try to get the information for them, or provide a way for them to get the needed information.





### **DIRECTION**

The way you provide direction can have a strong impact on the person's actions in the moment. Here are some ways that can help:

- Provide clear and positive direction, directing them in what to do rather than what not to do.
- If a person is in the middle of a stressful situation, ask them what can distract them and/or makes them feel they are accomplishing something.
- Involve the person in developing a simple action plan that focuses on and prepares them for what they can control.
- Have the person commit to the action plan.
- If you have to act firmly or abruptly, moderate the impact at your first opportunity by returning to a calm tone, explaining the importance of compliance with your instructions and emphasizing that the person's safety and protection is your foremost concern.
- Reinforce compliance by promptly and positively acknowledging actions that follow instructions.



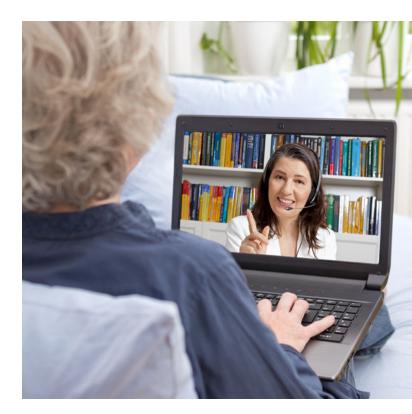
# 1. Check

The goal of check is to collect enough information so that you can:

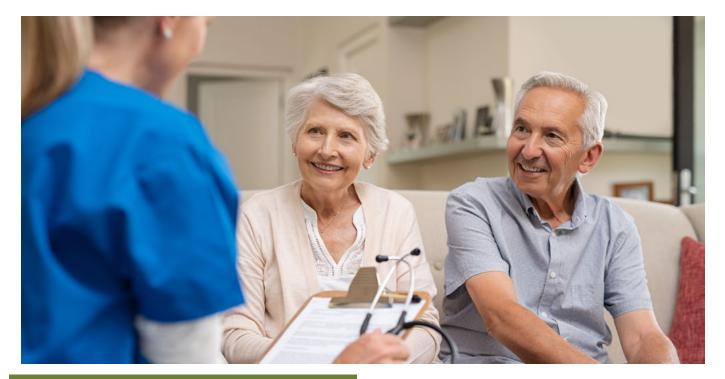
- Determine the most crucial needs and concerns of the person.
- Identify any needs for immediate referral or additional services.
- Decide what other actions might enhance your work together.
- Focus on current concerns rather than past problems, in order to maximize the use of your time and give information that is immediately helpful in the present moment.
- When collecting information, focus on current concerns rather than past problems, in order to maximize the use of your time and give information that is immediately helpful in the present moment. This involves keeping your time together on course, redirecting the person if necessary, and refraining from offering interpretations on behaviors.
- Collect information in an informal and flexible way: ask questions, observe, check with others who may have additional information and continue to monitor and keep track of input throughout all interactions.
- Adapt your style of collecting information if a person's age, history, gender or culture interferes with your ability to communicate effectively.
- Follow the person's lead in clarifying their concerns, while paying attention to whether or not your questions might be prompting unnecessary distress.
- When you are collecting information, if the person wants to talk about something that was or is particularly difficult for them, use reflective or supportive comments (see appendix 1 on active

listening skills), which can often help the person to feel understood and accepted:

- "It sounds as if \_\_\_\_ and now you are experiencing
- "Let me make sure I have this correct. You say you've experienced \_\_\_\_ and are feeling \_\_\_\_."
- "It's understandable that you would feel this way, given what you've experienced."
- It may not be easy to resist the impulse to say or do something, but don't feel compelled to jump in with questions or comments unless there is a need to structure the conversation. At other times, the person may want to talk about something in more detail, but you will not have the time to listen fully. If this occurs, make sure you let them know that while you would like to be able to listen, circumstances will not allow you to listen beyond a certain time limit. Then let them know that you want to help with their most pressing needs and concerns, but don't want to have to cut them off. If possible, make an effort to get them referred to someone who has the time to hear their full story.







# 2. Coordinate: Referral

You may not feel that you can help every person in need who you work with. If the person is showing significant signs of stress that seem beyond your skill level:

- Reflect back that you can understand why the individual is feeling overwhelmed.
- Collect information from the person regarding whether the behavior is a worsening of a pre-existing medical or behavioral health condition, and if there are current medications that require ongoing monitoring. This information will be helpful when referring on for further care.
- Within your capabilities, try to help with any specific pressing needs or concerns.
- Speak firmly if needed but avoid any actions that might suggest agitation on your part.
- Let the person know that stress reactions, while they may be alarming, are understandable.
- If necessary and appropriate, tell the person that you feel that a referral would be helpful or is necessary.

Then tell them what the next steps will be for referral to a higher level of care. The more you can inform them about the steps that will happen next, or the services you are referring them to, the more in control and supported they will feel.

Consider referring the person to more specialized help if they:

- have not been able to sleep for the last week
- · are confused and disorientated
- are so distressed that they are unable to function normally and care for themselves or their children
- report losing control over their behavior and behaving in unpredictable or destructive ways
- threaten harm to themselves or others
- report excessive and/or out-of-the-ordinary use of drugs or alcohol
- have chronic health conditions and need more supports
- report symptoms of severe mental health conditions
- are experiencing violence or abuse.



# 3. Cover

The Cover action of SFA promotes an individual's psychological sense of safety. Promoting a sense of safety has been shown to positively influence the way people process what happened to them both physically and psychologically and can have a strong effect on their ability to recover from stress. You can support a person's psychological sense of safety through the following actions.

### INFORMATION

- Ask the person if they have any concerns, priorities, or special needs that you should know about.
- Ask questions to get a better understanding of the person's current sense of safety, such as:
  - "Are you feeling concerns about safety right now?"
  - "Can you tell me what the concerns are related to?
    - A work situation?
    - Something happening in the home?
    - In relation to someone you care about?
    - In the community?"
  - "Sometimes those who have gone through a similar event say that it made them feel apprehensive or afraid. How has it been for you?"
  - "What are some things that you have done to feel safer?"
- Give simple, accurate information about what to expect and how to make the situation safer.
- Give information that directly addresses the person's immediate goals and clarify answers as needed.
- Give information that is as clear and as accurate as you can make it under the circumstances.

### DIRECTION

- Direct the person as to what to do, rather than what not to do.
- If warranted, work to help the person make their location safer.





- If a person is compromising their own or others' safety and you need to get them to be safer, do so in a way that is not likely to be perceived as disrespectful or hostile.
- You can help the person increase their sense of safety by sharing trusted information and resources on how they can protect their health and well-being.
- You can help them feel safer by helping them prepare for a range of possible scenarios and to be ready for ambiguity as there is rapidly changing information and guidance.

# EXAMPLES FROM THE FIELD: COVER

"Some of the Cover Actions I use are to:

- Validate their concerns and help them identify positive immediate goals
- Give information that helps them understand what they can do
- Be nonjudgmental and genuine
- Help with simple problem-solving
- Refer them to further care if needed"

"When individuals engage in behaviors that lead to potential harm to themselves or others, referrals to the appropriate entities are the first recourse."

"I determined pretty quickly that that the person had some significant safety concerns. We ended up creating a plan together that included practical information, resources, ways to get social support, and some simple actions to take to feel safer."

# 4. Calm

The next core action of SFA is Calm. There is overlap between the actions of Cover and Calm. Actions that promote one of these two functions often help with the other. However, while Cover's goal is safety, it is important to understand that the goal of Calm is to reduce the intensity of physiological, emotional and behavioral activation.

Calming people in the course of your work will help reduce the stress reactions that interfere with basic functioning, reasoning, and other aspects of their life. Reducing stress reactions has been proven to reduce associated biological reactions that interfere with sleep, eating, hydration, decision making and performing daily life tasks. The better able a person is to gain a calm equilibrium, the better they can establish these life functions, and the less prone they will be to longer-term behavioral health problems.

The choices you make about how to calm others will vary with the circumstances of the situation, the person you are dealing with and your own personal style. There are many ways to calm those you are working with, and the following actions will assist you in achieving that goal.





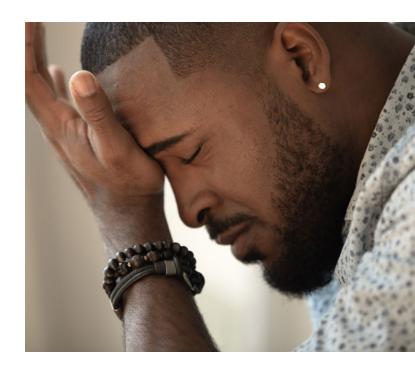
### **APPROACH**

- Make an effort to demonstrate a calm demeanor and speak in an even, reassuring voice, unless you are trying to match the person's intensity in order to get their attention or let them know that you see how upset they are. In most cases, by modeling calmness yourself, you can help people feel calmer and more focused themselves.
- Show understanding. Use your tone of voice, comments, and reflective statements to become an ally they can trust.
- When a person is emotionally overwhelmed but does not appear to be a danger to themselves or others:
  - Try to be accepting of strong emotional responses that do not interfere with the individual's safety or that of others.
  - Remain available, stay calm and keep quiet.
- For bereaved individuals:
  - If you don't know what to say, be quiet and listen.
     There really is nothing to say, so the focus should be on the supportive presence you provide.
  - Don't try to make a bereaved individual feel better, because there is no better way to feel at the moment. Just be there with them.
  - Be careful with anything you say to try to make a person feel "better." Platitudes such as "At least they went quickly," "You are strong enough to deal with this," "It's good that you are still alive," "It was probably for the best" or "You'll feel better soon" can make a bereaved person feel that you did not understand the pain they are experiencing. If the bereaved person says any of these things, you can respectfully acknowledge the feeling or thought, but don't initiate a statement like this yourself.
  - When a person does want to talk, listen quietly and attentively and don't feel compelled to talk.
     There are no "magic words." You can communicate concern and readiness to assist with human presence and contact, if appropriate, or through

- simple statements such as: "I'm sorry that you have to go through this."
- Be aware that culture, upbringing and individual differences play a role in shaping beliefs about death, expressions of grief and mourning traditions. The behaviors grieving individuals express will vary widely. Do your best to respect cultural, familial and individual needs.
- Acknowledge that physical distancing can increase feelings of isolation and sorrow.

### INFORMATION

- Use the collection of information to calm the person.
   You can do this by encouraging the person to answer
  a series of simple and direct questions that can help
  focus their attention if they feel overwhelmed. You can
  also ask questions that follow the framework of the SFA
  model in a structured way, to help focus the person.
- Ask questions to get a better understanding of the person's current sense of calm:
  - "How are you feeling about your ability to feel calm, or steady?"







- "What changes have occurred regarding sleep, feelings of being on edge, or ability to keep calm?"
- "Sometimes those who have gone through a similar event found it helpful to build more calming activities into the schedule for a period of time, like taking a break, going for a walk, talking with someone, or slowing down their breathing, etc."
  - "Do you think this would be helpful for you?"
  - "If so, do you have any preferences for activities that would be most helpful for you?"
- Give information on expected reactions to normalize them (see appendix 2 on possible stress reactions).

### DIRECTION

- Keep the focus on what is going on in the present moment. Suggest things to do that are active, practical and familiar.
- Direct the person to find simple ways to calm themselves.
- Calming strategies are very personal, but you can suggest the following strategies:
  - Calming actions such as breathing exercises, meditation, exercise, stretching, yoga, prayer,

- listening to music, writing in a journal, or spending time outdoors. Refer to good sources for on-line yoga, exercises, relaxation or mindfulness.
- Engaging in satisfying or rewarding activities.
- Reduction of unhelpful strategies which seem to help in the short term but can make things worse in the long term, such as exclusive reliance on alcohol to relax, or excessive exposure to the news, particularly prior to sleep.
- Practice helpful, less extreme ways of thinking, with the goal of modifying thoughts so that they are both realistic (e.g., "bad things might happen") and helpful (adding to the thought, "but if they do, I can handle it with help."). A table of commonly-experienced unhelpful thoughts, as well as some possible more helpful thoughts, is included in appendix 3.
- If a person is too upset, agitated, withdrawn or disoriented to talk, or shows extreme anxiety, fear or panic:
  - Remind them, if necessary, to slow their breathing.
  - Orient the person by turning their attention away from thoughts and reactions toward what is happening in the present moment.





- Ask the person to describe their surroundings, and to tell you non-distressing things they can see, hear, touch or smell.
- Get help or refer to a higher level of care if the situation is uncomfortable or overwhelming.

### **Calming Those Who Are Angry**

The following actions can help you to maximize compliance and reduce the likelihood that other interventions will be needed.

### **APPROACH**

- Because anger usually arises out of fear, it can be helpful to ask about the person's main concerns and try to address at least one.
- Convey understanding about how they might be frustrated or angry, given what has happened.
- Hold your ground firmly but try to avoid sounding hostile or confrontational.

### INFORMATION

- Ask what they want to see accomplished.
- Question them about specifics, in an attempt to help refocus their attention and redirect their emotions.
- Let them know in a firm but calm way that anger may not be the best way to get their needs met.
- Give them information on conflict resolution or positive communication (see appendix 4 on conflict resolution).

### **DIRECTION**

### **Distract:**

- Suggest taking a break such as walking away or doing something else for a while.
- Encourage them to distract themselves with an activity or action that is positive, helpful to others or would meet some of their other goals.

### **Defuse:**

- Suggest looking at the situation in a different way or from another's viewpoint.
- Encourage talking to a friend or loved one.

### **Distance:**

 Suggest finding ways to get distance from those they are having conflict with.



### **Deter:**

- If the angry individual appears uncontrollable or likely to become violent, seek immediate assistance from law enforcement.
- In some cases, it will not be possible to end the conversation on a civil note. Should this be the case say something like: "I am sorry that I have not been able to help you with your concerns. If you want to speak with someone else, you are very welcome to do that."



# EXAMPLES FROM THE FIELD: CALM

"When a person needs calming, I have remained calm, spoken in a quiet voice, asked them to breathe. I've also asked them what they needed, actively listened, and given simple suggestions for calming."

"If the person is angry, I genuinely try to find a way to understand why they might be frustrated or angry and tell them I'm sorry they're having to go through this. Then I try to see if I can address at least one aspect of what they are frustrated about."

"I'll say to the person, I'm here to help you through this. First, take a breath. Try slowing down your breathing —this sometimes helps."

"Sometimes, when emotions are high, I take the time to answer any questions they have about what may be ahead for them."

"I listen to them and then provide them with resources If I could not help them with an issue/question."

"I discuss their choices with them, help them to develop some simple calming strategies, and then validate when they make choices to pursue more effective calming strategies."





# 5. Connect

Emotional well-being is enhanced when a person can receive support from their family, friends and community. If you can connect the person with supportive others, they will typically be better able to cope and can potentially take a more active role in supporting others.

### **APPROACH**

- Appreciate that most individuals want to be in contact with friends or loved ones. Make it part of your job to facilitate creative ways to connect with these people when possible.
- Aim to be a nonjudgmental source of support for the person yourself, particularly when they don't feel like they have other sources of social support.

### INFORMATION

- Ask questions to get a better understanding of the person's current sense of connectedness:
  - "Have you noticed any changes in how you connect with family, friends, or coworkers? If so, what have you noticed?"
  - "Who do you feel most close to (including pets)?
     Who are the people in your world that you trust to share your tough days with? I want to make sure that you have someone who can be there for you."
  - "Has anyone you know done or said something that really helped? What was it?"
  - "What are some things that you have done to connect with others that have been helpful?"
- Give information about sources of support with those who have been through similar situations, such as support groups, faith communities, hobbies and clubs, or online community networks.
- Find out what barriers they might have to getting social support.







- Find out if there are negative sources of social support in their environment.
- Let the person know that you are a source of social support for them.

### DIRECTION

- Foster connection with family, friends, or supportive others (e.g., support groups).
- Foster healing of rifts in families and friends if necessary and possible.
- Suggest flexible, creative, and feasible ways to access support.
- If they are experiencing conflict with others, sharing simple positive communication strategies may be also be helpful (see appendix 4 on conflict resolution).

# EXAMPLES FROM THE FIELD: CONNECT

"Being nonjudgmental can help in the person feel more of a connection with me."

"I do simple things to help them connect with the people they want to connect with, like asking if we can call someone or helping them brainstorm who they would like to contact."

"I've tried to step in if families are starting to argue, to explain how they can work together. I also sometimes explain that although it is common to get angry in situations like this, their mutual support and understanding will help them get through the situation."

"I refer some people to a virtual support group so that they can develop a network outside of their family for support with peers in a similar situation."



# 6. Competence

People you encounter may have sometimes suffered the loss of resources, or they may have had unmet needs before the circumstances that that brought you into their lives. One of the key actions that you can offer is to help them problemsolve, choose healthy ways to cope, or help them secure basic, practical assistance or other resources that can help them feel more able to navigate through their current circumstances. This will help increase their sense of control and self-efficacy and can improve their prospects for getting on their feet.

### **APPROACH**

- Aim to help with getting practical needs met, if possible.
- Validate what the person has been through and acknowledge and reinforce, as realistically as possible, their resilience and coping efforts thus far.
- Appreciate that most individuals want to improve their life circumstances. Make it part of your job to facilitate that process whenever possible (e.g., by helping them get access to resources).

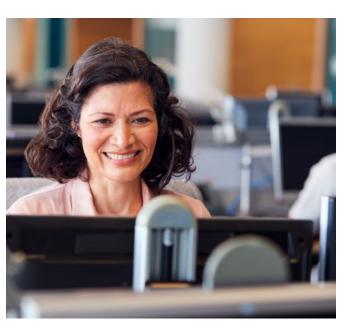
### INFORMATION

- To help people find resources and take steps to meet their needs, you will need to know:
  - What issues have contributed to their current situation?
  - What are their basic needs at the moment?
  - What role can you take to help with those needs, and if it is not your role to help with those needs how can you explain your role and get assistance?
- It may be helpful to ask the person a few questions to get more information about what their specific needs are, such as:
  - "Have you noticed any difference in how you are able to do the things that are most important to you in both your personal and professional life?"

- "Have you noticed any difference in how you are able to get along with others?"
- "Have you noticed any difference in how you are taking care of yourself: diet, exercise routine, sleep, taking time for fun, etc.?"
- You cannot expect to provide all resources yourself but do what you can, especially in connecting them to the top priority resources that they identify.
- Many people can be frightened, confused and/ or distressed, and most understand that there is a limit to what you can do. As you transfer them to other resources, don't forget to encourage them to use community services and agencies that are set up to assist them. Taking a moment to do this, or to describe the resources in more detail, can effectively empower them to take action.

### **DIRECTION**

- Help the person in taking the next steps they need to take.
- Suggest that they revise priorities and expectations to take into account current circumstances, so they're not being unduly demanding of themselves.





- Remind them to move away from maladaptive coping actions that perpetuate or increase problems, such as social withdrawal, working too many hours, anger, blame, increasing use of alcohol or substances as their primary coping mechanism, and not taking care of their health.
- Encourage them to choose adaptive coping actions that lessen distressing reactions and improve the situation, such as getting adequate rest, eating a healthy diet, maintaining some form of exercise, engaging in positive distracting activities, trying to maintain a normal schedule to the extent possible, maintaining social connections, and creative problem-solving.
- Adjusting your guidance to the context of what they are experiencing, help them make clear plans to:
  - mitigate circumstances that are stressful, as well as their own stress reactions
  - set daily routines that ground them and make them feel like they are accomplishing something linked to their values
  - seek out mentoring or information to help make decisions and take actions
  - gather information that can make them feel more informed and supported
  - set achievable goals.

# EXAMPLES FROM THE FIELD: COMPETENCE

"Should the person ask for me to tell them what to do, I say something like: 'I am not sure I can answer that question for you. What are you thinking about when having to make this decision? What are some things that you have done to cope that have been helpful in the past?"

"We're often building competence by starting at a really basic level, which comes down to discussing different strategies, and identifying supportive people and environments."

"Part of the conversation can involve role modeling problem-solving, or how to find resources."

"I highlight, praise and positively reinforce when I see the person exercise self-control or use positive coping skills, and I help them problem solve how to address their basic needs."

"If the person is in a situation that involves ongoing concerns about safety, I provide guidance about

what people in survival situations have done, such as the following suggestions:

- Recognize, acknowledge, and accept the reality of the situation.
- Prepare for and make a plan for how to deal with feeling overwhelmed or overly distressed, to help feel more in control.
- Combat unhelpful emotions by using distraction or staying busy—both mentally and physically.
- Avoid impulsive behavior.
- Get organized.
- Increase positive coping behaviors that have worked in the past.
- Shift negative self-statements to statements that allow you to function with less distress. For instance, try changing 'this is a terrible time' to 'this is a terrible time, but with help I can get through this.'
- Focus on what you can accomplish or control.
- Seek out mentoring or information to improve your ability to make decisions and take actions when necessary.
- Try to engage in the situation as a challenge to be met, which can increase your ability to act both creatively and decisively."





# 7. Confidence

People are more likely to have hope if they have access to practical resources and are confident that there is a high probability that things will work out well or that outside sources will act benevolently on their behalf.

The Confidence action seeks to increase hope, optimism, and sense of meaning. It also seeks to address the fact that people may blame themselves or others for what caused or contributed to the events in their lives, which increases distress and causes hopelessness, doubt or fear about what the future holds.

### **APPROACH**

 Try to keep a neutral attitude and avoid making comments that could be perceived as being judgmental.  Validate any strength you have seen in the person and point out positive actions they have taken.

### INFORMATION

- Ask questions to get a better understanding of the person's current sense of confidence:
  - "What changes have you noticed in your sense of hope or optimism?"
  - "Have you noticed any changes in your confidence in yourself?"
  - "What changes have you noticed in your confidence in others?"
  - "Does this event/incident hold special meaning or connect with other experiences in any way?"
    - "If so, what is the meaning?"
    - "What experiences does it connect with?"
- Dispel misunderstandings, rumors and distortions, where possible



### DIRECTION

- Help to focus the person on the present moment. For example:
  - If the person is expressing guilt, express empathy and understanding, and say, "Let's focus on what you can do now."
  - Assign a task or an action to perform in the moment, to take their mind off of worries, regrets or memories.
- Remind the person that any decisions they may be worrying about were made during stressful life circumstances that were affected by multiple factors. Given the circumstances, these may have been the only decisions they could have made.
- Re-frame any negative thoughts or impatience the
  person is having with themselves or others so that
  they are more helpful thoughts. For instance, point
  out that you've seen similar situations and they can
  take some time to resolve, so they shouldn't put
  pressure on themselves or others to resolve things
  quickly. See appendix 3 for a table of unhelpful
  thoughts and more helpful alternatives.
- Help the person set a limit on their expectations, take small steps, and prioritize what they most need, so as to reduce a sense of being overwhelmed.
- Encourage them to celebrate even small successes, find things to be grateful about, and take satisfaction in completing tasks.
- Remind them to keep a long-term perspective while remaining focused on the present and the positive actions they can take in the moment.
- Suggest paying attention to what inspires or increases gratitude, or engaging in actions that support personal values, faith or spirituality.
- Be careful about the following:
  - Offering possibly inaccurate information, or potentially false hope. If you cannot answer a person's question, do your best to learn the facts.

- Saying anything that sounds judgmental about what they could or should have done.
- Statements or questions that can be perceived as accusatory such as, "Why were you doing that?" Instead make simple, nonjudgmental statements such as "I can understand why you are shaken up," "I know this can be tough" or simply "What can I do to help?"
- In situations where it seems like the person is responsible for something that may have put others in harm's way, maintain your professionalism. This means:
  - Do not convey your judgment.
  - Stay focused on doing your job.
  - Do not do or say anything that can be perceived as disrespectful.

The situation may not be what you think it is, and any disrespect or judgment conveyed by you can do more damage. Remember, your own reactions should be dealt with later.

# EXAMPLES FROM THE FIELD: CONFIDENCE ACTIONS

"I say, 'Let's just focus on what can be done in the moment. Addressing that will give a sense of accomplishment.' I'll tell them, 'You've got to do all those things. Let's just pick the one that's either easiest or most important to do first, those kinds of things. Once you've accomplished that, you can move onto the next thing.""

"I tell people that this is a chapter of their life, there's going to be one to follow, then there is going to be one after that. I do this to put it into perspective for them, because I don't want them to think this is the end."



# 8. Self-Care

Your work sometimes demands that you be able to distance yourself from your own emotions. However, there are times when caring for others in this capacity can mean letting your better emotions show. Learning the balance between caring and maintaining objectivity doesn't come naturally to everyone and can take a lifetime to perfect. If you are struggling to show care and respect, try not to let your frustrations show (e.g., making judgmental comments, being dismissive or cold or letting your impatience or frustration become obvious). Consider using the SFA model for self-care and to seek support from coworkers, mentors, or others.

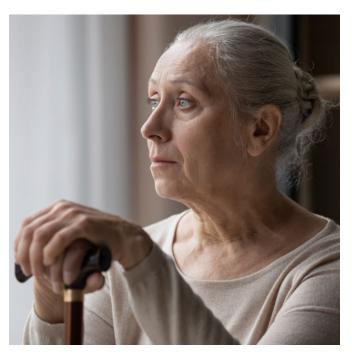
On a personal level, if you find yourself regularly having trouble showing respect and compassion for those you serve, take time to honestly reflect and reevaluate what is getting in the way. You may be suffering from personal, family, or relationship stressors, fatigue and/or burnout. If you find that you are regularly frustrated, irritable or angry when you are trying to help someone, it may be time to seek mentoring or consider taking a break, to help restore your satisfaction with the position and its demands.

# 9. Summary

You will not be required to provide all the actions described in SFA with every person you serve. Remember that SFA principles and actions are to be used as needed with distressed individuals, incorporated into your work in a natural, seamless way.

Keep in mind that the connection you make with the people you encounter in the course of your work is an essential part of how you can help them recover from the stress of what they have been through. You may not always remember all the specific SFA actions that might apply to any given situation. However, if you respectfully convey to the people you are assisting that they matter, that caring concern will leave a positive impression and help them get through the difficulties they face.





# APPENDIX 1:

# **Active Listening Tips**



National Center for PTSD

### APPENDIX



### Verbal Ways to Establish Rapport

- Identify who you are, the name of the program you represent if necessary, and what you have to offer in a relaxed, non-pressured way.
- Use positive, nonjudgmental questions such as:
  - "What's on your mind?"
  - "Can you say more about that?"
  - "What would you like to talk about today?"
  - "You seem sad; do you want to talk about it?"
  - "What most concerns you?"
  - "What thought keeps coming back to you? What do you keep telling yourself?"
  - "How have you been feeling since...?"
  - "Have you been through anything like this before? How is this similar/different?"
  - "How is this affecting how you feel about yourself, your relationships, and/or the world?"
- Use brief supportive responses to what the person is saying to convey attention and understanding, such as, "I see,"
   "Yes," "Right," "Okay," and "I hear you."
- Pay close attention to what the person is saying.

Don't	Do
Probe for details or insist that the person talk	Show interest, attention, and care
Rush to tell the person that they will be okay, that	Show respect for individual ways of coping
everything will be fine, that they should "move on," or that they should "look for the silver lining"	Talk about reactions that are to be expected, and about healthy ways of coping
Try to make the person feel that they should not	Acknowledge that stress can be hard
feel guilty	Be free of expectations or judgments
<ul> <li>Give advice instead of asking the person what works for them</li> </ul>	Help brainstorm positive ways of coping
Avoid talking about what is bothering the person because you don't feel that you can handle it	Convey your belief in their ability to handle what is in front of them
Daydream about or discuss your own personal experiences instead of listening	Encourage them to talk with a trusted peer/friend
Judge the other person because they aren't coping as well as you think they "should" be	



# **Active Listening Strategies**

The table below provides some simple strategies and sentence stems to help engage others in supportive conversations about their stress reactions. Use the table to identify potential ways to show empathy and care, adapting them to match your personality and relationship. Remember, you don't have to provide perfect support. Often the person just needs to know that someone cares enough to listen if they are able to talk about what they are grappling with. Even a short conversation can be helpful in conveying that the person is not alone and that someone cares about them.

Encourage Discussion	Examples
Behaviors	<ul> <li>Show interest, attention, and care</li> <li>Let them talk without interruption as much as is possible</li> <li>Be free of expectations or judgments</li> <li>Let them know they're not alone</li> <li>Share your own or proven ways of dealing with similar experiences</li> <li>Help them brainstorm solutions and weigh choices to make decisions</li> <li>Help them think through what meaning their experiences hold for them</li> <li>Remind them of their strengths/values</li> </ul>
Reflective Comments  (Lets the person know that you are aware of how they are feeling, and can encourage emotional expression)	<ul> <li>"It sounds like"</li> <li>"From what you're saying, I can see how you would be"</li> <li>"It sounds like you're saying"</li> <li>"You seem really"</li> <li>Make sure your reflections are correct by using sentences like:</li> <li>"Tell me if I'm wrong it sounds like you"</li> <li>"Am I right when I say that you"</li> </ul>

# APPENDIX



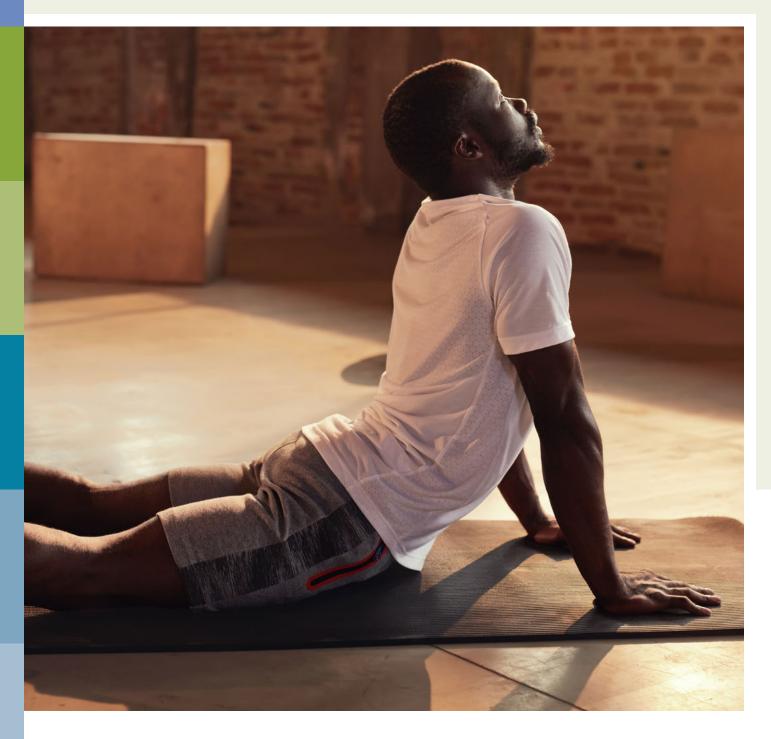
Encourage Discussion	Examples
Supportive Comments	<ul> <li>"No wonder you feel"</li> <li>"It sounds really hard"</li> <li>"It sounds like you're being hard on yourself"</li> <li>"It is such a tough thing to go through something like this."</li> <li>"I'm really sorry this is such a tough time for you."</li> <li>"We can talk more tomorrow if you'd like"</li> </ul>
Empowering Comments / Questions	<ul> <li>"I am glad that you spoke with me about this."</li> <li>"What have you done during difficult times in the past to make yourself better?"</li> <li>"Are there any things that you think would help you to feel better?"</li> </ul>
	<ul> <li>"Maybe there is a different way of looking at this that would help you move forward or have less guilt/shame/ anger"</li> <li>"People can be very different in what helps them to feel better. When things got difficult for me, it helped me to Would something like that work for you?"</li> </ul>
	<ul> <li>"I have links to information that I can send by email or text with some ideas about how to deal with difficult situations. Maybe there is something in them that could be helpful for you."</li> </ul>

**ADAPTED FROM:** Brymer, M., Layne, C., Jacobs, A., Pynoos, R., Ruzek, J., Steinberg, A., et al. (2006) Psychological First Aid Field Operations Guide (2nd Edition). Los Angeles, CA: National Child Traumatic Stress Network and National Center for PTSD



# APPENDIX 2:

# **Possible Reactions During Adverse Events**





Negative Mental Reactions	Positive Mental Reactions
<ul> <li>Intrusive thoughts</li> <li>Worry</li> <li>Self-blame</li> <li>Ruminating</li> <li>Decreased productivity</li> <li>Trouble making decisions</li> <li>Confusion</li> </ul>	<ul> <li>Determination</li> <li>Resolve</li> <li>Sharper perception</li> <li>Increased intuition</li> <li>Courage</li> <li>Optimism</li> <li>Inspiration</li> <li>Faith</li> </ul>

Negative Physiological Reactions	Positive Physiological Reactions
<ul> <li>Fatigue</li> <li>Headache</li> <li>Muscle aches</li> <li>Stomachache</li> <li>Increased heart rate</li> <li>Difficulties sleeping</li> <li>Nausea</li> <li>Shakiness</li> <li>Clumsiness</li> </ul>	<ul> <li>Alertness</li> <li>Readiness to respond</li> <li>Increased energy</li> <li>Adrenalin rush</li> </ul>

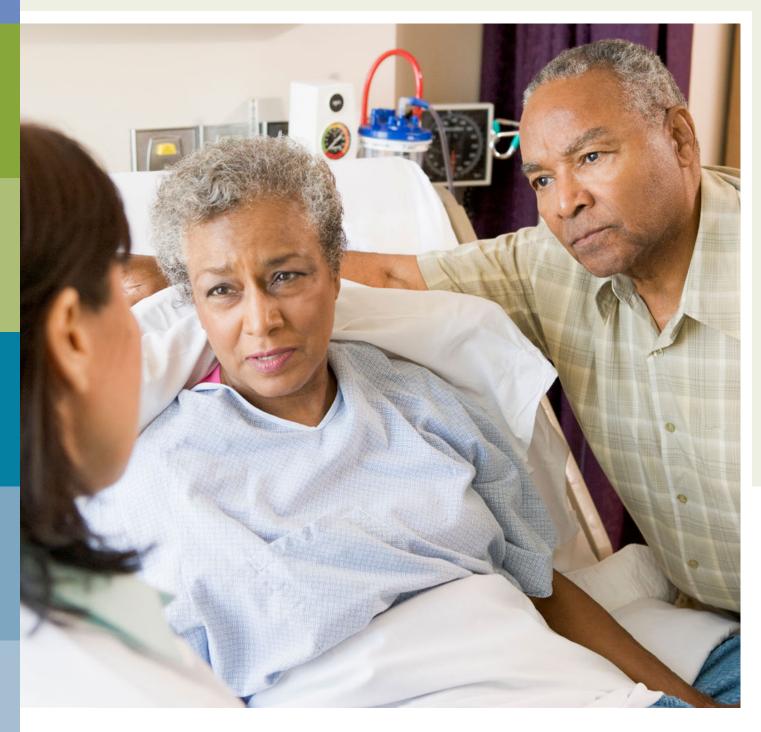
Negative Emotional Reactions	Positive Emotional Reactions
<ul> <li>Shock</li> <li>Sorrow</li> <li>Grief</li> <li>Guilt and shame</li> <li>Sadness</li> <li>Anger</li> <li>Numbness</li> <li>Irritability</li> <li>Fear</li> </ul>	<ul> <li>Inspiration</li> <li>Involvement</li> <li>Positive challenge</li> <li>Mobilization</li> <li>Gratitude</li> </ul>

Negative Social Reactions	Positive Social Reactions
<ul><li>Isolation</li><li>Withdrawal</li><li>Numbness towards others</li><li>Feeling overwhelmed</li><li>Interpersonal conflict</li></ul>	<ul> <li>Altruistic helping behaviors</li> <li>Connectedness with community</li> <li>Appreciation that family and friends are precious and important</li> </ul>

**ADAPTED FROM:** Brymer, M., Layne, C., Jacobs, A., Pynoos, R., Ruzek, J., Steinberg, A., et al. (2006) Psychological First Aid Field Operations Guide (2nd Edition). Los Angeles, CA: National Child Traumatic Stress Network and National Center for PTSD

# APPENDIX 3:

# **Helpful Thinking During Adverse Events**



National Center for PTSD

# APPENDIX



The table below is organized by concerns that are likely to occur in response adverse events, including safety, feeling unable to cope, helplessness, guilt, and anger. For each category, unhelpful thoughts and the negative feelings that go with them are followed by more helpful thoughts and their potential resulting positive feelings. Use the table to identify thoughts you might be having now, and helpful thoughts you can try instead. *Then, it's important to practice using more helpful thoughts as often as you can*.

Safety				
Common Unhelpful Thoughts	How You May Feel	Alternate Helpful Thoughts	How You'll Feel	
The world is a dangerous place.	<ul><li>Scared</li><li>Worried</li><li>Not trusting</li></ul>	<ul> <li>The world can be dangerous, but there are things I can do to enhance safety.</li> <li>Change is the only guarantee in life. Sometimes, when things go wrong, the only thing we can control is our reactions.</li> <li>The world is not always dangerous.</li> <li>Most of the time I'm safe.</li> <li>I can trust (e.g, that things usually work out; that I can handle things even if they don't work out;</li> <li>in God; in others; in myself; in life).</li> </ul>	<ul> <li>Hopeful</li> <li>Open to a better future</li> <li>Trusting that people will help</li> <li>Calmer</li> </ul>	
I can't trust anyone.	<ul><li> Lonely</li><li> Withdrawn</li><li> Suspicious</li><li> Sad</li></ul>	<ul> <li>Trusting people is why I'm getting help.</li> <li>I can choose some people to trust.</li> </ul>	<ul><li> More trusting</li><li> Less suspicious</li><li> Hopeful</li><li> Optimistic</li></ul>	
• I'm not safe.	<ul><li>Worried</li><li>Scared</li><li>Insecure</li></ul>	<ul> <li>Feeling unsafe isn't the same as being unsafe.</li> <li>Something bad happened, but it doesn't mean it'll last forever, or happen again.</li> </ul>	<ul><li> More relaxed</li><li> Confident</li><li> Capable</li><li> More secure</li></ul>	



Helplessness and Control			
Common Unhelpful Thoughts	How You May Feel	Alternate Helpful Thoughts	How You'll Feel
<ul> <li>I am too scared to do anything.</li> <li>I am not going to be able to avoid being negatively affected in some way.</li> </ul>	Immobilized     Helpless	<ul> <li>I can gather information, set priorities, adapt my plans and carry out the most important necessities.</li> <li>I am doing the best I can to get through this and/or help others get through it.</li> <li>I can find ways to get through this.</li> <li>I can re-assess and adjust my actions on a regular basis.</li> </ul>	<ul><li>Reassured</li><li>Capable</li><li>Stronger</li></ul>
Things will never be the same again.	<ul><li>Sad</li><li>Regretful</li><li>Hopeless</li></ul>	<ul> <li>Feeling really bad usually doesn't last forever.</li> <li>Thinking like this makes it hard to plan for the future.</li> <li>Not everything will be like it was before. But some things are the same now.</li> <li>Even though things may never be the same, I can grow from what is happening and adapt to changing life circumstances.</li> </ul>	Open to the future     Hopeful     Accepting
<ul> <li>I have no control over anything.</li> <li>I can't handle this.</li> <li>This is a huge setback.</li> </ul>	<ul> <li>Helpless</li> <li>Not caring or giving up</li> <li>Confused</li> <li>Frustrated</li> </ul>	<ul> <li>I can control some decisions about my future.</li> <li>Doing things gives me more control.</li> <li>Talking to a someone about what I'm feeling shows I have some control.</li> <li>There are many things I can do, so I'll focus on those instead of what is out of my control.</li> <li>There have been setbacks but focusing only on them gets in the way of my bigger priorities.</li> <li>Every setback or obstacle can be an opportunity to improve things in my life.</li> <li>I can use this time to strengthen my faith/values/practice.</li> </ul>	<ul> <li>Like you have a purpose</li> <li>Hopeful, capable</li> <li>Able to set goals or take steps</li> <li>Less helpless</li> </ul>



Coping			
Common Unhelpful Thoughts	How You May Feel	Alternate Helpful Thoughts	How You'll Feel
I should be coping better.	<ul><li>Helpless</li><li>Useless</li><li>Scared</li></ul>	<ul> <li>I got here today, so I'm coping a bit.</li> <li>Talking to a friend, mentor, or counsellor might help me cope better.</li> <li>Most people are struggling to cope in this new context. We're all doing the best we can.</li> <li>I can use this time to</li> <li>strengthen my skills/faith /values/ practice.</li> </ul>	<ul> <li>Less scared</li> <li>More hopeful</li> <li>Less helpless</li> <li>Stronger</li> <li>Capable</li> <li>Open to getting support or help</li> </ul>
<ul> <li>My reactions mean I'm going crazy.</li> <li>Something must be really wrong with me.</li> </ul>	<ul><li>Scared</li><li>Worthless</li><li>Negative</li></ul>	<ul> <li>These reactions are temporary.</li> <li>Most people react like this.</li> <li>Things are hard for many people now.</li> <li>Even though my mind tells me that I'm not coping well, that doesn't mean I have to listen to it or agree.</li> <li>I can ignore thoughts that aren't helpful and choose to</li> <li>focus on more helpful thoughts.</li> </ul>	<ul><li>Reassured</li><li>Capable</li><li>Hopeful</li></ul>
<ul> <li>Other people deal with this better than I do, so what's wrong with me?</li> <li>Only weak people react the way I do.</li> </ul>	• Worthless	<ul> <li>Most people react this way for a while.</li> <li>My reaction shows the challenge I'm going through, not how weak I am.</li> </ul>	<ul><li>Reassured</li><li>Capable</li><li>Stronger</li></ul>



Guilt			
Common Unhelpful Thoughts	How You May Feel	Alternate Helpful Thoughts	How You'll Feel
I'm a bad person for letting this happen.	Guilty     Worthless     Like you hate     yourself	<ul> <li>A bad person wouldn't feel guilty about this.</li> <li>The reason I feel bad is because I care.</li> <li>I did the best I could with the information I had at the time.</li> <li>We all make mistakes. I can forgive myself and learn from what happened.</li> <li>I can use this time to strengthen my skills/faith/values/practice.</li> </ul>	<ul> <li>Like you aren't to blame</li> <li>Worthy</li> <li>Self-accepting</li> </ul>
<ul> <li>I should have prevented this.</li> <li>I should have done something differently.</li> <li>I am disappointed in myself.</li> </ul>	<ul> <li>Guilty</li> <li>Worthless or Blaming</li> <li>Frustrated</li> <li>Upset</li> </ul>	<ul> <li>Nobody could have prevented this.</li> <li>I can't always protect myself or others.</li> <li>There was limited information. about how to prevent this at the time it happened.</li> <li>I had to make difficult decisions and didn't realize the extent of danger at the time.</li> <li>I had few options at the time.</li> <li>I did the best I could given that: I was exhausted; I was dealing with a lot; I was operating with limited resources; I was pressed for time, etc.</li> <li>There are many things I'm grateful for, so I'll focus on those instead of what is bothering me.</li> </ul>	<ul> <li>Self-accepting</li> <li>Worthy</li> <li>Like you aren't to blame</li> </ul>



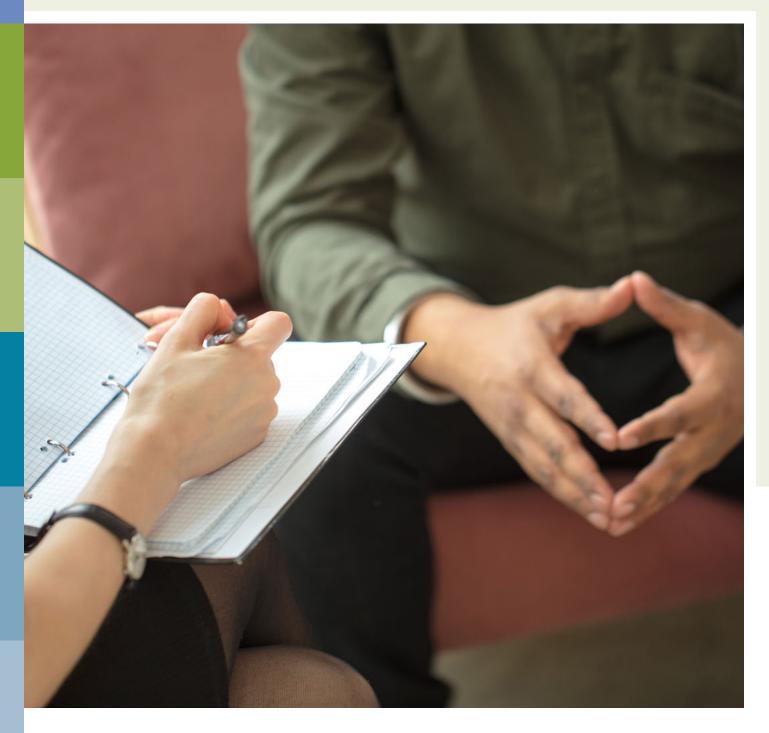


Blame and Anger			
Common Unhelpful Thoughts	How You May Feel	Alternate Helpful Thoughts	How You'll Feel
It's unfair.	Angry Vengeful	This could have happened to someone else.  Sometimes bad things happen to good people.  Even though it's unfair, the way I'm expressing my anger is not going to help me get what I want and/or need. It might be unfair, but if I continue to be angry, it is getting in the way of my bigger priorities (e.g., helping my children feel safe).  There are many things I'm grateful for, so I'll focus on those instead of what is bothering me.  I can use this time to strengthen my faith/values/practice.	Understanding Realistic Accepting
It's their fault this happened.	Angry Frustrated Vengeful Blaming Not trusting	Blaming others doesn't change my situation. Others may be to blame, but I need to focus my energy on me and my family. Later, my anger will motivate me to try to do something to change the things I'm angry about, but at the moment, I need to focus on what I can accomplish in my immediate circumstances.	Accepting Optimistic More trusting Better able to move on

**ADAPTED FROM:** Berkowitz, S., Bryant, R., Brymer, M., Hamblen, J., Jacobs, A., Layne, C., Macy, R., Osofsky, H., Pynoos, R., Ruzek, J., Steinberg, A., Vernberg, E., Watson, P. (2010). Skills for Psychological Recovery: Field Operations Guide, National Center for PTSD and National Child Traumatic Stress Network.

# APPENDIX 4:

# **Conflict Resolution and Positive Communication**



National Center for PTSD

# APPENDIX



### **Conflict Resolution Strategies**

- Begin with a positive approach. Try to establish rapport and mutual trust.
- Have a concrete strategy. Know what your needs and concerns are and anticipate how the other will respond. How strong are your position and situation? How important is the issue? How important will it be to stick to your position?
- Consider the other person's situation. Gather information about their interests and goals.
   What are the real needs versus wants? What is their strategy?
- Address problems, not personalities. Avoid the tendency to attack the other person personally.
- If feeling threatened or attacked, focusing on possible actions to move you forward will be more efficient. Focusing on defending yourself will likely make resolving the problem more difficult.
- Maintain a goal-oriented frame of mind. If the other person attacks you personally, don't let them trap you into an emotional reaction. Let the other person blow off steam without taking it personally. Try to understand the problem behind the anger.
- Emphasize win-win solutions. Even in what appear
  to be win-lose situations, there are often win-win
  solutions. Look for a solution that includes each
  person's needs. Create additional alternatives, such as
  "low cost" concessions that might have high value to
  the other person. Look for alternatives that allow the
  other person to feel their needs have been met.
- Use clear criteria. Negotiate on principles and results, not emotions or pressure. Try to find clear criteria that both sides can use to evaluate alternatives.

### **Positive Communication Strategies**

• Listen to what the other person said without interrupting.

- Use reflective listening (repeat back to the person your understanding).
- Be an active listener (example: make eye contact, nod your head).
- Use assertive messages that focus on specific behaviors (example: "When you park so far from the curb, I get upset because it is hard for me to get into my parking place").
- Use "I" statements (example: "I am angry" not "You make me angry").
- Use polite noninflammatory language (for example, no swearing or insults)
- Approach the problem with a constructive attitude and tone of voice.
- Control your display of anger despite the other person's reaction.
- Take a "time out" before the situation escalates.
- Use good timing (when possible) to have important discussions when you are prepared to give your best and the other person can be most attentive.
- Use mental rehearsal to clarify your thoughts, needs and feelings before you have a discussion.
- Set limits and boundaries on behavior that you find unacceptable without putting down the other person (example: "I will have to end this discussion if you do not stop shouting at me").
- Maintain a high standard of behavior regardless of what the other person does.
- Use constructive criticism balanced with a statement of appreciation when attempting to resolve a problem (example: "You are a great friend, but I am beginning to resent your constant lateness").

**ADAPTED FROM:** Grace, M., Niles, B., Quinn, S. (2015). Managing Anger: A Treatment for those with PTSD. National Center for PTSD (NCPTSD).

# Person-Centered

# Stress First Aid for Patients, Clients and Customers



