

PSYCHOLOGICAL FIRST AID FOR DISASTER SITUATIONS

REACTION	SYMPTOMS	DO	DON'T
NORMAL	Trembling Muscular tension Perspiration Nausea Mild diarrhea Pounding heart Anxiety	Give reassurance Provide group identification Motivate Talk with them Observe to see that individual is gaining composure, not losing it	Don't show resentment Don't overdo sympathy
INDIVIDUAL PANIC (FLIGHT REACTION)	Attempt to flee Loss of judgement Uncontrolled weeping	Try kindly firmness Encourage them to talk Get help to isolate if necessary Be aware of your own limitations Give something warm to eat or drink	Don't use brutal restraint Don't strike Don't douse with water Don't give sedatives
DEPRESSION (UNDER- ACTIVE REACTIONS)	Vacant expression Lack of emotional display Stand or sit without moving or talking	Get control quickly Secure rapport Meet basic needs – food, drink Be empathic Get them to tell you what happened Recognize feelings of resentment in patient and yourself	Don't tell them to "snap out of it" Don't overdo pity Don't give sedatives Don't act resentful
OVERACTIVE	Argumentative Talks rapidly Jokes inappropriately Makes endless suggestions Jumps between many activities	Let them talk about it Find meaningful activity Meet basic needs Supervision is necessary — frustration – anger	Don't give sedatives Don't argue with them Don't suggest they are acting abnormally
CONVERSION REACTION	Severe nausea & vomiting Can't use some part of their body	Show a concerned interest Make them comfortable Give a distracting activity Be aware of your own feelings frustration- anger- funny	Don't ignore disability openly Don't blame them Don't ridicule them Don't joke to others about it Don't tell them there is anything really wrong

Hysterical reactions Are UNCOMMON reactions