Psychological first aid: Facilitator’s manual for orienting field workers
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ACKNOWLEDGEMENTS

This document was written by Leslie Snider (War Trauma Foundation) in close consultation with Alison Schafer (World Vision International (WVI)), Mark van Ommeren (World Health Organization (WHO) Department of Mental Health and Substance Abuse) and Khalid Saeed (WHO Regional Office for the Eastern Mediterranean).

We thank the following reviewers: Megan McGrath (WVI), Devora Kestel (WHO/Pan American Health Organization), Sarah Harrison (United Nations Health Commissioner for Refugees), Inka Weissbecker (International Medical Corps) and Emmanuel Streel (consultant).

The work was funded by the WHO Regional Office for the Eastern Mediterranean and World Vision Australia.
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OVERVIEW OF THE MANUAL
INTRODUCTION

This manual is designed to orient helpers to offer psychological first aid (PFA) to people following a serious crisis event. PFA involves humane, supportive and practical assistance for people who are distressed, in ways that respect their dignity, culture and abilities.

This facilitator’s manual is to be used together with the Psychological first aid: Guide for field workers (World Health Organization, War Trauma Foundation, World Vision International, 2011).

The manual is structured in three parts:

1) Overview of the manual

This section provides general information about how to use this manual, how to prepare for giving an orientation, and tips for facilitators.

2) Step-by-step orientation

This section provides a half-day orientation agenda and a step-by-step description of each module, including learning objectives, narrative and tips for the facilitator, accompanying slides, and instructions for group exercises and discussion.

3) Supporting materials

This section of annexes provides supporting materials to print as handouts for participants.

HOW TO USE THIS MANUAL

The instructions and materials in this manual are for a half-day orientation (four hours excluding breaks) to prepare helpers to support people recently affected by very stressful events. If you have more time available for the orientation, the extra activities and slides included in the text boxes can be used to deliver a full-day orientation (five-and-a-half hours excluding breaks). Where possible, full-day orientations should be organized to allow for deeper learning.

It is important to adapt the orientation and materials to the local culture, language and context, and to the likely kinds of crisis situation in which your participants will be helping. Remember to build in extra time if you are using a translator. It is helpful if the translator is familiar with Psychological first aid: Guide for field workers and orientation materials beforehand.

This manual serves as a guide for PFA orientation, to which you can bring your own style, experience and ideas as a facilitator.

What will participants learn?

The orientation aims to build the capacity of helpers in crisis situations:

» To approach a situation safely, for themselves and others;
» To say and do the most supportive things for very distressed people; and
» To NOT cause further harm by their actions.
The orientation provides many opportunities for participants to develop and practise PFA skills.

The orientation will not give participants clinical skills in “counselling.” A key learning objective is for participants to understand the boundaries of the support they can provide and when to refer people for more specialized assistance.

**Who is this manual for?**

Facilitators using this manual will often have experience in offering mental health and psychosocial support. It is helpful if they also have:

- Prior experience assisting people affected by crisis events
- Interest and experience in providing orientation and training.

**Who should participate in a PFA orientation?**

PFA is an approach that can be learned by both professionals and non-professionals who are in a position to help people impacted by very distressing events. They may include staff or volunteers of disaster relief organizations (in health and non-health sectors), health workers, teachers, community members, local government officials and others.

It is not necessary for helpers to have a psychosocial or mental health background in order to be able to offer PFA. Helpers who provide various kinds of relief and assistance during a crisis event may find PFA skills useful in the course of their usual work. Participants will ideally:

- Have the time and willingness to assist in crisis situations.
- Be accessible and available to help people in distress.
- Be connected with a recognized agency or group if assisting in a large emergency (for their safety and for the coordination of effective response).

**PREPARING TO DELIVER THE ORIENTATION**

Even if you are working in an acute crisis situation, you should take time to prepare for the orientation so that it will run smoothly and be a useful experience for your participants. The following checklists will help you to prepare for the orientation, including:

- Preparing yourself: what you need to know
- Preparing materials and handouts
- Preparing the venue.

**Preparing yourself: what you need to know**

As you prepare to offer the orientation, first become familiar with:

- The publication *Psychological first aid: Guide for field workers*
- This manual, including handouts, slides¹ and activities
- Background of participants (culture, language, profession, helping role)
- The kinds of crisis event in which participants would be helping.

¹ The slides are available at: http://www.who.int/mental_health/resources/emergencies/en/
The publication *Psychological first aid: Guide for field workers* is freely available in numerous languages electronically in PDF format,² and hard copies can be ordered from the WHO bookstore.³

The following key document is also useful to review and is freely available in several languages: *Inter-Agency Standing Committee (IASC, 2007) Guidelines on mental health and psychosocial support in emergencies: Checklist for field use.*⁴

**Preparing materials and handouts**

Give all participants a printed copy of the two-page PFA pocket guide (see Annex 1) in their local language. If possible, also provide handouts, other materials and *Psychological first aid: Guide for field workers* in the local language. *Note:* The PFA pocket guide and handouts can also be found in the *Psychological first aid: Guide for field workers*. Check whether the guide already exists in the local language by consulting the previously mentioned WHO website.

Tailor the orientation materials to the cultural and social context of participants. For example, adapt or create new case scenarios depending upon the local context and types of crisis situation participants may encounter.

Also adapt the orientation agenda to your specific orientation; i.e. mention specific start and end times.

Use the following checklist to ensure you have all printed materials ready for your orientation (see Annexes):

- [ ] PFA pocket guide in the local language
- [ ] *Psychological first aid: Guide for field workers* (electronic or printed copy)
- [ ] The workshop agenda
- [ ] Pre- and post-test (optional)
- [ ] Case scenario and simulation instructions
- [ ] Communication exercise instructions
- [ ] Vulnerable people exercise instructions
- [ ] Handouts (these can also be found in the *Psychological first aid: Guide for field workers*):
  - Good communication
  - How caregivers can help their children
- [ ] Written evaluation form

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³ See http://apps.who.int/bookorders/
Preparing the venue

Where you hold the orientation depends in part upon the situation. If you are working in an acute crisis situation, proper meeting rooms and facilities may not be readily available. Alternative meeting spaces such as a tent or even outdoor areas can be used instead. Use the following checklist to be sure the venue is adequate and ready to go:

- Adequate space for the number of participants attending
- Sufficient comfort and safety for participants
- Sufficient privacy and quiet. If relevant, check the venue’s sound system before the orientation
- Tables and chairs that can be moved or flexibly arranged to allow for role play and group work
- Laptop and LCD projector if electricity is available (otherwise, consider printing handouts of the slides beforehand)
- Flipchart or whiteboard, and markers
- Tape or tacks for hanging overhead paper
- Pens and notebooks for participants
- Sign-in sheet and name tags (if used)
- Refreshments.

FACILITATION TIPS

As a facilitator, you can enhance the learning environment by:

1. Modelling the skills
2. Creating a safe and supportive atmosphere
3. Utilizing participatory learning
4. Managing time well.

Modelling the skills

As you facilitate the orientation, aim to model the skills and helping qualities you would like participants to learn:

- Be friendly, warm, relaxed and calm to engage participants.
- Demonstrate good verbal and non-verbal communication skills, to convey interest and enthusiasm with your words and body language.
- Demonstrate positive regard, respect and non-judgement.

If you are working with a co-facilitator, try to convey good team spirit and mutual support as a model for self and team care in the field.

Creating a safe and supportive atmosphere

Orientation to PFA involves discussing and role playing crisis events and distress. This can touch upon participants’ own experiences and their memories, feelings and reactions to past or current events. Some participants may also be directly impacted by the crisis in which they will be helping. As a facilitator, aim to set a safe and supportive atmosphere for the orientation:
Set ground rules at the start of the orientation to maintain a productive and supportive atmosphere for everyone.

When starting the orientation, acknowledge the potential for it to touch on distressing stories or personal experiences.

Moderate or stop any discussions that seem too distressing for the group.

If participants appear distressed or come to you with concerns, be available to assist them:
> Listen without judgement and help them to feel calm.
> Give options for how they can participate comfortably in the orientation activities.
> Provide referral for additional support as necessary and available.

**Utilizing participatory learning**

Participatory learning methods, such as simulations, role plays and case scenarios, are powerful tools for helping adults to develop PFA skills. The more time participants have to practise their communication and helping skills, the more they will benefit from the orientation.

As participants take on the roles of being a helper or a person in distress, they often feel the role they are playing and directly experience the helpful and unhelpful things to say and do. Participants will have the chance to try out their helping skills in a safe environment where they can receive feedback and learn from each other. These methods also provide opportunities to discuss how to adapt PFA to the local context.

Some participants will be new to participatory learning methods and may feel shy in trying role plays. It may help to acknowledge that it takes courage to risk making mistakes in front of peers, and that everyone will do things well – and not so well – as they practise PFA skills. Both are useful for learning.

**Tips to encourage participation:**

> Begin with introductions so participants can meet each other.
> Learn and use participants’ names (name tags are helpful).
> Ask what participants expect of the orientation.
> Use energizers (games) to engage participants.
> Limit lecture time. Rather, engage participants in exchanging ideas and experience through dialogue.
> Acknowledge participants’ existing knowledge and natural helping abilities.
> Be encouraging and positive as participants practise new skills.
> Always give feedback in a sensitive way: first ask “what went well” and then “what could be better.”
> Invite questions and allow time for clarification.
> Be open to feedback on how the orientation is going, and make adjustments as needed.

**Tips for group work:**

> Be aware of very quiet or shy participants, or those who dominate discussions. Try to ensure that everyone has the opportunity to actively participate.
> Ensure a manageable number of members for group work (4–6 participants) to allow for good dialogue and participation by everyone.
Tips for adapting to participants’ cultural and social contexts:

» Encourage participants to come up with case examples relevant to the context in which they will be helping.
» Invite participants to discuss how to adapt PFA to their cultures.

It is normal that both facilitators and participants will make mistakes when demonstrating PFA. To be sure that participants understand what good PFA skills are and what should be avoided, clearly outline the main points or “take-home messages” at the end of all practice activities. Write the main points on a flipchart or show the slides, and refer to the two-page PFA pocket guide.

Managing time well

Time management is an essential part of good facilitation. The agenda provided is a guide for timing the orientation. However, it may sometimes be difficult to judge how long a role play or exercise may take, or you may want to give extra time to a certain topic for purposes of clarification. Consider these tips to help manage time effectively:

» Schedule arrival and registration time prior to the start of training.
» Start and end on time.
» Discuss the agenda with participants at the start of the orientation, and keep to the general schedule (including the short break times).
» Do not spend too much time on the slides. Rather, be sure there is sufficient time for discussions, role plays and simulations, where much of the learning is likely to take place.
» Manage the duration of role plays so that they do not go on too long.
» If using a translator, be prepared for the orientation to take longer.
» Allow time for final questions, clarification and evaluation at the close of the orientation.
STEP-BY-STEP ORIENTATION
AGENDA FOR A 4-HOUR ORIENTATION (EXCLUDING BREAKS)

For the full-day agenda, please see Annex 11.

<table>
<thead>
<tr>
<th>Overview</th>
<th>Duration</th>
<th>Topic/Activity</th>
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</thead>
<tbody>
<tr>
<td>Pre-orientation</td>
<td></td>
<td>Participant arrival and registration</td>
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<tr>
<td><strong>Part I (70 minutes)</strong></td>
<td></td>
<td></td>
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<tr>
<td>Psychological First Aid (PFA) Definition and Framework</td>
<td>10 minutes</td>
<td>Welcome and introduction</td>
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<tr>
<td></td>
<td></td>
<td>» Introductions and expectations</td>
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<td></td>
<td></td>
<td>» Aim and agenda</td>
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<tr>
<td></td>
<td></td>
<td>» Ground rules</td>
</tr>
<tr>
<td></td>
<td>10 minutes</td>
<td>What comes to mind when you hear “PFA”?</td>
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<tr>
<td></td>
<td></td>
<td>» Starting with care for ourselves</td>
</tr>
<tr>
<td></td>
<td>20 minutes</td>
<td>Crisis event simulation and discussion</td>
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<tr>
<td></td>
<td>10 minutes</td>
<td>What PFA is and is not</td>
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<tr>
<td></td>
<td></td>
<td>» PFA in the framework of Mental Health and Psychosocial Support</td>
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<tr>
<td></td>
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<td>» Psychological responses to crisis events</td>
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<tr>
<td></td>
<td></td>
<td>» Key resilience (protective) factors</td>
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<tr>
<td></td>
<td>15 minutes</td>
<td>PFA: who, when and where?</td>
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<tr>
<td></td>
<td>5 minutes</td>
<td>PFA overview</td>
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<tr>
<td></td>
<td></td>
<td>» Frequent needs of survivors</td>
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<tr>
<td></td>
<td></td>
<td>» What helpers need</td>
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<td></td>
<td></td>
<td>» Prepare…Look, Listen and Link overview</td>
</tr>
<tr>
<td><strong>Break</strong></td>
<td>15 minutes</td>
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<tr>
<td><strong>Part II (85 minutes)</strong></td>
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<tr>
<td>Applying PFA Action Principles</td>
<td>20 minutes</td>
<td>Case scenario group work</td>
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<tr>
<td></td>
<td>10 minutes</td>
<td>Look</td>
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<td></td>
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<td>» Look for safety</td>
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<td></td>
<td>» People with obvious urgent basic needs</td>
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<td></td>
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<td>» People with serious distress reactions</td>
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<tr>
<td></td>
<td>30 minutes</td>
<td>Listen</td>
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<tr>
<td></td>
<td></td>
<td>» Role play: listening</td>
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<tr>
<td></td>
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<td>» Demonstration: helping people feel calm</td>
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<td>» Good communication</td>
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<td></td>
<td>15 minutes</td>
<td>Link</td>
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<td>» Link with basic needs</td>
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<td>» Support positive coping</td>
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<td>» Link with information</td>
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<td>» Link with social support</td>
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<td></td>
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<td>Ending assistance</td>
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<td></td>
<td>10 minutes</td>
<td>Adapting to the local cultural context</td>
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<tr>
<td><strong>Break</strong></td>
<td>15 minutes</td>
<td></td>
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<tr>
<td><strong>Part III (85 minutes)</strong></td>
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<tr>
<td>PFA Role Plays, Vulnerable People, PFA Review, Self and Team Care, Evaluation</td>
<td>30 minutes</td>
<td>PFA role plays</td>
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<tr>
<td></td>
<td>20 minutes</td>
<td>People who likely need special attention</td>
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<tr>
<td></td>
<td>10 minutes</td>
<td>PFA review</td>
</tr>
<tr>
<td></td>
<td></td>
<td>» Ethical do’s and don’ts</td>
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<tr>
<td></td>
<td>15 minutes</td>
<td>Self and team care</td>
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<td></td>
<td>10 minutes</td>
<td>Evaluation and closing</td>
</tr>
</tbody>
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PART I MODULES: PFA DEFINITION AND FRAMEWORK

Welcome and Introduction  (10 minutes)

**Learning Objectives**
By the end of the session, participants should:

» Understand the overall aims, agenda and methods of the orientation;
» Agree on ground rules for a productive and supportive working atmosphere.

**Materials**

» Orientation agenda

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**Psychological First Aid**

Supporting People in the Aftermath of Crisis Events

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**Introductions and expectations:**

As facilitator(s), introduce yourself by name and affiliation (i.e. organization or institution), and briefly describe your relevant experience.

Begin a round of introductions of participants by asking each one to briefly state:

1. Their name
2. Affiliation or where they have come from.

If the orientation involves a small group (i.e. fewer than 15 participants), you may also want to ask them to name one thing they expect to learn during the orientation.

Be sure to keep the round of introductions brief, especially with a large group.
FULL-DAY ORIENTATION: ICE-BREAKER EXERCISE

Game – 5 minutes

This exercise uses questions about participants’ experiences with crisis situations along with more light-hearted questions. Adapt questions to the context and culture as necessary.

Ask participants to: “Stand up and clap if you…”

» Travelled more than one hour today to come here
» Have ever worked in a crisis setting
» Your favourite color is blue
» Have ever lived in a place where there was a crisis (like a flood)
» Are a good dancer/singer
» Have ever helped someone emotionally in a crisis situation
» Slept well last night

Aim and Agenda

Explain the aim of the orientation: “to help you know the helpful things to say and do in order to support people who have recently experienced a crisis event.” PFA is an approach that can also be useful in our daily work, not only when there is a major crisis event.

Explain that the publication Psychological first aid: Guide for field workers is the main resource for this orientation.
Hand out and briefly review the agenda, including the main topics that will be covered and time frame.

Explain the methods that will be used in the orientation and emphasize these key points:

» The orientation will focus on practical skills and will be interactive.
» Activities are designed to give you an opportunity to practise and learn from each other.
» Your participation is essential to the process.
» Everyone here is in the same situation practising in front of each other. We will all say and do things very well, and we will all make mistakes. That is how we will learn together.
» Take this opportunity to practise and learn, so you can feel confident when you are in a real-life situation.

Ground Rules

Invite participants to consider what ground rules we should agree upon to make this a productive and comfortable working atmosphere for everyone. Write their responses on a flip chart. The final list of ground rules could include the following:

» Be on time after breaks.
» Turn off cell phones.
» Don’t interrupt someone who is speaking.
» Keep confidentiality: stories (about ourselves or others) stay in this room.
» Don’t share personal things you don’t want other people to know.
» Don’t use identifying names or other information if talking about someone else’s experience.
» Respect others’ opinions.
» Participate fully in the exercises.
» Always give feedback this way: First, what went well? Then, what could be better?

Finally, acknowledge the potential for the orientation to touch on distressing stories or personal experiences. We will need to be sensitive with one another. Offer any participant who feels uncomfortable with an exercise or topic the opportunity to speak with the facilitator(s).
FULL-DAY ORIENTATION: OPTIONAL PRE-TEST

5 minutes

See Annex 2 for pre/post test questions. Allow participants 5 minutes to take the pre-test (some may request more time, but try to allow no more than 10 minutes). You can give participants the test again at the end of the orientation to measure the impact of the training on their knowledge and confidence to offer PFA.

Note: do not give this test if participants have limited understanding of the questions due to language differences or low literacy levels.

What comes to mind when you hear “PFA”? (10 minutes)

Learning Objectives:
By the end of the session, participants should:
» Have explored the meaning of the term “PFA”;
» Have a basic understanding of what offering PFA involves;
» Be alerted to the importance of self and team care.

FACILITATION TIP:
This is a brief, interactive discussion. Try to keep the flow of dialogue moving quickly by encouraging brief answers, limiting long responses or by calling on participants to shout out ideas.

Begin by asking participants: “What kinds of crisis events have you encountered in your life or work?”
You can ask specifically about:
» Events affecting many people at the same time (natural disasters, plane crash, war/conflict);
» Events affecting individuals (car accident, robbery, home fire).

Crisis events you have encountered

- Large events affecting many people
  - Natural disasters, plane crash, war/conflict
- Events affecting individuals
  - Car accident, robbery, home fire
- What physical, social and psychological reactions did people have?
- What was done to help and support people?
Ask participants what kinds of reaction people had to the crisis events. Then, ask what was done to help and support affected people, particularly emotional or social types of support: “What did people say or do that was helpful in these situations?” Allow participants to briefly mention a few points. This will give them a few ideas for helpful things to say and do in the upcoming simulation exercise.

Next ask participants: “What comes to mind when you hear the term Psychological First Aid?”

Allow a free flow of ideas and facilitate this discussion with the whole group. Some responses will accurately reflect various aspects of PFA, such as giving emotional support, helping people with practical needs, listening to people and so on. Participants may also give incorrect responses that are beyond the scope of PFA, such as counselling, medication or psychotherapy. Reinforce the responses that accurately reflect PFA.

Explain to participants that despite the term “psychological” first aid, attending this orientation will not make someone a counsellor or psychotherapist. However, they will learn how to support distressed people in humane and practical ways.

Explain to participants that before we go on with the rest of the activities, it is important to start with care for ourselves. As helpers in crisis situations, we need to take extra care of our own well-being so...
we can best take care of others. Ask participants to reflect upon and write down on a piece of paper:

» *What do you do to take care of yourself and manage your stress?*

» *How does your team (colleagues, family) take care of each other?*

Ask them to save this piece of paper, as we will come back to these points later in the orientation.

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**Crisis Event Simulation and Discussion (20 minutes)**

**Learning Objectives**

At the end of session, participants should:

» Have experienced the feeling of being a helper or a distressed person in a crisis situation;

» Be able to describe what kinds of assistance different types of people may need;

» Be able to describe helpful and unhelpful things to say and do when offering PFA;

» Have a sense of the skills and knowledge they need to develop in order to offer PFA effectively;

» Have an appreciation of safety issues when offering PFA in crisis situations.

**Materials**

» Handout of simulation instructions for each group (see Annex 3)

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**FACILITATION TIP:**

This exercise engages all the participants and helps them to become comfortable role playing with each other.

Allow participants about 5 minutes to prepare their roles in the simulation. The actual simulation should last a maximum of about 5 minutes. This activity can be energizing, so give participants a couple of minutes when it is finished to return to their chairs, or to put the room back in order if they have moved furniture, etc. Manage time well to ensure that 10 minutes is available for discussion.

The simulation provided is of an earthquake that has hit an urban area. Consider developing a different simulation if this topic could potentially trigger distress for participants (e.g., if they have recently been through a similar event).
Divide participants into two groups. Give Group 1 the simulation instructions for affected people, and Group 2 the instructions for helpers (see Annex 3). Tell them they have 5 minutes to prepare. Encourage participants in both groups to stay in their roles during the entire simulation to make it as real as possible. Group 1 stays in the room with the (main) facilitator. Group 2 leaves the room with their instructions. If there is a co-facilitator, they can accompany Group 2 outside the room and provide further instructions or answer questions.

If there is no co-facilitator, first discuss briefly with Group 1 their instructions, answer any questions, encourage them to get into their roles and to feel free to rearrange furniture to help set the scene.

Then spend a couple of minutes with Group 2 participants outside the room to answer questions and encourage them to consider how to organize and prepare themselves for what they may find. Check that Group 1 participants are ready and then invite Group 2 to enter the room.

**Group 1 Instructions:**

*A large earthquake has suddenly hit the centre of the city in the middle of the workday. Buildings have fallen, there is widespread destruction and you are among the many people who have been affected. You are a diverse group of people (young and old, men and women) who have survived and are now in a shelter. You have each been affected in different ways and are distressed, but none of you have life-threatening injuries. Please choose a role from among the list below, or make up a role that you can relate to. Set yourselves in the scene and stay in your role throughout the entire time of this simulation (about 5 minutes). Try not to laugh during the exercise. In a moment, some people will arrive to support you.*

**Roles:**

- Unaccompanied child – alone and frightened, about 10 years old
- Pregnant woman with a child
- Very distressed but unharmed person whose family is lost in the disaster
- Person in shock who cannot speak
- Person with non-life-threatening injuries
- Nervous person who is upset and starting to upset others
- Person who is relatively calm and able to give an account of what happened
- A frail, elderly person.

**Group 2 Instructions:**

*You hear that a large earthquake has suddenly hit the centre of the city in the middle of the workday. Many people have been affected and buildings have fallen. You and your colleagues felt the shaking, but are OK. The extent of the damage is unclear. You have been asked to assist survivors in a local shelter who are affected in different ways. You will have 5 minutes to demonstrate how you will provide PFA. (None of the affected people you will encounter have life-threatening injuries.)*

*Take a couple of minutes to decide how you will organize yourselves to approach the situation. You may want to take on different helping roles, or you can stay in the role you usually have when assisting in crisis situations (if this is part of your work). Try not to laugh during the exercise. When signalled, you may enter the scene.*
Depending on participants’ experiences with disasters, they will role play in different ways. Group 1 participants may be lying on the ground moaning and playing out their respective roles. Group 2 participants may find the situation chaotic as they try to assess the needs of affected people and offer help. They may find it difficult to stick to the plans they prepared in advance because of the chaos. As facilitator, do not interfere or offer advice, but move around the room observing and taking notes as necessary about various aspects of interactions – both helpful and unhelpful – for PFA. For example, look for interactions that either promote safety for the helper and affected person, or those that might be unsafe.

Use your judgment in stopping the simulation (within a maximum of 5 minutes), usually when there are sufficient key lessons to draw from, when the helpers seem to run out of helpful things to say and do, or if participants seem fatigued. You can stop the simulation by saying: "Time out! Let’s stop here and return back to normal.”

Allow participants a couple of minutes to come out of their role and calm themselves, and to return the room to order, if needed.

In the discussion, remember to use the feedback method of asking first, what went well; and then, what could be better.

Begin the discussion by asking first the helpers (Group 2) about their experience:

» What was it like helping in this situation?
» As a helper, what did you feel you did well? Did you feel that you were making a difference?
» What could you have done better?

Facilitate the discussion so that different Group 2 participants can share their experience. Ensure that each one first says something that they did well before being critical about the assistance they provided. Acknowledge that it was a challenging situation and that in reality disasters are often chaotic. Offer your feedback to the group, pointing out things you saw that were done well (support given in appropriate ways, keeping people safe, etc.) and things that might have been done better.
Next, ask the affected people (Group 1) about their experience:

» What was it like as a person affected by this disaster?
» How did you feel supported or helped by the helpers?
» Was there anything the helpers said or did that was NOT helpful, or that they could have done better?

Acknowledge the emotions that can come up for participants as they take on the role of an affected person. Ensure that they give feedback to helpers first in positive ways, before offering constructive criticism. Offer feedback also to the affected people in their role playing, and further emphasize important points you noticed from the interactions of helpers and affected people. Acknowledge that the exercise was challenging and thank people for their participation.

If you feel the group is over-energized by the activity or anxious, you can do a short exercise to help them feel calm. For example, have them sit comfortably and quietly in their chairs. Using a soft, soothing tone of voice, ask participants to place and feel their feet on the floor and to place their hands on their thighs. Ask them to notice their breath and breathe slowly three times. (See section 3.3 of Psychological first aid: Guide for field workers for additional instructions to demonstrate how to help people feel calm.)

What PFA Is and Is Not (10 minutes)

Learning Objectives:
At the end of the session, participants should:

» Be able to define what PFA is, and what it is not;
» Understand the place of PFA in overall emergency response, including mental health and psychosocial responses;
» Relate PFA to key resilience (protective) factors.

What is PFA?

• Humane, supportive and practical assistance to fellow human beings who recently suffered exposure to serious stressors, and involves:
  – Non-intrusive, practical care and support
  – Assessing needs and concerns
  – Helping people to address basic needs (food, water)
  – Listening, but not pressuring people to talk
  – Comforting people and helping them to feel calm
  – Helping people connect to information, services and social supports
  – Protecting people from further harm

Provide the definition of PFA from Psychological first aid: Guide for field workers and connect this to the ways participants helped the affected people in the simulation.
PFA is... **humane, supportive and practical assistance to fellow human beings who have recently suffered exposure to serious stressors, and involves:**

» Non-intrusive, practical care and support  
» Assessing needs and concerns  
» Helping people to address basic needs (e.g. food, water)  
» Listening but not pressuring people to talk  
» Comforting people and helping them to feel calm  
» Helping people connect to information, services and social supports  
» Protecting people from further harm.

---

**What PFA is NOT?**

- It is NOT something only professionals can do;  
- It is NOT professional counselling;  
- It is NOT “psychological debriefing.” This term refers to a specific type of intervention in which people who have recently suffered a crisis event are asked to briefly but systematically recount their perceptions, thoughts and emotional reactions to the event. PFA is recommended by WHO and many expert groups as the alternative to psychological debriefing;  
- It is NOT asking people to analyze what happened or put time and events in order;  
- Although PFA involves being available to listen to people’s stories, it is NOT pressuring people to tell you their feelings or reactions to an event.

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Next, describe what PFA is not. There are common misconceptions about PFA, partly based on the word “psychological” in its name. In fact, PFA involves social and practical support interventions, in addition to comfort and emotional caring.

It is important to emphasize that PFA…

- Is NOT something only professionals can do;  
- Is NOT professional counselling;  
- Is NOT “psychological debriefing.” This term refers to a specific type of intervention in which people who have recently suffered a crisis event are asked to briefly but systematically recount their perceptions, thoughts and emotional reactions to the event. PFA is recommended by WHO and many expert groups as the alternative to psychological debriefing;  
- Is NOT asking people to analyze what happened or put time and events in order;  
- And although PFA involves listening to people, it is important NOT to pressure people to talk or tell their experiences if they do not want to.
Explain the IASC Mental Health and Psychosocial Support (MHPSS) pyramid (adapted with permission), which shows the place of PFA in the framework of overall mental health and psychosocial response after a crisis event. The bottom layer of the pyramid shows the need for basic services and security, which need to be delivered in a safe and socially appropriate way so as not to undermine people’s dignity or well-being. On the next layer above, many people will likely need interventions that strengthen community and family supports. As we move up the pyramid, some people will need focused, non-specialized support. This includes basic mental health care and basic emotional and practical support, such as PFA. As we go to the top of the pyramid, a small minority of people will need clinical support, which may consist of medicines or psychotherapy, and which typically involves care by a primary health care clinician or a mental health professional.

Responses to Crisis Events

- People may have very different reactions to an event
- What factors influence how someone responds?

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1 For a full description of the IASC guidelines, see:
Explain to participants that people may have different psychological reactions to an event. Ask the group if they can name some factors that may influence how someone responds. Factors include:

- The nature and severity of the event(s) they experience
- Their experience with previous distressing events
- The support they have in their life from others
- Their physical health
- Their personal and family history of mental health problems
- Their cultural background and traditions
- Their age (for example, children of different age groups react differently).

Explain to participants that there is evidence for certain key resilience (protective) factors for people who have experienced a crisis event. The evidence shows that people generally do better over the long term if they:

1. Feel safe, connected to others, calm and hopeful;
2. Have access to social, physical and emotional support;
3. Regain a sense of control by being able to help themselves.

These factors are essential parts of PFA.

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Learning Objectives:
At the end of this session, participants should:

» Know who may benefit from PFA, and who may require more advanced support;
» Know when PFA can be provided;
» Understand where PFA can be provided safely and with appropriate dignity and privacy for the affected person.

Group Exercise (5 minutes)

Following a crisis event...

• WHO may benefit from PFA?
• WHO may need more advanced support?
• WHEN should PFA be provided?
• WHERE should PFA be provided?

Have participants break into four groups and assign each group one of the questions on the slide:

» Group 1: who may benefit from PFA?
» Group 2: who may need more advanced support?
» Group 3: when should PFA be provided?
» Group 4: where should PFA be provided?

Allow for 5 minutes of group discussion and then ask groups to report back on their discussions in plenary. After each group reports, you can use the information on the next four slides to clarify the take-home message.

Group 1 report: who may benefit from PFA?
If needed, use the following questions to stimulate discussion:

» Can you offer PFA to a child? Will you offer PFA to everyone you encounter?
PFA: Who?

- Very distressed people who were recently exposed to a serious stressful event
- Can be provided to adults and children
- Not everyone who experiences a crisis event will need or want PFA
  - Don’t force help on those who don’t want it, but make yourself available and easily accessible to those who may want support

Explain that PFA can be offered to anyone, regardless of age, gender, social status, etc. But not everyone will want or need PFA. It is important never to force help on anyone who doesn’t need it, and also to make the best use of the resources you have (you may not be able to help everyone). PFA is intended for people who are in distress.

**Group 2 report: Who needs more advanced support than PFA alone?**

If required, encourage discussion by asking who in the simulation exercise required more support than PFA alone.

Who needs more advanced support than PFA alone?

- People with serious life-threatening injuries
- People so upset they cannot care for themselves or their children
- People who may hurt themselves
- People who may hurt or endanger the lives of others

Explain that some people will need more advanced assistance than PFA alone. These include people…

» With serious life-threatening injuries;
» So upset they cannot care for themselves or their children;
» Who may hurt themselves;
» Who may hurt or endanger the lives of others.
**Group 3 report: When should PFA be provided?**

If needed, use the following questions to stimulate discussion:

» *When do you think you will encounter the people you will help? How long after the crisis event?*

**PFA: When?**

- Upon first contact with very distressed people, usually immediately following an event, or sometimes a few days or weeks after

Explain that PFA can be offered immediately after a crisis event (e.g. if you are on the scene of a car accident) or even a few weeks after the event has occurred (e.g. following a major natural disaster). If people are still in acute distress a few days or even a few weeks after an event, PFA can still be helpful.

**Group 4 report: Where should PFA be provided?**

If needed, use the following questions to stimulate discussion:

» *Can you offer PFA at the scene of a crisis event? Why or why not?*

» *Do you need privacy to offer PFA? In which situations? What is culturally acceptable in terms of privacy?*

**PFA: Where?**

- Wherever it is safe enough for you to be there
- Ideally with some privacy (as appropriate) to protect confidentiality and dignity of the affected person
Explain to participants that the most important issue in terms of WHERE to offer PFA is “safety” for themselves and people they are helping. You don’t want to get hurt yourself by going into an unsafe area to offer assistance, nor do you want to put anyone you are helping in any further danger. You can offer PFA anywhere, if it is safe enough to be there.

In certain situations, it may be helpful to have some privacy when offering PFA. Privacy can be important for the dignity of the person (e.g. to protect them from onlookers or the media). An example might be when talking to someone who has been raped. However, there may be ethical or cultural reasons why you need to be careful about talking with someone alone in a private space. For example, be careful about real or perceived exploitation or abuse of anyone – especially children – in a private space.

### PFA Overview (5 minutes)

**Learning Objectives**

By the end of the session, participants should:

» Be able to describe the frequent needs of survivors;

» Be able to describe what helpers need in order to assist;

» Be able to state the basic PFA action principles of Prepare … Look, Listen and Link.

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**If this crisis happened…**

- What would you need as a SURVIVOR?

- What would you need as a HELPER?
**FULL-DAY ORIENTATION: EXERCISE**

**10 minutes**

Have participants take a piece of paper and fold it in half lengthwise. Ask them to consider a major crisis happening. On the left side of the paper, have them briefly list what they would need as a survivor. On the right side of the paper, have them briefly list what they would need as a helper in the crisis situation. Take just 3 minutes for this exercise.

Ask the group to share some of the things they have listed on the left side of their paper – what they would need as a survivor of crisis events. Wrap up the discussion with a summary of the frequent needs of survivors.

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**Full Day Orientation**

Frequent Needs of People After Crisis Event

- Basic needs: shelter, food, water, sanitation
- Health services for injuries or help with chronic medical conditions
- Understandable and correct information about event, loved ones and available services
- Being able to contact loved ones
- Access to specific support related to one’s culture or religion
- Being consulted and involved in important decisions

---

People who have been through a crisis will often need:

- Practical things – like a blanket, food, water, shelter
- Medical care for injuries or help with chronic medical conditions
- Safety and protection
- Information – about the event, loved ones, available services
- Someone who is willing to listen
- To be able to contact loved ones
- Specific support related to their culture or religion
- Being consulted and involved in decisions that affect them.

Now, ask participants to briefly share some of the needs of helpers from the right side of their paper. Responses may include:

- Information about the event
- Information about the people affected
- Whether it is safe to go to the area
- Practical kinds of support to offer affected people (e.g. food, water)
- To know who else is helping and what kind of support they are providing.
Explain that PFA is designed to meet the needs of survivors – including needs for practical help, emotional support and connection with loved ones, information and services. It is also designed for helpers to have a framework to be prepared to help, and to have the necessary skills and resources to best support survivors.

Prepare

- Learn about the crisis event.
- Learn about available services and supports.
- Learn about safety and security concerns.

- Crisis situations can be chaotic
- They often require urgent action

Wherever possible BEFORE you enter a crisis site, try to obtain accurate information so you can be safe and effective.

The first step in PFA is to PREPARE. Explain that crisis situations can be chaotic and often require urgent action. However, it is important whenever possible to take time BEFORE you enter the crisis site to PREPARE.

<table>
<thead>
<tr>
<th>Prepare</th>
<th>Before you enter a crisis site, try to learn about…</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Crisis Event</td>
<td>• What happened?</td>
</tr>
<tr>
<td></td>
<td>• Where?</td>
</tr>
<tr>
<td></td>
<td>• When?</td>
</tr>
<tr>
<td></td>
<td>• How many and who are affected?</td>
</tr>
<tr>
<td>Available Services</td>
<td>• Who is providing for basic needs (emergency medical care, food shelter)?</td>
</tr>
<tr>
<td></td>
<td>• When and where can people access services?</td>
</tr>
<tr>
<td></td>
<td>• Who is helping, including community members?</td>
</tr>
<tr>
<td>Safety and Security</td>
<td>• Is the crisis over or ongoing (aftershocks, fighting)?</td>
</tr>
<tr>
<td></td>
<td>• What dangers may be in the environment?</td>
</tr>
<tr>
<td></td>
<td>• Are there places to avoid due to insecurity or because it is not permitted to be there?</td>
</tr>
</tbody>
</table>

Show the slide above and/or explain that to prepare as a helper, you should try to learn about:

» **The crisis event** – what happened, when and where did it take place, how many people are affected and who are they?

» **Available services and supports** – who is providing for basic needs, where and how can people access services/supports, who else is helping?

» **Safety and security** – is the crisis over or continuing, what dangers may be in the environment, are there areas to avoid because they are insecure or you are not allowed to be there?
The action principles of PFA are: **Prepare…Look, Listen and Link**. To help participants remember Look, Listen and Link, the field guide has illustrations. For fun, you can model these yourself as you introduce the principles, or even have participants stand and do this with you.

Explain to participants that there will now be a short break. When they return, they will have the chance to apply the action principles to a case scenario. Ask if there are any questions on the material that has been covered so far and for brief feedback on how the orientation is going so you can make any necessary adjustments.

**Break (15 minutes)**
PART II MODULES: APPLYING PFA ACTION PRINCIPLES

Case Scenario Group Work (20 minutes)

Learning Objectives

By the end of the session, participants should:

» Be able to describe the action principles of Prepare...Look, Listen and Link;

» Be able to describe how to apply the PFA action principles to their case scenario.

Materials

» Handouts describing case scenario and instructions (see Annex 4)

» 2-page PFA pocket guide in the local language (see Annex 1)

As preparation for group work, present the action principles of PFA in more detail by showing the slide above and/or referring participants to their 2-page PFA pocket guide.

Case Scenarios

1. Natural disaster

2. Violence & displacement

3. Accident
Have participants break into three groups and assign each group a case scenario, providing the handouts describing case scenarios and instructions (Annex 4). Also provide the 2-page PFA pocket guide in the local language (Annex 1) that participants can refer to in working through their case scenarios.

The case scenarios are designed to illustrate and generate questions about how PFA can be applied in different contexts and situations.

### Case Scenario Group Work

Thinking about 1) what you need most urgently and would find most helpful as a survivor, and 2) what you need as a helper to be able to assist...

- How will you PREPARE to help?
- What will you LOOK for in the crisis setting?
- What is important to consider as you approach affected people to LISTEN?
- How will you LINK people – what will they need and what resources can you draw upon?

### Group Work (10 minutes)

Instruct each group to take 10 minutes to discuss the case scenario using the instructions on the slide above and the questions in their handout:

Thinking about 1) what you would need most urgently and find most helpful as a survivor, and 2) what you need as a helper to be able to assist:

- How will you PREPARE to help?
- What will you LOOK for in the crisis setting?
- What is important to consider as you approach affected people to LISTEN?
- How will you LINK people – what will they need and what resources can you draw upon?

Explain to participants that their case scenario also includes a role play that each group will prepare for and demonstrate later during the orientation.

### Brief Discussion (5 minutes)

Ask each group to describe one thing of interest that came from from their group discussions on: Prepare…Look, Listen and Link.
FULL-DAY ORIENTATION: POSTER WALK OF CASE SCENARIO GROUP WORK

20 minutes

During the group work, have each group write their responses and ideas about Prepare...Look, Listen and link for their case scenario on flip chart paper. Tack the flip charts onto the wall for the other groups to see. Ask one person from each group to remain with their poster to answer questions that others might have. The participants should then walk around the room to view and discuss each other’s flip charts. Wrap up by facilitating a brief discussion. You can also use the following questions in facilitating discussion. For example, how did each group consider:

- SAFETY for themselves and others?
- RESOURCES available to assist affected people (e.g. services, other emergency aid interventions)?
- NEEDS of affected people, in relation to the type of event and context?
- CULTURAL issues in approaching affected people?
- ABILITIES/RESOURCES of affected people themselves?
- People who likely need special attention, and to whom (and how) to REFER them for more advanced support?

Explain to participants that we will now look at each action principle in more detail.

FACILITATION TIP:

In the following sessions, each action principle is described in more depth. As you go along, be sure to refer to the group work on case scenarios to give examples of how the action principles can be applied in practice. Some examples are given that you can use to highlight key learning points. In facilitating discussion, it is also helpful to familiarise yourself with the case scenario learning points in Chapter 5 “Practice what you have learned”, in the Psychological first aid: Guide for field workers.

Look (10 minutes)

Learning Objectives
By the end of the session, participants should:

- Be able to describe key elements of the LOOK action principle;
- Understand the importance of checking for safety;
- Know how to recognize people with obvious urgent basic needs;
- Be able to describe who may need special assistance in a crisis situation.
Provide an overview of the LOOK action principle using information on the following slides:

- Crisis situations can change rapidly
- What you encounter may be different from what you learned before entering
- Take time – even a quick scan – to LOOK around before offering help

  - Be calm
  - Be safe
  - Think before you act

Point out to participants that crisis situations can change rapidly and it may be difficult to obtain accurate information. What they encounter when they meet the affected population may be different from what they have learned beforehand. It is therefore important to take time to LOOK around to assess the situation before offering help.

**FACILITATION TIP:**

You can point out that the helpers in the simulation exercise may have experienced this when they entered the room. The situation they encountered in the room may have been different from what they thought they would encounter during their preparation.

Present the information on the slide below.

Emphasize to participants that safety is of primary importance under the LOOK principle. If it is not safe for you to be there, then do not go! Seek help from others and, if possible, communicate from a safe distance with affected people.
FACILITATION TIP:

Safety issues are important in the three case scenarios. For example, in natural disasters, there may be fallen or unstable buildings. In the accident situation, the traffic on the road may be dangerous to you and others gathering around.

Point out to participants the bullet points for “people with obvious urgent basic needs.” Some people affected by crisis events may be tired, hungry and thirsty. If possible, helpers can provide some basic comforts like food, water or blankets. It is also important to look for people who may need medical attention for injuries or illness.

Use the case scenario work to highlight two points in particular: 1) people who likely need special attention and 2) people with serious distress reactions.

Some people may need special assistance to access services or to be safe from violence or exploitation.

People who Likely Need Special Attention (to be safe... to access services)

- Children and adolescents
  - Especially those separated from caregivers
- People with health conditions and disabilities
  - People who are non-mobile, or who have chronic illness, hearing/visual impairments (deaf or blind), or severe mental disorders
  - Frail elderly people, pregnant or nursing women
- People at risk of discrimination or violence
  - Women, people of certain ethnic or religious groups, people with mental disabilities

Emphasize to participants that they should look for these people within the affected population:

» **Children and adolescents** – particularly those alone or separated from caregivers. Girls are especially at risk. Helpers should try to identify unaccompanied children and adolescents for special assistance, as they are at high risk of abuse and exploitation.

» **People with health conditions or disabilities** – this includes pregnant women, blind or deaf people, people who may be immobile and in need of help to get to a safe place, people with severe mental disorders and people on medication for chronic health conditions. They may need assistance to get to a safe place and to access the services and medical care they require.

» **People at risk of discrimination or violence** – this includes women or people of certain ethnic groups who may need protection or extra assistance in accessing services due to the possible risk of discrimination or violence.

FACILITATION TIP:

For example, in the violence and displacement scenario, there may be people separated from their families, including unaccompanied children or people from ethnic groups who may have been marginalized.
Explain to participants that it is also important to LOOK for people who are in serious distress. Ask how participants would know if someone was in serious distress in this community. Have a brief group discussion. Wrap up with the information on the following slides:

**Distress Reactions to Crisis**

- Physical symptoms (shaking, headaches, fatigue, loss of appetite, aches & pains)
- Anxiety, fear
- Weeping, grief and sadness
- Guilt, shame (for having survived, or for not saving others)
- Elation for having survived
- Being on guard, jumpy
- Anger, irritability
- Immobile, withdrawn
- Disoriented – not knowing one’s name, where one is from or what happened
- Not responding to others, not speaking at all
- Feeling confused, emotionally numb, feeling unreal or in a daze
- Unable to care for oneself or one’s children (not eating or drinking, not able to make simple decisions)

The above slide shows some of the reactions people can have after being exposed to a distressing event. The right-hand column lists reactions (in red) that are less common, but are especially of concern.

**Helping people in distress**

- Most people recover well over time, especially if their basic needs are met
- Those with severe or long-lasting distress may require more support
  - Try to make sure they are not left alone.
  - Try to keep them safe until the reaction passes or you can find help from others.

Explain that most people (even many of those who may look very distressed at the time of a crisis event) recover well over time, especially if their basic needs are met and they receive support. However, those people with very severe or long-lasting distress may require more support.

What you can do:

» Try not to leave them alone.
» Try to keep them safe until the reaction passes or you can find help from others.

**FACILITATION TIP:**

In the simulation exercise, some very distressed “affected people” may have been left alone by helpers. You can refer back to how this felt for the participants during the exercise to emphasize the importance of trying not to leave a very distressed person alone.
Listen (30 minutes)

Learning Objectives
By the end of the session, participants should:

» Be able to describe key elements of the LISTEN action principle;
» Know the supportive things to say and do (and NOT to say and do) for adults and children in distress, being aware of words and body language;
» Know how to help someone in distress to feel calm.

Materials
» Communication exercise instructions (See Annex 5)
» Good communication handout (See Annex 6)

Introduce the LISTEN action principle by showing the slide below.

![Listen slide]

Role Play

Explain that we will begin with a role play to demonstrate and practice listening.

Role Play: Listening (3 minutes)

Invite a participant to volunteer to role play, with you. Explain that you will play a helper, and the volunteer will play a person among the refugee group (from case scenario 2) who is upset, fearful and crying. Explain to the participant that you will approach them to LISTEN and provide PFA.

⚠ FACILITATION TIP:
Advise the volunteer to stay in their role through the role play, which will take about 3 minutes, and to respond in a realistic way (positively or negatively) to the things you say and do. Allow a few moments for you and the volunteer to get in your roles, and then begin. Try to model appropriate listening and PFA principles in your support to the volunteer, such as greeting them appropriately, introducing yourself by name, speaking and behaving respectfully and asking about their needs and concerns.
**Role Play Discussion (5 minutes)**

Following the role play, ask the volunteer how the experience was for them and how they felt as an affected person. What did they feel you did well as a helper, and what could have been better? Ask for brief feedback from the group (what went well, then what could have been better). Reflect on the things you said and did to demonstrate good listening and PFA principles, as well as any mistakes you may have made. Summarize with the information on the following slide.

### Listen

**Make contact**
- Approach respectfully
- Introduce yourself by name & organization
- Ask if you can provide help, find safe/quiet place
- Help person feel comfortable (water, blanket)
- Try to keep them safe.

**Ask about needs & concerns**
- Although some needs are obvious, always ask
- Find out person’s priorities – what is most important to them.

**Listen & help people feel calm**
- Stay close to the person
- Do not pressure them to talk
- Listen in case they want to talk
- If very distressed, help them feel calm & make sure they are not alone.

Point out that it is important to introduce yourself by name and affiliation, in order to help affected people who are frightened and unsure to feel more comfortable in talking with you. Always approach people respectfully, according to their culture, and ask if you can provide help. If someone is very upset, it may be helpful to find a quiet space to talk if possible in the environment.

Although some needs may seem obvious, it is important always to ask people what their needs and concerns are. In this way, you can better understand their situation and help them to address what they feel are their own priorities.

In order to provide emotional support and help people feel calm, stay close to them and listen in case they would like to talk about what happened. However, never pressure someone to tell you their story. If they are very distressed, try to make sure they are not left alone.

Ask participants how they might help someone who is very distressed to feel calm. Have a brief discussion. The discussion is likely to highlight ways of helping people feel calm in the particular culture of the participants. Summarize with the information on the slide below.
Help People Feel Calm

- Keep your tone of voice soft and calm
- Maintain some eye contact
- Reassure them they are safe and that you are there to help
- If someone feels “unreal,” help them to make contact with:
  - Themselves (feel feet on the floor, tap hands on lap)
  - Their surroundings (notice things around them)
  - Their breath (focus on breath & breathe slowly)

Demonstration: Helping People Feel Calm (3 minutes)

Explain to participants that there are some techniques you can use to help very distressed people to feel calm. Demonstrate for participants how you would use the techniques on the slide. Using a soft, soothing tone of voice, ask participants to place and feel their feet on the floor, and have them place their hands on their thighs. Tell them to focus on their breath and to breathe slowly. Next, ask them to tap their hands gently on their thighs. You can also ask them to notice non-distressing things around them (things they can see, hear or feel), and to continue to focus on their breath. Finally, ask participants how they experienced this demonstration and if they have any questions.

Good Communication (15 minutes)

Listen

- Make contact with people who may need support.
- Ask about people’s needs and concerns.
- Listen to people and help them feel calm.

Listen with compassion by using your:

Eyes – giving the person your undivided attention
Ears – hearing carefully their concerns
Heart – with caring and showing respect

Ask participants to consider what we mean by “good communication.” For example, when they have been upset or distressed, what did someone say or do that was helpful to them? Allow a brief discussion (5 minutes) and free flow of ideas about good communication. Emphasize what participants say about both words and body language, and what is appropriate in their culture. You may want to have them demonstrate, for example, what is an appropriate distance between people, eye contact and touching.
**Role Play: “Bad communication” (5 minutes)**

Provide the instructions in Annex 5 as handouts for listeners in the role play.

The purpose of this exercise is to show the importance of both verbal and non-verbal communication. Ask participants to pair with a partner. Explain that one person plays the role of someone who has just witnessed a car accident. (S)he is very upset and wants to talk about what happened.

The other person is the helper and receives a piece of paper from Annex 5. (S)he has to keep the instructions a secret, so tell the helpers not to show the instructions to the affected person! Give participants 3 minutes for the role play, announcing the start and stop times.

**Role Play Discussion (5 minutes)**

Facilitate a discussion of the experience with the group by asking the affected people in the role play what happened and how they felt during the conversation. They will likely have a lot to say about what went wrong! Ask the helpers to share the instructions they received. This is generally a lively and fun exercise, and useful in pointing out how it feels when a helper communicates badly.
Next, invite participants to get into pairs for a “good” communication exercise. One person plays
the role of the listener/helper, and the other person will tell them about something difficult that
happened to them in the last week that they feel comfortable sharing. The listener/helper will
demonstrate good communication skills during the interaction. Explain that after 5 minutes you
will call “time” and then the partners will switch roles. Call “time” again after 5 minutes. Have the
partners give feedback to each other (what went well and what could have been better in terms
of communication).

Following the exercise, bring the participants back into plenary and ask them generally how the
exercise was for them. Allow a few participants to share their experience, and what they learned
about good communication strategies.

Summarize with the information on the following slides and give participants the handout on good
communication (Annex 6). Explain that this information can also be found in section 3.1 of the
Psychological first aid: Guide for field workers
Good Communication: Things to Say and Do

- Try to find a quiet place to talk and minimize outside distractions.
- Stay near the person but keep an appropriate distance depending on their age, gender and culture.
- Let them know you hear them, for example, nod your head and say... “hmmmm.”
- Be patient and calm.
- Provide factual information if you have it. Be honest about what you know and what you don’t know. “I don’t know but I will try to find out about that for you.”
- Give information in a way the person can understand – keep it simple.
- Acknowledge how they are feeling, and any losses or important events they share with you, such as loss of home or death of a loved one. “I’m so sorry...”
- Respect privacy. Keep the person’s story confidential, especially when they disclose very private events.
- Acknowledge the person’s strengths and how they have helped themselves.

Good Communication: Things NOT to Say and Do

- Don’t pressure someone to tell their story.
- Don’t interrupt or rush someone’s story.
- Don’t give your opinions of the person’s situation, just listen.
- Don’t touch the person if you’re not sure it is appropriate to do so.
- Don’t judge what they have or haven’t done, or how they are feeling. Don’t say... “You shouldn’t feel that way.” or “You should feel lucky you survived.”
- Don’t make up things you don’t know.
- Don’t use too technical terms.
- Don’t tell them someone else’s story.
- Don’t talk about your own troubles.
- Don’t give false promises or false reassurances.
- Don’t feel you have to try to solve all the person’s problems for them.
- Don’t take away the person’s strength and sense of being able to care for themselves.

Link (15 minutes)

Learning Objectives

By the end of the session, participants should:

» Be able to describe key elements of the LINK action principle;
» Be able to help people cope with problems using their own good coping strategies;
» Know important tips on linking people with information;
» Know the importance of linking people with social support and available services.
Provide an overview of the LINK action principle using information on the following slides:

- Help people address basic needs and access services
- Help people cope with problems
- Give information
- Connect people with loved ones and social support

Help people to help themselves and regain control of their situation.

Emphasize to participants that the helper’s role is not to solve all of people’s problems for them, but help them to address their own needs. Linking them with information, services and social support will help them to regain control of their situation.

Link – basic needs

- What needs do they request?
- What services are available?
- Don’t overlook the needs of vulnerable or marginalized people
- Follow up if you promise to do so

Affected people may have many basic needs depending on the crisis situation. You may be in a position to offer basic items like food, water or blankets or you can link people with others who are providing those services. Remember to keep in mind the people who likely need special assistance to get their basic needs met.
In helping people to cope with problems, remember that everyone has ways they have managed adversity in the past, but in crisis situations people may feel overwhelmed with worries. You can help them to prioritize their most urgent needs and those that can wait for later. Encourage them to also use their own good coping strategies to help themselves in the current situation. For example, help them to identify people (friends and family) who can offer support, or give practical suggestions about how they can meet their needs.

Ask participants to name some positive and negative coping strategies. Summarize with the slide below on positive coping strategies.

Almost all people in crisis situations will want and need information! However, it may be difficult to get accurate information following a crisis event. Rumours may be common, causing mistrust, fear and anger. Giving information to a group can help to dispel rumours and to ensure that everyone receives the same message.
**FULL-DAY ORIENTATION: ROLE PLAY GIVING INFORMATION**

10 minutes

**Role Play (5 minutes)**

Invite volunteers to role play giving information. Ask for volunteer(s) to be the helper(s) who will give information to the refugee group described in the violence and displacement case scenario. Ask for 5–6 participants to be refugees and to take different roles of being fearful, sad, uncertain or angry and wanting information on the situation and the help they will receive. Advise participants to make the role play realistic, but not too difficult for the helper(s).

---

**FACILITATION TIP:**

*If the helper giving information becomes stuck, they can ask a fellow participant to assist or to take over for them.*

**Discussion (5 minutes)**

After the role play, ask the volunteer helper(s) how the experience was for them – what they did well and what could have been better. Then ask the role play refugees for feedback and invite brief comments and suggestions from the rest of the participants. Although the helper may not have all the answers in a given situation, this role play often highlights the tips for giving information outlined on the slide below.
Provide tips for giving information as described on the slide below:

- Find accurate information before helping
- Keep updated
- Make sure people are informed where & how to access services – especially vulnerable people
- Say ONLY what you know – don’t make up information
- Keep messages simple & accurate, repeat often
- Give same information to groups to decrease rumours
- Explain source & reliability of info you give
- Let them know when/where you will update them.

Emphasize the importance of gathering as much accurate information as possible before approaching a group to provide information. Introduce yourself clearly as a helper so that affected people understand your role, and explain the source and limitations of the information you are giving. You can offer to try to find out information that you do not have readily available, and let affected people know when and where they will update them. However, never make up information that you do not know.

Keep messages simple and accurate, and repeat the message to be sure people hear and understand the information. Also, make sure people are clearly informed where and how to access services, especially people who likely need special assistance.

Finally, it has been shown that people who feel they had good social support after a crisis cope better than those who feel they were not well supported. Emphasize to participants the importance of connecting affected people with loved ones and social support.

In some situations, people may be separated from their families and children separated from their caregivers. Emphasize to participants that it is important to help link unaccompanied children and
adolescents with a trustworthy child protection agency for their safety and to help trace their caregivers. Likewise, family tracing and reunification organizations can help separated family members to reunite.

**Ending your assistance**

To finalize this session on the PFA action principles, explain to participants how to end their assistance using the information on the following slide:

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**Ending your assistance**

- Use your best judgment of person’s needs and your own needs.
- Explain you are leaving and, if possible, introduce them to someone else who can help.
- If you linked them with services, be sure they have contact details and know what to expect.
- No matter what your experience, say goodbye in a good way, wish them well.

---

Explain that the helper needs to use their best judgment about when to end their assistance. If the person you are helping continues to be distressed, you can try to connect them with another helper or family members to make sure they are not left alone, and link them if necessary with more advanced support.

Take a few minutes to review with participants what they have learned so far and ask if they have any questions.

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**PFA Review**

- What have you learned so far?
- What confuses you?
- Do you disagree with anything?
- Do you feel confident about being able to offer PFA?

---

Explain that there will now be a break of 15 minutes, and when we return, participants will practice what they have learned using the role plays in their case scenarios.

**Break (15 minutes)**
PART III MODULES: PFA ROLE PLAYS AND WRAP-UP, SELF AND TEAM CARE, EVALUATION

Case Scenario Role Plays (40 minutes)

Learning Objectives
By the end of the session, participants should:

» Be able to demonstrate how to apply the principles of Prepare…Look, Listen and Link to a case scenario;
» Be able to demonstrate good communication skills with individuals in different crisis situations.

Materials

» Handouts describing case scenario and instructions (see Annex 4)
» Things caregivers can do to help children handout (see Annex 7)

Case Scenarios

1. Natural disaster
2. Violence & displacement
3. Accident

Ask participants to go back into the three groups according to their case scenarios (see Annex 4). Give the groups 5 minutes to discuss and prepare the role plays described at the bottom of their case scenario instructions. Explain that the role plays should take no more than 5 minutes. Remind participants:

» To keep in mind the action principles: Prepare…Look, Listen and Link.
» To stay in their roles throughout the role play, and try not to laugh.
» That if they feel stuck during a role play, they can ask another participant to take over (someone from their own group if possible).

Explain that the role play instructions provide guidance for the main characters in the role play. Each group is free to decide how they would like to approach their scenario, e.g. who will perform the role play, if they will choose to have one or more helpers, and so on.

Ask each group in turn to perform their role play. They can first give the other participants a basic description of their case scenario and the scene they are role playing.
FACILITATION TIP:

Manage time carefully in order to allow 5 minutes maximum for each group to perform their role play, and at least 5 minutes for feedback, questions and discussion on their role play. In facilitating the feedback to each group, first ask the helpers in the role play what they feel they did well, and what could be better. Then ask for feedback in the same way from the affected people and allow brief comments and questions from the participant group.

You can use the information on the following slides to recap key learning points from each scenario.

Case Scenario 1: Role Play

1. Role play learning points:
   Natural disaster (distressed woman)
   - Introduce yourself by name and agency
   - Ask the affected woman her name and if you can help her
   - Protect her from harm by moving her to a safer place to talk away from the rubble
   - Offer her some comfort (e.g. water) if you can.
   - Listen and stay near her without forcing talk.
   - Ask for her needs and concerns, and help her feel calm.
   - Reflect ways in which she has acted appropriately (e.g. keeping herself safe) and encouraging good coping strategies.
   - Acknowledge her worry over possible loss of her colleagues.
   - Offer to help connect her with loved ones or other supports.

In addition to the learning points on the slide above, emphasize to participants that in this role play it is important to first be sure it is safe for you to enter the scene as a helper.

Case Scenario 2: Role Play

2. Role play learning points:
   Violence/displacement (unaccompanied child)
   - Notice the unaccompanied child in the group of refugees as someone who likely needs special attention
   - Speak with the child at their eye level
   - Speak calmly and kindly to the child using words the child can understand
   - Find out information about the child’s family, such as the name of his sister
   - Stay with the child while identifying a trustworthy family tracing organization that can organize a safe place for the child to stay until his family is found

In this and all role plays, helpers can demonstrate the usual good practices of introducing themselves by name and affiliation, and offering practical comfort like some water. In this role play it is also important for the helper to approach and assist the unaccompanied child according to the learning points in the slide above.
Case Scenario 3: Role Play

3. Role play learning points: Accident (caregiver and child)

- Look for safety for self and others, check for serious injuries
- Call emergency medical help for the injured man
- Protect affected people from further harm (e.g. move wife & child away from traffic, prevent moving the injured man)
- Introduce yourself, speak respectfully and appropriate to the wife and child
- Help the wife to feel calm
- Help the wife prioritize problems and care for her child
- Link with information about the husband’s care (e.g. hospital name) and/or assist family to accompany him to hospital
- Help the wife to link with loved ones for support.

In this role play involving a medical emergency, there is little time to prepare. However, it is important that helpers take a moment to make a quick scan of the accident scene to check safety for themselves, affected people and bystanders. The helpers may be able to coordinate their assistance for the different people involved in the scenario (e.g. one can attend to the injured man, while another attends to the wife and child). Life-saving measures are a priority in any crisis situation, and so it is essential that the injured man is attended to appropriately. Some of the surrounding villagers may be able to help (e.g. by calling an ambulance), while others may also interfere or cause further injury (e.g. by moving the injured man). Give participants the handout “Things caregivers can do to help children” for further information on how to assist the wife in the role play to care for her daughter. (See annex 7)

Refer participants to Chapter 5: Practice what you have learned in the Psychological first aid: Guide for field workers so that they can review the learning points from the case scenarios on their own at home.

Adapting to the Local Cultural Context (10 minutes)

Divide participants into three groups and assign each group one of the questions on the following slide:

Full Day Orientation
Exercise: Adapting PFA Action Principles to the Local Cultural Context

- Group 1: LOOK
  - In the local culture, how do people react, behave or respond when they are distressed? What might you be able to do to assist people with these symptoms of distress?
- Group 2: LISTEN
  - In the local culture, what do people do to show they are listening? How do you help people feel calm?
- Group 3: LINK
  - In the local culture, who are the people that individuals seek for emotional support? How do they approach others to get that support? How do they know they are supported?
Bring participants back in plenary after 5 minutes and have each group briefly present. After each presentation allow for discussion and a flow of ideas. Issues that may arise include how to address people according to their age and social status; customs around touching someone appropriate to their age, culture and gender; and how people seek and receive emotional support. This session can be used to summarize the role play experiences in terms of what to say and do, and what NOT to say and do, in the local cultural context.

People Who Likely Need Special Attention (20 minutes)

Exercise: Vulnerable Groups in Crisis Situations

- Read the description of the person you are given
- Stand in a line
- When a statement is read, consider the position of the person in your description
- If you agree, with the statement, step forward
- If you do not agree, remain where you are.

Remind participants of the people mentioned previously who likely need special attention. These include 1) children and adolescents, 2) people with health conditions or disabilities and 3) people at risk of discrimination or violence.

Explain that we will now do an exercise on how a vulnerable person may experience a crisis situation. Ask participants to stand in a line. Hand each participant a description of a vulnerable person. Explain that you will read out a statement. Participants who agree with the statement (according to the vulnerable person description they have) should take one step forward. If they do not agree with the statement, they should remain where they are. Read each statement in turn. For certain statements, vulnerable people will be “left behind” as others step forward.

See Annex 8 for descriptions of vulnerable people and statements to read aloud. Adapt the descriptions and statements as necessary for the context of participants in the orientation.
To wrap up, ask participants to briefly reflect on the exercise. Summarize with the following slides.

---

**Risks for Children and Adolescents**

- In crisis, they lose familiar routines, environment, and people that make them feel safe
- Cannot meet basic needs or protect themselves
- Separated children are of special concern
- Risk of being trafficked, sexually exploited, recruited to armed forces
- Girl children at special risk for abuse, exploitation, stigmatization

---

**Things you can do for Children and Adolescents...**

- Keep together with loved ones
  - If unaccompanied, link them with a trustworthy child protection network/agency or try to find loved ones;
  - Don’t leave them unattended.
- Keep safe
  - Protect them from gruesome scenes, injured people, destruction, upsetting stories, media.
- Listen, talk and play
  - Be calm, talk softly, relate on their eye level, and use language they can understand;
  - Listen to their views on the situation.
- Remember they also have strengths

---

Children and adolescents, particularly those alone or separated from their caregivers and girl children, are especially at risk. Not only are their familiar routines and environment disrupted by crisis events, they are also at risk of being abused or trafficked.

Helpers should try to keep children and adolescents with their loved ones (or link them with a trustworthy child protection agency if unaccompanied), keep them safe, and listen, talk and play with them in ways appropriate to their age. Remember they also have strengths! Provide participants the handout: “Things caregivers can do to help children” (Annex 7). Show participants that this information can also be found in section 3.5 of the Psychological first aid: Guide for field workers.
Crisis events can worsen many health conditions. Help people with chronic health conditions or disabilities to get to a safe place, meet basic needs, access medical care and medications, link with a protection agency and access information on available services.

People at risk of discrimination or violence, such as women or people from certain ethnic or religious groups, may be left out of distribution of basic services and decisions about aid and their future. They may also be targeted for violence. Helpers can help them to find safe places to stay, connect with loved ones and trusted people, and obtain information about – or link them directly to – services.
Learning Objectives:
At the end of this session, participants should:

» Feel confident in being able to describe PFA principles;
» Be able to describe the Ethical Do’s and Don’ts of providing PFA.

As a summary of PFA as it has been demonstrated through the orientation, ask participants what they feel are important ethical considerations in applying PFA. Allow for a brief discussion (5 minutes) and then summarize with the information on the following slide:

Summary: Ethical Guidelines

<table>
<thead>
<tr>
<th>Do’s</th>
<th>Don’ts</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Be honest and trustworthy</td>
<td>• Don’t exploit your relationship as a helper</td>
</tr>
<tr>
<td>• Respect a person’s right to make</td>
<td>• Don’t ask the person for any money or favour for helping them</td>
</tr>
<tr>
<td>their own decisions</td>
<td>• Don’t make false promises or give false information</td>
</tr>
<tr>
<td>• Be aware of and set aside your</td>
<td>• Don’t exaggerate your skills</td>
</tr>
<tr>
<td>own biases and prejudices</td>
<td>• Don’t force help on people, and don’t be intrusive or pushy</td>
</tr>
<tr>
<td>• Make it clear to people that even if</td>
<td>• Don’t pressure people to tell you their story</td>
</tr>
<tr>
<td>they refuse help now, they can still</td>
<td>• Don’t share the person’s story with others</td>
</tr>
<tr>
<td>access help in the future</td>
<td>• Don’t judge the person for their actions or feelings</td>
</tr>
<tr>
<td>• Respect privacy and keep the person’s</td>
<td></td>
</tr>
<tr>
<td>story confidential, as appropriate</td>
<td></td>
</tr>
<tr>
<td>• Behave appropriately according to the</td>
<td></td>
</tr>
<tr>
<td>person’s culture, age and gender</td>
<td></td>
</tr>
</tbody>
</table>

Please see the PFA pocket guide in Annex 1 for a summary of Ethical Do’s and Don’ts.
FULL-DAY ORIENTATION: FINAL SIMULATION AND DISCUSSION

15 minutes

Explain to participants that we will repeat the simulation exercise from the beginning of the orientation, but now using all of the knowledge gained in practising and applying PFA action principles. Divide participants into two groups, giving each a set of instructions on the handout. You may want to have participants change roles from the earlier simulation – the helpers will now be affected people, and the affected people will now be helpers. Follow the directions from the first crisis simulation, reminding participants to stay in their roles throughout the scenario.

To summarise, ask participants: how was the experience for you this time around? What did they do well, what could have been better? (See slide below.)

---

What was it like as a helper responding to this situation?
What was it like as a person affected by this disaster?

As a helper, what did you do well? Did you feel that you were making a difference?
How did you feel supported or helped by the helpers?

What could you as helper(s) have done better?
Was there anything the helpers said or did that was NOT helpful, or could have done better?
Summarize the PFA action principles by showing the slide below.

Did you do all of the following?

| Prepare | • Learn about the crisis event. | • Learn about available services and supports. | • Learn about safety and security concerns. |
| Look | • Observe for safety. | • Observe for people with obvious urgent basic needs. | • Observe for people with serious distress reactions. |
| Listen | • Make contact with people who may need support. | • Ask about people’s needs and concerns. | • Listen to people and help them feel calm. |
| Link | • Help people address basic needs and access services. | • Help people cope with problems. | • Give information. | • Connect people with loved ones and social support. |

Allow for discussion, reflections and any final questions regarding PFA.

Self and Team Care (15 minutes)

**Learning Objectives**

By the end of this session, participants should:

» Know the importance of self and team care for helpers;

» Be able to describe strategies for self care before, during and after helping in crisis situations.

**Materials**

» Participants’ self and team care strategies from morning session;

» Brief relaxation exercise for helper self care (for full-day orientations) (Annex 10).

**FACILITATION TIP:**

Keep in mind that participants may not consider their own well-being important, or may feel they should not attend to their own needs when the needs of affected people are so great. It is important to give the message that self and team care are essential responsibilities of all helpers in crisis situations, so that they can help others effectively.
Begin the session by asking participants to recall what they wrote at the beginning of the orientation to the questions:

- What do I do to take care of myself?
- What does my team (family, colleagues) do to take care of each other?

Emphasize that PFA helpers have a responsibility to first care for their own well-being in order to be able to assist others. Being a helper in crisis situations carries many unique stresses. Ask participants what kinds of stresses they have had – or imagine they would have – as a helper providing PFA in crisis situations. Allow for a brief discussion. Responses may include long working hours, unsupportive supervisors, witnessing death or destruction, hearing stories of people’s pain and suffering, and feeling guilty about not being able to “help” or “save” affected people. Emphasize that helpers need to keep realistic expectations of what they can and cannot do, and remember that their role is to help people help themselves.
**Small group discussion (5 minutes)**

Explain that self and team care is important before, during and after helping in a crisis situation. Ask participants to go into small groups of 3–4 people and discuss how each group member will implement self and team care strategies, recalling what they wrote down at the beginning of the orientation. Each participant should consider what self and team care strategies they feel would be most helpful before, during and after helping in a crisis situation.

Reconvene participants in plenary to share highlights from their group discussions about self and team care. It is not necessary to have each group present details of their discussions in the plenary, but rather get a general sense of the experience of the groups and note common strategies they mention.

Advise participants that it is important for them to seek support from someone they trust if, after a time, they find themselves with upsetting thoughts about the event, feel very nervous or extremely sad, have trouble sleeping, or drink a lot of alcohol/take drugs. Advise them to speak to a health care professional or mental health specialist (if available) if these difficulties continue for more than one month.

**FULL-DAY ORIENTATION: PROGRESSIVE MUSCLE RELAXATION EXERCISE**

5 minutes

Invite participants to practise with you an exercise that may be useful in managing their stress. To prepare for this exercise, have participants sit quietly in their chairs with their feet flat on the floor. If possible, dim the lights and try to minimize any noises or distractions in the room. See Annex 10 for a description of the progressive muscle relaxation exercise and a script that you can follow.
Support (whether from colleagues, friends or family) is very important to maintaining well-being while working in crisis situations. It is recommended for helpers to be part of an agency or group when offering PFA. This is not only important to ensure safety and good coordination but also for mutual support. While helping in crisis situations, be sure to check in with fellow helpers to see how they are doing, and have them check in with you. Find ways to support each other. When your helping role in the crisis is over, be sure to take time for rest and reflection. Talk about your experience with a supervisor, colleague or someone else you trust.

If there is time, invite participants to share any closing remarks or questions about good self and team care.

**Evaluation and Closing (10 minutes)**

**FULL-DAY ORIENTATION: OPTIONAL POST-TEST**

15 minutes

See Annex 2 for pre/post test questions. Allow up to 10 minutes for participants to take the post-test. Collect the completed post-tests for later comparison with the pre-tests in order to measure the impact of the training on their knowledge and confidence to offer PFA. You can review the correct answers to the knowledge questions with the participants as a group in order to reinforce their knowledge and clarify any misconceptions.
Evaluation

- Please say...
  - What went well?
  - What could have been better?
  - What did you learn (one thing) that you will use in offering PFA?

THANK YOU & GOOD LUCK!

To close the orientation, be sure to take time for participants to evaluate and give feedback on their experience so that you can improve the orientation in the future. Invite participants to fill in the anonymous written evaluation form (see Annex 9). In addition, take time for an oral evaluation round.

Invite participants to give their honest feedback of the orientation – both what went well and what could have been better – and to state one thing they have learned that they will apply when offering PFA.

Take time as facilitator(s) to acknowledge them for their participation and hard work during the orientation. You can offer a small closing ceremony or celebration if appropriate.
SUPPORTING MATERIALS

Annex 1: PFA pocket guide
Annex 2: Optional Pre/Post Test (for full-day orientations)
Annex 3: Simulation Instructions
Annex 4: Case Scenario Instructions
Annex 5: Communication Exercise Instructions
Annex 6: Good Communication Handout
Annex 7: Things Caregivers Can Do To Help Children Handout
Annex 8: Vulnerable People Exercise Instructions
Annex 9: Evaluation Form
Annex 10: Brief Relaxation Exercise for Helper Self Care (for full-day orientations)
Annex 11: Full-Day Orientation Agenda
Annex 1: PFA Pocket Guide

Provide this 2-page PFA pocket guide in the local language of participants. The PFA pocket guide can also be found at the end of the *Psychological first aid: Guide for field workers*. (Note: check whether the guide is already available in the local language on the WHO website. If not already available in the local language, translate this handout for your participants.)

**Psychological first aid: Pocket guide**

**WHAT IS PFA?**

Psychological first aid (PFA) describes a humane, supportive response to a fellow human being who is suffering and who may need support.

Providing PFA responsibly means:

1. Respect safety, dignity and rights.
2. Adapt what you do to take account of the person’s culture.
3. Be aware of other emergency response measures.
4. Look after yourself.

**PREPARE**

» Learn about the crisis event.
» Learn about available services and supports.
» Learn about safety and security concerns.

**PFA ACTION PRINCIPLES:**

**LOOK**

» Check for safety.
» Check for people with obvious urgent basic needs.
» Check for people with serious distress reactions.

**LISTEN**

» Approach people who may need support.
» Ask about people’s needs and concerns.
» Listen to people, and help them to feel calm.

**LINK**

» Help people address basic needs and access services.
» Help people cope with problems.
» Give information.
» Connect people with loved ones and social support.
ETHICS:

Ethical do’s and don’ts are offered as guidance to avoid causing further harm to the person, to provide the best care possible and to act only in their best interest. Offer help in ways that are most appropriate and comfortable to the people you are supporting. Consider what this ethical guidance means in terms of your cultural context.

**Do’s ✓**
- Be honest and trustworthy.
- Respect people’s right to make their own decisions.
- Be aware of and set aside your own biases and prejudices.
- Make it clear to people that even if they refuse help now, they can still access help in the future.
- Respect privacy and keep the person’s story confidential, if this is appropriate.
- Behave appropriately by considering the person’s culture, age and gender.

**Don’ts X**
- Don’t exploit your relationship as a helper.
- Don’t ask the person for any money or favour for helping them.
- Don’t make false promises or give false information.
- Don’t exaggerate your skills.
- Don’t force help on people, and don’t be intrusive or pushy.
- Don’t pressure people to tell you their story.
- Don’t share the person’s story with others.
- Don’t judge the person for their actions or feelings.

PEOPLE WHO NEED MORE THAN PFA ALONE:

Some people will need much more than PFA alone. Know your limits and ask for help from others who can provide medical or other assistance to save life.

PEOPLE WHO NEED MORE ADVANCED SUPPORT IMMEDIATELY:

- People with serious, life-threatening injuries who need emergency medical care.
- People who are so upset that they cannot care for themselves or their children.
- People who may hurt themselves.
- People who may hurt others.
**Annex 2: Optional Pre/Post Test (for full-day orientations)**

**Psychological First Aid (PFA) Orientation**

**Pre/Post Test**

Date: ______________________

Do not write your name on this test

<table>
<thead>
<tr>
<th>Please circle the number that best corresponds to how you rate your ...</th>
<th>Very Low</th>
<th>Low</th>
<th>Medium</th>
<th>High</th>
<th>Very High</th>
</tr>
</thead>
<tbody>
<tr>
<td>4. Ability to support people who have experienced disasters or other extremely stressful events</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>5. Ability to prepare and approach a crisis situation safely.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>6. Ability to recognize people in distress who may need support.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>7. Knowledge of what to say and do in order to be helpful to someone in distress.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>8. Ability to listen in a supportive way, according to someone's cultural context.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>9. Ability to link people affected by crisis events to needed services, information and loved ones.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>10. Ability to recognize and assist people who likely need special attention.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>11. Knowledge of what not to say or do when helping people affected by crisis events (so that you don't cause further harm).</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>12. Ability to take care of yourself and support your team members when assisting people affected by crisis.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>
Please check the best correct answer (yes or no) for each statement below…

<table>
<thead>
<tr>
<th>Which of the following is true for people who have experienced crisis events?</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Most affected people develop mental disorder.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Most affected people need specialized mental health services.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Most affected people recover from distress on their own using their own supports and resources.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Which of the following can be helpful for people who have experienced very distressing events?</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>4. Asking people to recount some of the details of their traumatic experiences.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Taking time to be sure it is safe to approach the scene of a crisis event, even if you must act urgently.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Telling them the story of someone else you just helped so that they know they are not alone.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Giving any reassurance to help people feel better (e.g. your house will be rebuilt soon).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Being sure to say only what you know (e.g. about the situation or services) and not to make up information that you don’t know.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Judging the person’s actions and behavior (e.g. you should have said/done this or that…) so they won’t make the same mistake next time.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. Finding out more about the situation and available services so that you can assist people in getting their needs met.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. Telling an affected person how they should be feeling (e.g. you should feel lucky, things could be worse).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12. Asking an affected person about their concerns, even when you think you know what their concerns are.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

As someone providing assistance to others you should…

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>14. Focus only on the people you are helping, and try to forget your own needs until after the crisis situation is over.</td>
<td></td>
</tr>
<tr>
<td>15. Practise self care by taking regular breaks and talking with someone you trust about your helping experience.</td>
<td></td>
</tr>
</tbody>
</table>
Pre/Post Test Answer Key (for facilitators)

1. No
2. No
3. Yes
4. No
5. Yes
6. No
7. No
8. Yes
9. No
10. Yes
11. No
12. Yes
13. Yes
14. No
15. Yes
Annex 3: Simulation Instructions

SIMULATION – PFA

Group 1: Affected People

A large earthquake has suddenly hit the centre of the city in the middle of the workday. Buildings have fallen, there is widespread destruction and you are among the many people who have been affected. You are a diverse group of people (young and old, men and women) who have survived and are now in a shelter. You have each been affected in different ways and are distressed, but none of you have life-threatening injuries. Please choose a role from among the list below, or make up a role that you can relate to. Set yourselves in the scene and stay in your role throughout the entire time of this simulation (about 5 minutes). Try not to laugh during the exercise. In a moment, some people will arrive to support you.

Roles:

» Unaccompanied child – alone and frightened, about 10 years old
» Pregnant woman with a child
» Very distressed, but unharmed person whose family is lost in the disaster
» Person in shock who cannot speak
» Person with non-life threatening injuries
» Nervous person who is upset and starting to upset others
» Person who is relatively calm and able to give an account of what happened
» A frail, elderly person.

SIMULATION – PFA

Group 2: Helpers

You hear that a large earthquake has suddenly hit the centre of the city in the middle of the workday. Many people have been affected and buildings have fallen. You and your colleagues felt the shaking, but are OK. The extent of the damage is unclear. You have been asked to assist survivors in a local shelter who are affected in different ways. You will have 5 minutes to demonstrate how you will provide PFA. (None of the affected people you will encounter have life-threatening injuries.)

Take a couple of minutes to decide how you will organize yourselves to approach the situation. You may want to take on different helping roles, or you can stay in the role you usually have when assisting in crisis situations (if this is part of your work). Try not to laugh during the exercise. When signalled, you may enter the scene.
Annex 4: Case Scenario Instructions

PFA Case Scenario 1: Natural Disaster

You hear that a large earthquake has suddenly hit the centre of the city in the middle of the work day. Many people have been affected and buildings have fallen. You and your colleagues felt the shaking, but are OK. The extent of the damage is unclear. The agency you work for has asked you and your colleagues to assist survivors, and to support any severely affected people you encounter.

As you PREPARE to help, ask yourself:

» Am I ready to help?
» What information do I have about the crisis situation?
» Will I travel alone or together with colleagues?

As you move about the city, what is important to LOOK for?

» What services and supports are available?
» Where can you provide PFA safely?

As you make contact, how can you best LISTEN to people’s concerns and give comfort?

» How can you help distressed people to feel calm?

What can you do to LINK people with information, services and their loved ones?

» What challenges might you encounter when trying to link people?

Case Scenario 1: Role Play

Consider how you will approach affected people to offer assistance, according to the PFA principles of Prepare…Look, Listen and Link. In particular, discuss and prepare the role play below.

Note: These instructions provide guidance for the main characters in the role play. As a group, feel free to decide how you would like to approach this scenario, i.e., who will perform the role play, if you will choose to have one or more helpers, and so on.

Instructions to helper(s):

» You have encountered a woman standing outside the rubble of a fallen building. She is crying and shaking, although does not appear to be physically injured. Provide PFA and demonstrate how you will approach her to LISTEN and help her to feel calm.

Instructions to survivor:

» You are a woman who witnessed the building falling during the earthquake. Your colleagues were inside and you are very upset and shocked, crying and shaking. You are not sure what has happened or what to do.
**PFA Case Scenario 2: Violence and Displacement**

Refugees are being brought to a new location in trucks and told that they will be staying in this new place. They were relocated because of the war in their previous area. As they disembark from the trucks, some of them are crying, some appear very fearful, some seem disoriented, while others are sighing with relief. Most are afraid and doubtful of this new place, and have no idea where they will sleep, eat or receive health care. Some seem scared when they hear any loud noise, thinking they are hearing the guns again. You are volunteers with an agency that distributes food items and have been asked to help provide PFA at distribution sites.

As you PREPARE to help, consider:

- What is the background of the people you will be helping?
- What services are being provided in the place the refugees are being received, and how can you coordinate with other helpers?

As you encounter the group of refugees, what is important to LOOK for?

- What different types of reactions do you observe among the refugees?

As you make contact with people among the refugee group, how can you best LISTEN to their concerns and give comfort?

- People who have experienced or witnessed violence may feel frightened. How will you support them and help them feel calm?
- How can you find out the needs and concerns of people who likely need special assistance, such as women?

What can you do to LINK people with information, loved ones and services?

- What accurate information is available about the situation and available services?

Case Scenario 2: Role Play

Consider how you will approach the refugees to offer assistance using the PFA principles of Prepare… Look, Listen and Link. In particular, discuss and prepare the role play below.

Note: These instructions provide guidance for the main characters in the role play. As a group, feel free to decide how you would like to approach this scenario, i.e., who will perform the role play, if you will choose to have one or more helpers, and so on.

Instructions to helper(s):

- At the edge of the refugee group, you notice a boy of about 10 years old standing alone and looking very frightened. Show how you will approach him and offer PFA.

Instructions to child:

- You and your older sister fled your village when you heard gunfire and got lost from your parents. You were separated from your sister when getting on the trucks. You are thirsty, tired and frightened.
**PFA Case Scenario 3: Accident**

You and your colleagues are traveling on a busy village road in a safe part of the country when up ahead you see an accident. It appears that a man who was crossing the road with his wife and young daughter was hit by a passing car. The man is lying on the ground, bleeding and unmoving. His wife and daughter are near him. His wife is crying and shaking, while his daughter is standing motionless and silent. Some villagers are gathering on the busy road near the scene of the accident.

You need to react quickly in this situation, but take a moment to stay calm and consider the following:

- What needs to be done urgently?
- How can you stay safe and help keep affected people safe from harm?

As you encounter the people involved in the accident, what is important to LOOK for?

- Who needs assistance? Who can help you?

As you make contact with the people involved in the accident, how can you best LISTEN and provide comfort?

- How can you help the mother to care for her daughter?

What can you do to LINK affected people with information and practical support?

- How can you help to keep the affected family together?

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**Case Scenario 3: Role Play**

Consider how you will approach the affected people to offer assistance using the PFA principles of *Prepare…Look, Listen and Link*. In particular, discuss and prepare the role play below.

*Note:* These instructions provide guidance for the main characters in the role play. As a group, feel free to decide how you would like to approach this scenario, i.e., who will perform the role play, if you will choose to have one or more helpers, and so on.

**Instructions to helper(s):**

- You have made a quick scan to be sure you could approach the scene of the accident safely. The injured man has been attended to appropriately. The wife remains very distressed, and her daughter is still standing nearby mute and withdrawn. Demonstrate how you will assist the mother and her daughter, and LINK them with information and loved ones.

**Instructions to mother and daughter:**

- Mother – all you can think of is your injured husband and you are very distressed. You feel overwhelmed and don’t know what to do in this situation.

- Daughter – you are frightened and confused by what has happened. Your mother is very upset and you are not sure how to ask for help or comfort.
Annex 5: Communication Exercise Instructions

The following instructions can be handed out to participants playing the role of the helper in the “bad communication” exercise. Prepare the instructions by printing them and cutting at the line so that each helper receives one instruction. You may need to print extra copies if you have a large group of participants. Remind the helpers not to share their instructions with the affected person they are “helping.”

Bad Communication Exercise – Helper

As the distressed person talks to you and tells you their story, do the following:

» Look around the room and appear distracted.

Stay in your role throughout the interaction, even through it may not be how you would normally act! This is only for learning purposes.

Bad Communication Exercise – Helper

As the distressed person talks to you and tells you their story, do the following:

» Interrupt and prevent the speaker from telling their story.

Stay in your role throughout the interaction, even through it may not be how you would normally act! This is only for learning purposes.

Bad Communication Exercise – Helper

As the distressed person talks to you and tells you their story, do the following:

» Change the subject frequently.

Stay in your role throughout the interaction, even through it may not be how you would normally act! This is only for learning purposes.

Bad Communication Exercise – Helper

As the distressed person talks to you and tells you their story, do the following:

» Talk to or text someone else on the phone when the speaker is talking.

Stay in your role throughout the interaction, even through it may not be how you would normally act! This is only for learning purposes.
Bad Communication Exercise – Helper
As the distressed person talks to you and tells you their story, do the following:

» Give advice you were not asked for
Stay in your role throughout the interaction, even though it may not be how you would normally act!

Bad Communication Exercise – Helper
As the distressed person talks to you and tells you their story, do the following:

» Pressure the person to tell his/her story (sensitive, upsetting details)
Stay in your role throughout the interaction, even though it may not be how you would normally act!

Bad Communication Exercise – Helper
As the distressed person talks to you and tells you their story, do the following:

» Judge the other person: “You should not have said/done…”
Stay in your role throughout the interaction, even though it may not be how you would normally act!

Bad Communication Exercise – Helper
As the distressed person talks to you and tells you their story, do the following:

» Use many “technical” terms
Stay in your role throughout the interaction, even though it may not be how you would normally act!

Bad Communication Exercise – Helper
As the distressed person talks to you and tells you their story, do the following:

» Talk about your own problems/tell the person about someone else’s problems
Stay in your role throughout the interaction, even though it may not be how you would normally act!

Bad Communication Exercise – Helper
As the distressed person talks to you and tells you their story, do the following:

» Give false promises/reassurances
Stay in your role throughout the interaction, even though it may not be how you would normally act!
Annex 6: Good Communication Handout

This information can also be found in section 3.1 of Psychological first aid: Guide for field workers. Where necessary, translate this handout into the local language of participants.

**Things to say and do ✓**

- Try to find a quiet place to talk, and minimize outside distractions.
- Respect privacy and keep the person’s story confidential, if this is appropriate.
- Stay near the person but keep an appropriate distance depending on their age, gender and culture.
- Let them know you are listening: for example, nod your head or say “hmmmm...”
- Be patient and calm.
- Provide factual information, **if** you have it. Be honest about what you know and don’t know. “I don’t know, but I will try to find out about that for you.”
- Give information in a way the person can understand – keep it simple.
- Acknowledge how they are feeling and any losses or important events they tell you about, such as loss of their home or death of a loved one. “I’m so sorry. I can imagine this is very sad for you.”
- Acknowledge the person’s strengths and how they have helped themselves.
- Allow for silence.

**Things not to say and do X**

- Don’t pressure someone to tell their story.
- Don’t interrupt or rush someone’s story (for example, don’t look at your watch or speak too rapidly).
- Don’t touch the person if you’re not sure it is appropriate to do so.
- Don’t judge what they have or haven’t done, or how they are feeling. Don’t say: “You shouldn’t feel that way,” or “You should feel lucky you survived.”
- Don’t make up things you don’t know.
- Don’t use terms that are too technical.
- Don’t tell them someone else’s story.
- Don’t talk about your own troubles.
- Don’t give false promises or false reassurances.
- Don’t think and act as if you must solve all the person’s problems for them.
- Don’t take away the person’s strength and sense of being able to care for themselves.
- Don’t talk about people in negative terms (for example, don’t call them “crazy” or “mad”).
Annex 7: Things Caregivers Can Do to Help Children Handout

This information can also be found in section 3.5 of Psychological first aid: Guide for field workers. Where necessary, translate this handout into the local language of participants.

**THINGS CAREGIVERS CAN DO TO HELP CHILDREN**

**Infants**
- Keep them warm and safe.
- Keep them away from loud noises and chaos.
- Give cuddles and hugs.
- Keep a regular feeding and sleeping schedule, if possible.
- Speak in a calm and soft voice.

**Young children**
- Give them extra time and attention.
- Remind them often that they are safe.
- Explain to them that they are not to blame for bad things that happened.
- Avoid separating young children from caregivers, brothers and sisters, and loved ones.
- Keep to regular routines and schedules as much as possible.
- Give simple answers about what happened without scary details.
- Allow them to stay close to you if they are fearful or clingy.
- Be patient with children who start demonstrating behaviours they did when they were younger, such as sucking their thumb or wetting the bed.
- Provide a chance to play and relax, if possible.

**Older children and adolescents**
- Give them your time and attention.
- Help them to keep regular routines.
- Provide facts about what happened and explain what is going on now.
- Allow them to be sad. Don’t expect them to be tough.
- Listen to their thoughts and fears without being judgmental.
- Set clear rules and expectations.
- Ask them about the dangers they face, support them and discuss how they can best avoid being harmed.
- Encourage and allow opportunities for them to be helpful.
Annex 8: Vulnerable People Exercise Instructions

Hand each participant a description of a vulnerable person on a small strip of paper:

Descriptions:

» An orphaned girl, aged 12, living with her sister (age 16).

» A deaf boy, aged 14, living with his mother.

» A mother who is regularly beaten by her husband and is not permitted to work.

» A man, aged 64, living with his adult son and family.

» A girl, aged 4, who has a severe mental disability. She lives with her three older brothers, mother and father.

» A boy, aged 3, who is very active and does not listen. He lives with his mother (aged 16) and father (aged 25).

» A woman, aged 24, who works for an NGO. She is not married and lives with her parents.

» A man, aged 28, who works for a local newspaper as a journalist. He lives with his mother and younger sisters.

» A woman, aged 30. She is illiterate. She cares for her three young children at home. Her husband is a fisherman.

» A man, aged 42. He is unemployed and is seeking work to support his wife and three children.

» A girl, aged 10. She is attending school. She lives with her mother and two sisters.
A boy, aged 11. He is attending school. He lives with his parents who both have university degrees and work as teachers.

A woman, aged 66. She lives with her adult son who is unmarried and unemployed.

A man, aged 79. He requires constant medical care and cannot walk. He lives with a community leader who sometimes forgets to feed him.

A man, aged 40, who works for the government.

A woman, aged 35, who works as a nurse. She has two children and a supportive husband.

A woman, aged 19, attending university to study human rights. She lives with her father who is unemployed but who closely follows politics.

A man, aged 20, attending university to study medicine. He lives on campus and works part-time for a food vendor.

A woman, aged 24, who lives with severe depression, a mental disorder. She is a mother of two young children. Her husband rarely returns home from working abroad.

A man, aged 22, who behaves very oddly and believes he is a famous movie star. He has just been diagnosed with psychosis. He is unemployed and lives on the street. He begs for money.

A girl, aged 16, who has been skipping school and has begun to get involved with a group of young men involved in political activism.
Have participants stand in a line. Read aloud each statement below. If the participant agrees with the statement (according to their vulnerable person description), they will step forward. If they don’t agree, they will remain standing in the line and will therefore be “left behind”.

**Statements:**

1. If there is a disaster, I could run from a falling building.
2. I am able to make decisions about my future.
3. I am able to get enough food to eat each day.
4. If there were a war, I, or my family, would have people to turn to for help.
5. I have people in my life who care about my well-being.
6. If I have people in my life to care for me, they ensure I get the basics I require.
7. I am safe from being beaten or exploited.
8. I, or my family, are able to pay for things that we need.
9. I am able to write enough to complete forms to receive food aid.
10. I, or my family, have enough work to pay the bills.
11. I, or my family, can provide for my medical needs.
12. I am likely to be safe from sexual violence.
13. I, or my family, have access to a mobile phone through which I could receive information.
14. If there were a disaster, I, or my family, would have savings to help recover basic needs.
15. I have good job prospects, now or in the future.
16. I, or my family, have access to a radio and news.
17. If I was under threat from a major storm, I would be able to hear about or read warnings.
18. If there were an accident at home, someone in my family would transport me to a hospital.
19. People treat me with dignity and basic respect.
Annex 9: Evaluation Form

Psychological First Aid (PFA) Orientation Evaluation Form

Do not write your name on this form

Please circle the number that best corresponds to how you feel about the orientation…

<table>
<thead>
<tr>
<th></th>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Neutral</th>
<th>Agree</th>
<th>Strongly agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. The information was clear and easy to understand</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>2. The information I received is useful to my work.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>3. The orientation increased my confidence to offer PFA in crisis situations.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>4. The orientation gave me practical skills and knowledge to apply in crisis situations.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>5. The teaching methods used by the facilitator were effective.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>6. The orientation was engaging and fun.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>7. The facilitator created a supportive atmosphere in the orientation.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>8. I would recommend this orientation to others.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

Please say in a few words what you found **most useful** in this orientation.

________________________________________________________________________

________________________________________________________________________

Please say in a few words what was **least useful** in this orientation.

________________________________________________________________________

________________________________________________________________________

What suggestions do you have to improve the orientation for future participants?

________________________________________________________________________

________________________________________________________________________

Thank you for your participation and comments!
Annex 10: Brief Relaxation Exercise for Helper Self Care (for full-day orientations)

The following exercise can be used to help the group relax after the crisis event simulation, and is also useful as a stress management tool. The exercise takes about five minutes. As facilitator, remember to keep a calming tone of voice as you give participants the instructions and speak slowly, allowing ample time for participants to experience the full effect of relaxation.

**Progressive Muscle Relaxation**

As we breathe, we will do some progressive muscle relaxation so that you can feel the difference between tension and relaxation in your muscles. We are often not aware when we hold tension in our bodies. These exercises will make us more aware and give us a way to release the tension.

Close your eyes and sit straight in your chair. Place your feet on the floor and feel the ground under your feet. Relax your hands in your lap. As you breathe in, I will ask you to tense and tighten certain muscles in your body. As you tense and hold the muscles, you will hold your breath for a count of three, then relax them completely when I tell you to breathe out.

Let’s begin with our toes…

Lead the group through progressive muscle relaxation SLOWLY. Ask participants to tense a part of the body and to inhale and hold their breath while you count aloud slowly 1 — 2 — 3. Then say “inhale and hold your breath.” Give a slight rise to your voice as you say “inhale and hold your breath” and bring your voice down as you say “exhale and relax.”

Have participants tense and relax muscles in this order:

- Curling the toes tightly and holding the tension so it hurts slightly
- Tensing the thigh and leg muscles
- Tensing the belly, holding it in
- Making fists of the hands
- Tensing the arms by bending at the elbows and bringing your arms tight alongside your upper body
- Shrugging the shoulders up to your ears
- Tensing all the facial muscles.

After exhaling and relaxing each part of the body, say:

“…Now feel your [toes, thighs, face/forehead, etc.] relaxed, breathe normally, feel the blood come into your [toes, thighs, etc.]

Now, drop your chin slowly toward your chest. As you inhale, slowly and carefully rotate your head in a circle to the right, exhale as you bring your head around to the left and back toward your chest. Inhale to the right and back… exhale to the left and down. Inhale to the right and back… exhale to the left and down. Now, reverse directions… inhale to the left and back, exhale to the right and down (repeat twice). Now bring your head up to the centre. Notice the calm in your mind and body. Make a commitment now to take care of yourself each and every day.”
## Annex 11: Full-Day Orientation Agenda

For the full-day orientation, additional activities are marked with an asterisk (*). Break times are longer, and incorporate enough time for lunch.

<table>
<thead>
<tr>
<th>Overview</th>
<th>Duration</th>
<th>Topic/Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-orientation</td>
<td></td>
<td>Participant arrival and registration</td>
</tr>
<tr>
<td><strong>Part I (90 minutes)</strong></td>
<td>20 minutes</td>
<td>Welcome and introduction</td>
</tr>
<tr>
<td></td>
<td></td>
<td>» Introductions and expectations</td>
</tr>
<tr>
<td></td>
<td></td>
<td>» Icebreaker exercise (game)*</td>
</tr>
<tr>
<td></td>
<td></td>
<td>» Aim and agenda</td>
</tr>
<tr>
<td></td>
<td></td>
<td>» Ground rules</td>
</tr>
<tr>
<td></td>
<td></td>
<td>» Optional pre-test*</td>
</tr>
<tr>
<td></td>
<td>10 minutes</td>
<td>What comes to mind when you hear “PFA”?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>» Starting with care for ourselves</td>
</tr>
<tr>
<td></td>
<td>20 minutes</td>
<td>Crisis event simulation and discussion</td>
</tr>
<tr>
<td></td>
<td>10 minutes</td>
<td>What PFA is and is not</td>
</tr>
<tr>
<td></td>
<td></td>
<td>» PFA in the framework of MHPSS</td>
</tr>
<tr>
<td></td>
<td></td>
<td>» Psychological responses to crisis events</td>
</tr>
<tr>
<td></td>
<td></td>
<td>» Key resilience (protective) factors</td>
</tr>
<tr>
<td></td>
<td>15 minutes</td>
<td>PFA: who, when and where?</td>
</tr>
<tr>
<td></td>
<td>15 minutes</td>
<td>PFA overview</td>
</tr>
<tr>
<td></td>
<td></td>
<td>» Frequent needs of survivors</td>
</tr>
<tr>
<td></td>
<td></td>
<td>» What helpers need</td>
</tr>
<tr>
<td></td>
<td></td>
<td>» Exercise: needs of survivors and helpers*</td>
</tr>
<tr>
<td></td>
<td></td>
<td>» Prepare…Look, Listen and Link overview</td>
</tr>
<tr>
<td>Break</td>
<td>15 minutes</td>
<td></td>
</tr>
<tr>
<td><strong>Part II (110 minutes)</strong></td>
<td>30 minutes</td>
<td>Case scenario group work</td>
</tr>
<tr>
<td>Applying PFA Action Principles</td>
<td>10 minutes</td>
<td>Look</td>
</tr>
<tr>
<td></td>
<td></td>
<td>» Look for safety</td>
</tr>
<tr>
<td></td>
<td></td>
<td>» People with obvious urgent basic needs</td>
</tr>
<tr>
<td></td>
<td></td>
<td>» People with serious distress reactions</td>
</tr>
<tr>
<td></td>
<td>45 minutes</td>
<td>Listen</td>
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<tr>
<td></td>
<td></td>
<td>» Role play: listening</td>
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<tr>
<td></td>
<td></td>
<td>» Role play: “help people feel calm”</td>
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<tr>
<td></td>
<td></td>
<td>» Good communication</td>
</tr>
<tr>
<td></td>
<td></td>
<td>» Good communication: exercise*</td>
</tr>
<tr>
<td></td>
<td>25 minutes</td>
<td>Link</td>
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<tr>
<td></td>
<td></td>
<td>» Link with basic needs</td>
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<td></td>
<td></td>
<td>» Support positive coping</td>
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<td></td>
<td></td>
<td>» Link with information</td>
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<tr>
<td></td>
<td></td>
<td>» Role play: giving information*</td>
</tr>
<tr>
<td></td>
<td></td>
<td>» Link with social support</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ending assistance</td>
</tr>
</tbody>
</table>
### Lunch Break

**Part III (120 minutes)**

<table>
<thead>
<tr>
<th>Activity</th>
<th>Duration</th>
</tr>
</thead>
<tbody>
<tr>
<td>PFA Role Plays and Wrap-Up, Self- and Team Care, Evaluation</td>
<td>60 minutes</td>
</tr>
<tr>
<td>PFA role plays</td>
<td>30 minutes</td>
</tr>
<tr>
<td>Adapting to the local cultural context*</td>
<td>10 minutes</td>
</tr>
<tr>
<td>People who likely need special attention</td>
<td>20 minutes</td>
</tr>
<tr>
<td>PFA review</td>
<td>25 minutes</td>
</tr>
<tr>
<td>Ethical do's and don'ts</td>
<td></td>
</tr>
<tr>
<td>Final simulation and discussion*</td>
<td></td>
</tr>
<tr>
<td>Self and team care</td>
<td>15 minutes</td>
</tr>
<tr>
<td>Optional post-test*</td>
<td>20 minutes</td>
</tr>
<tr>
<td>Evaluation and closing</td>
<td></td>
</tr>
</tbody>
</table>
This manual is designed to orient helpers to offer psychological first aid (PFA) to people following a serious crisis event. PFA involves humane, supportive and practical assistance for people who are distressed, in ways that respect their dignity, culture and abilities. This facilitator’s manual is to be used together with Psychological first aid: Guide for field workers (World Health Organization, War Trauma Foundation, World Vision International, 2011), endorsed by 24 international humanitarian agencies.