

The psychosocial aspects in a context of civil protection

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Presentation outline

- Introduction
- The psychosocial impacts of a disaster
- Psychosocial intervention
- Conclusion



World tendencies: natural and technological disasters

	1975	1990	2005
Number of disasters	110	435	794
Deaths	16 000	62 000	103 000
People affected	33 000 000	84 000 000	156 000 000
Material losses	\$3 000 000 000	\$41 000 000 000	\$159 000 000 000

Source: www.emdat.be, *International disaster database*,
Université catholique de Louvain, Belgique



Systemic approach



Characteristics having an impact on the psychosocial impacts of a disaster

- Individual
 - Age
 - Physical and mental status
 - Culture...
- Environment
 - Setting (urban vs. rural)
 - Political and social context...
- Disaster
 - Natural vs. Man-made
 - Duration, intensity...



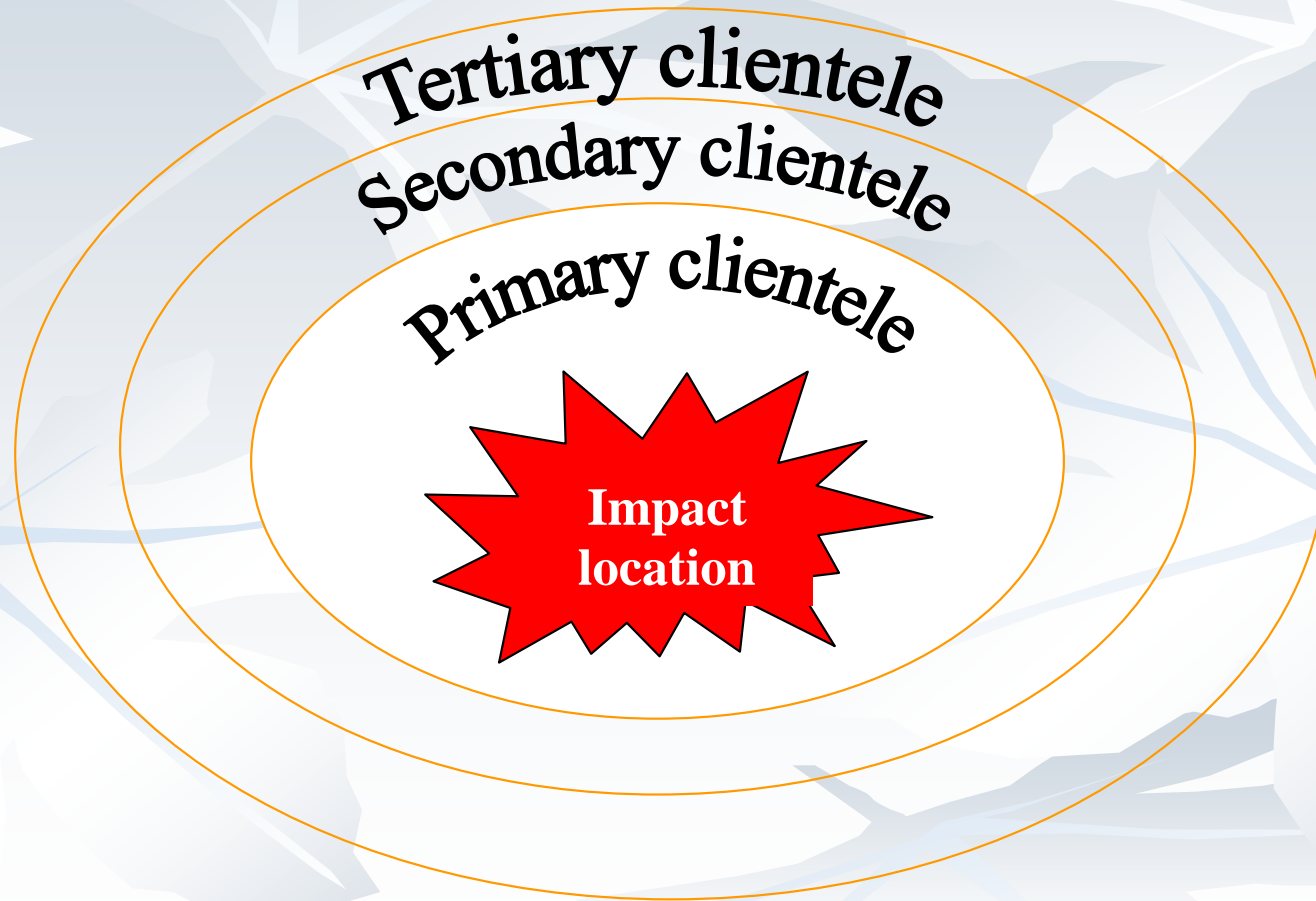
Vulnerable clientele

- Underprivileged clientele from a socio-economic perspective
- Vulnerable clientele from a physical, psychological or cognitive perspective
- Exposed clientele
 - Primary, secondary, tertiary
 - Emergency preparedness personnel

Don't forget!!



Clientele exposure diagram



Psychosocial impacts of a disaster

MANY LOSSES

- Loved ones
- Health
- Material goods
- Security
- Work
- Own environment
- Animals
- Dreams
- ...



Reactions of the disaster victims

Type of reaction	Examples
Physical	Headaches, respiratory and cardiac problems, fatigue, sleep disorders...
Cognitive	Anxiety, fear, memory disorders...
Behavioural	Withdrawal, agitation, family issues, substance abuse...
Emotional	Terror, mourning, anger, sadness...

These reactions can arise during the impact phase as well as the recovery phase



Compensation factors

- Factors fostering a return to balance among the victims
 - Realistic perception of the event by the disaster victim
 - Support from the person's natural network
 - Presence of adjustment mechanisms

The interveners must recognize these factors among their clientele.

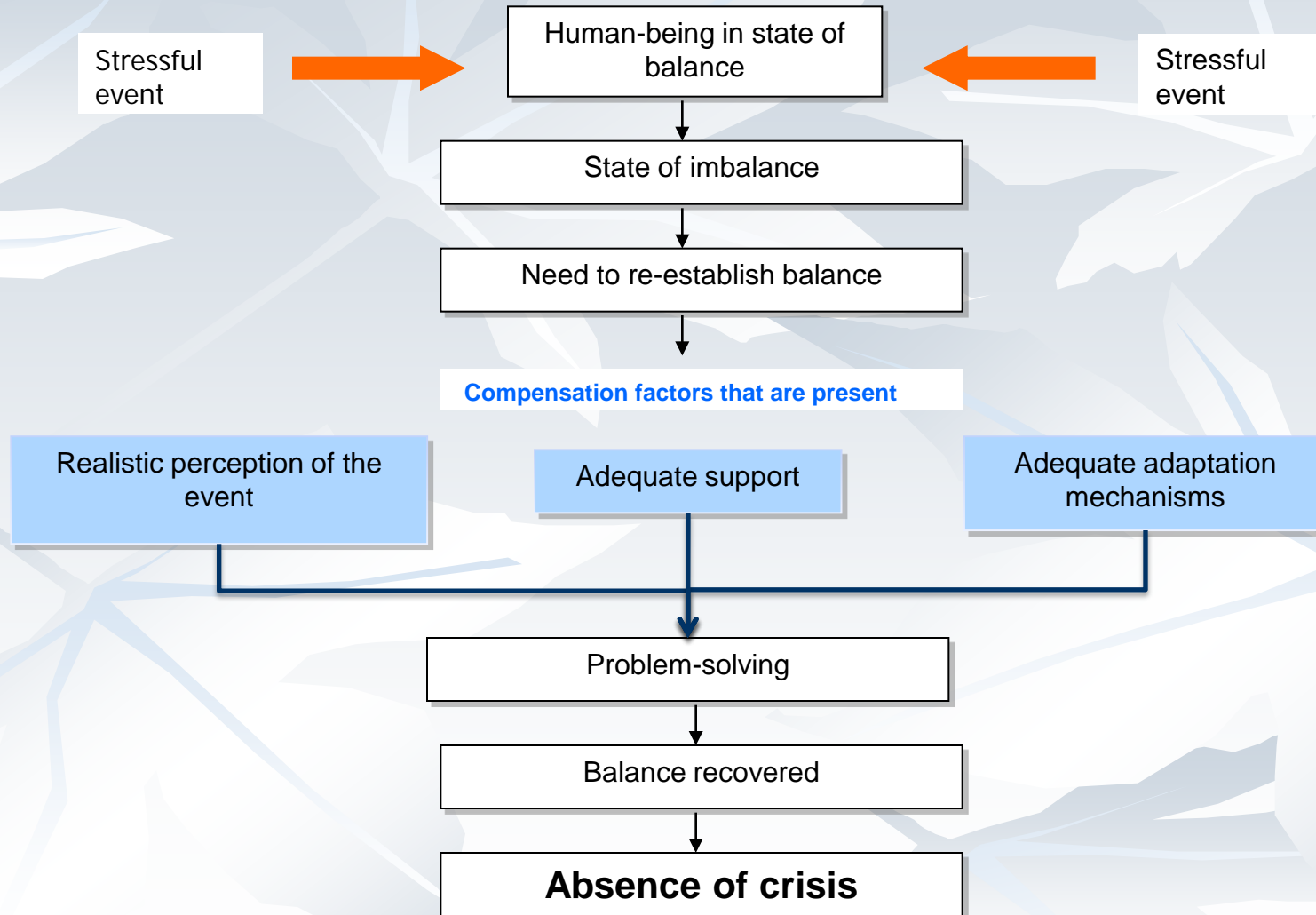


The positive reactions

- Capacity to mobilize and react adequately during the emergency;
- Realistic perception of the situation;
- Appropriate utilization of the available help resources;
- Ability to deal simultaneously with the strong emotional charge stemming from the experience and the tasks to be accomplished;
- Capacity to express emotional suffering;
- Recognition of one's pain without any obsessive or pathological manifestations;
- Development of appropriate strategies for dealing with uncertainty without resorting to impulsive reactions;
- Acknowledgement and acceptance of one's temporary dependence with respect to one's basic needs and the relevant steps to addressing them;
- Use of adapted mechanisms for dealing with anxiety.



Influence of the presence of compensation factors during a stressful event

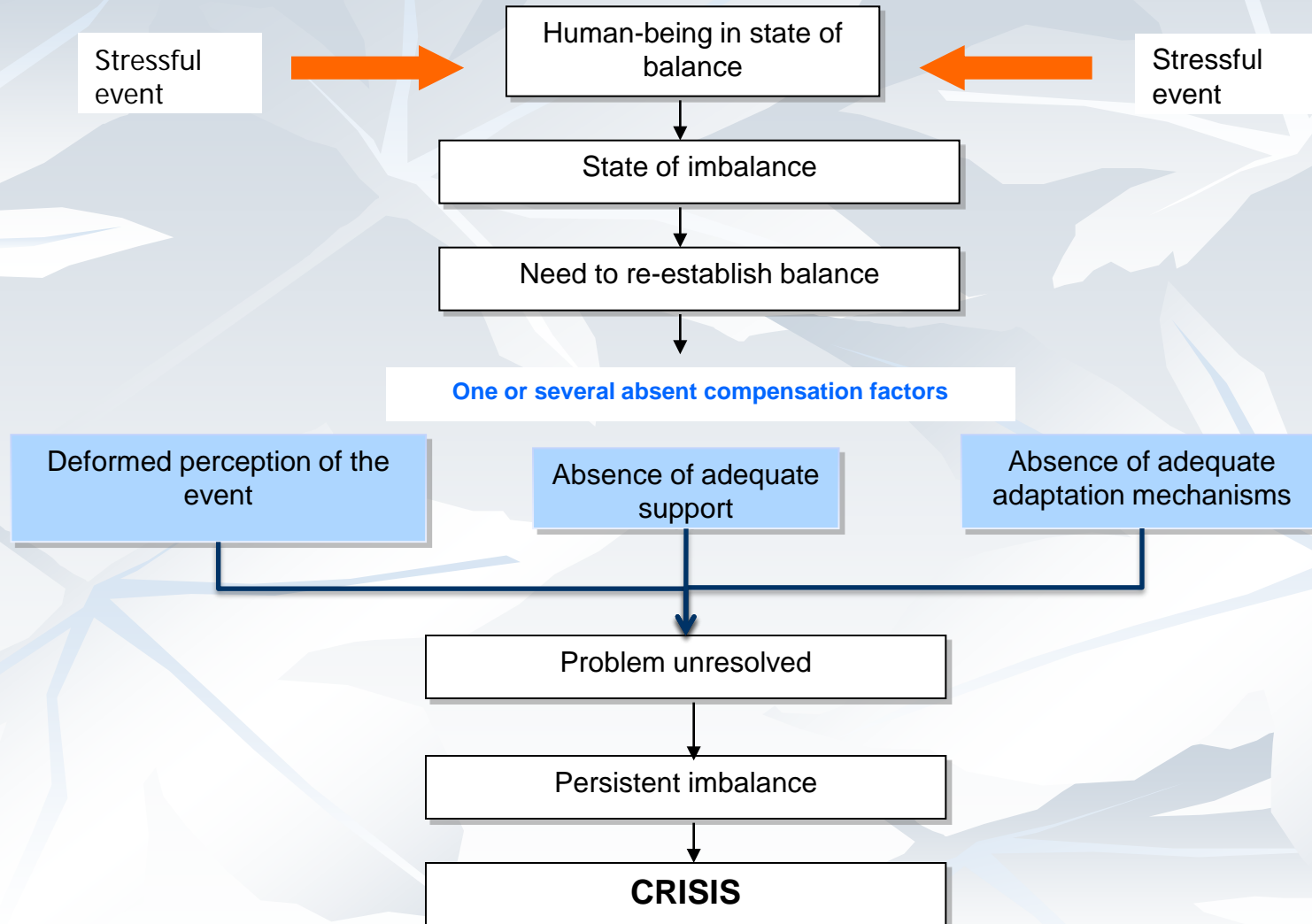


The negative reactions

- Denial, avoidance, social withdrawal;
- Nonsensical and poor perception of the event;
- Impulsive reactions;
- Ideas of vengeance and search for a scapegoat;
- Manifestation of dependence;
- Excessive or inappropriate expression or absence of emotion;
- Absence of empathy towards the other victims;
- Use of inappropriate spiritual behaviours;
- Inept in terms of the Activities of Daily Living (ADL);
- Abuse of psychoactive drugs;
- Inability to adequately use the assistance being offered, to take the relevant steps or to see to defending one's rights.



Influence of the lack of compensation factors during a stressful event



In brief

- Most of the reactions of the disaster victims are normal considering the context
- The majority (2/3) of the disaster victims, following an adjustment period, will recover their dynamic balance
- However, 1/3 will require assistance for a long period of time in order to recover their balance



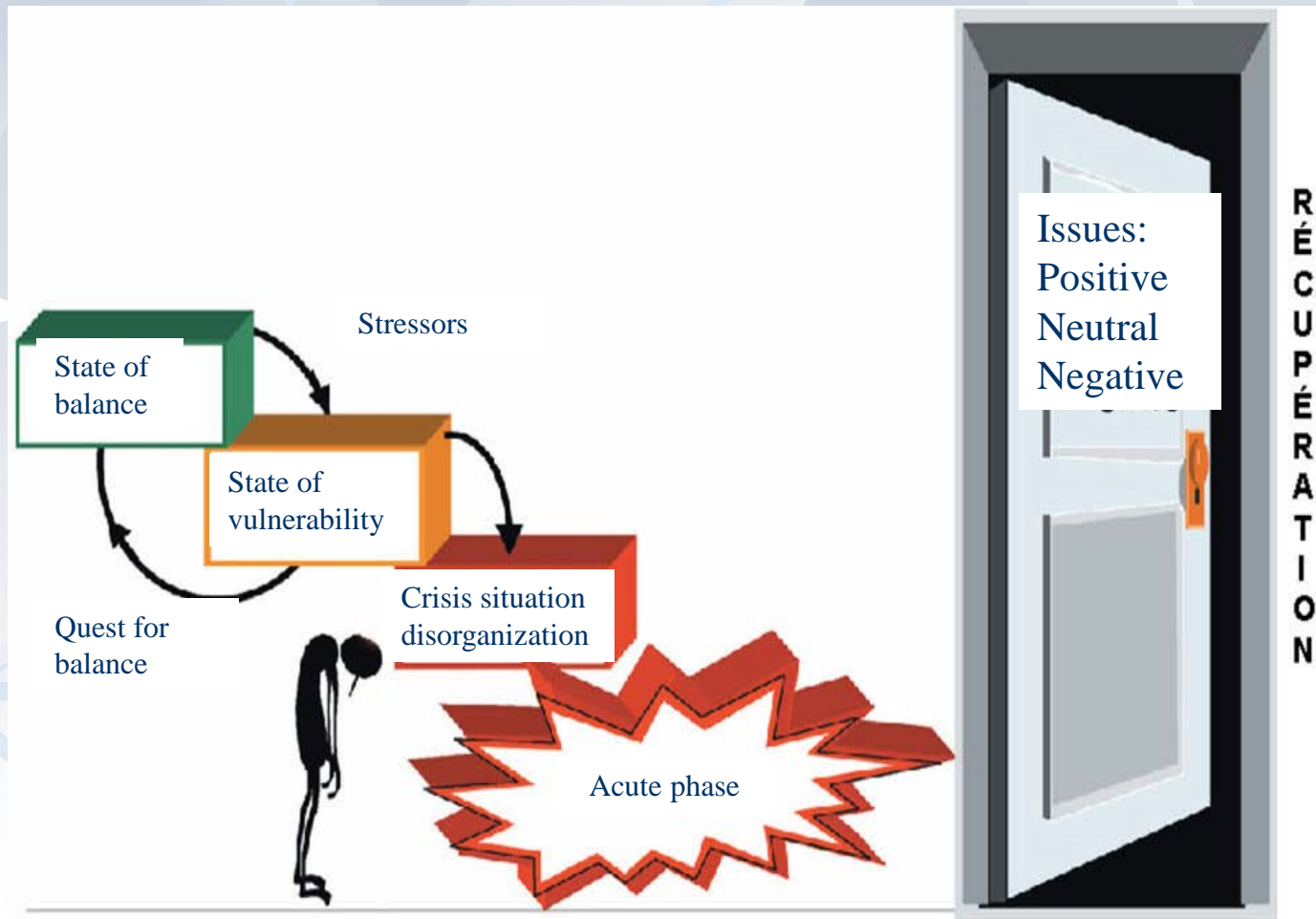
Adjustment disorders

- Can surface when a disaster victim is unable to recover his/her state of balance within 4 to 8 weeks following the event
- 5 recognized disorders
 - Adjustment Disorder
 - Acute Stress Disorder
 - Post-Traumatic Stress Disorder
 - Post-Traumatic Depression
 - Complicated Mourning

The psychosocial interveners must be able to identify the symptoms related to these disorders and refer the clientele as needed



Crisis diagram



AQPS (2003), *Intervenir en situation de crise suicidaire*, Guide du formateur et cahier du participant



A crisis can also be:

- A **series** of events that occur following multiple successive trauma (accidents, suicide attempts and suicides, reporting of sexual abuse, natural or technological catastrophe, etc.) that have affected **the whole** community.
- The following are various characteristics of a social crisis:
 - Disorganization of several members or families of the community (violence, placement of children, individual crises, depressions, etc.);
 - Significant increase in the consumption of alcohol and drugs;
 - Increase in the assistance and crisis intervention requests;
 - Lots of reactions of hyper-vigilance and fear regarding the possibility that a loved one could commit suicide.



Objective of the psychosocial intervention

Avoiding or attenuating
the crisis



THE PSYCHOSOCIAL INTERVENTION



Themes to be covered

- Why intervene?
 - Objectives of the intervention
- When and how to intervene?
 - Intervention principles
 - Intervention phases
 - Types of intervention
- Intervene among whom?
 - Vulnerable clientele
 - Interveners



Objectives of the intervention

- General objective
 - Helping the individuals and communities to return to functioning normally → defusing the crisis
- How?
 - By offering the psychosocial services required to:
 - Reduce the negative impacts of the disaster and resolve the problems
 - Restoring the senses of security, trust, competence, self-esteem and self-affirmation, autonomy, solidarity and mutual aid.
 - By fostering the psychological integration process of the event



The 3 intervention phases

1. Preparation
2. Intervention
3. Recovery

The psychosocial component of civil protection must be active in each of the phases



1. Prior to the intervention: the preparation

- Avoiding Titanic syndrome...



...have a plan!

- Psychosocial intervention in a context of civil protection is **different**



Specific preparation elements

- **Raising awareness** among the partners regarding the psychosocial aspects related to a disaster
- Streamlining with the **communication** function of the health mission
- Developing a tool that allows for identifying the **vulnerable clientele**



Essential functions

- Coordination
- Clinical supervision
- Identification
- Counsel



2. The intervention: principles

- Being proactive!
- Addressing the **specific** needs related to the disaster
- Respecting the hierarchal structure
- Respecting confidentiality
- Adopting a versatile approach: preventive, community-based and comprehensive



Versatile intervention approach

The versatile intervention approach

Comprehensive approach

- Takes into consideration all the dimensions of the human individual and his/her cultural context.
- Returns to the person and his/her setting responsibility over his/her health and needs.
- Fosters capacity-building and the solidarity of the people in terms of self-care.

Community-based approach

- Takes into consideration the potential of individuals, primary networks, groups, community resources as well as the community.
- Focuses on education and prevention.
- Fosters and supports the improvement and maintenance of the social fabric.

Preventive approach

- Preserves the autonomy of the people and the setting.
- Acts on the immediate causes to avoid repercussions.
- Fosters and supports the maintenance and recovery of a dynamic balance for the people, through self-management.



Psychosocial intervention phases in a context of civil protection

Immediate psychosocial intervention

During and immediately following the disaster

If needs unsatisfied

Transitional psychosocial intervention

When the disaster victims resume their day-to-day activities

If needs unsatisfied

Recovery

When the needs are still felt in the community

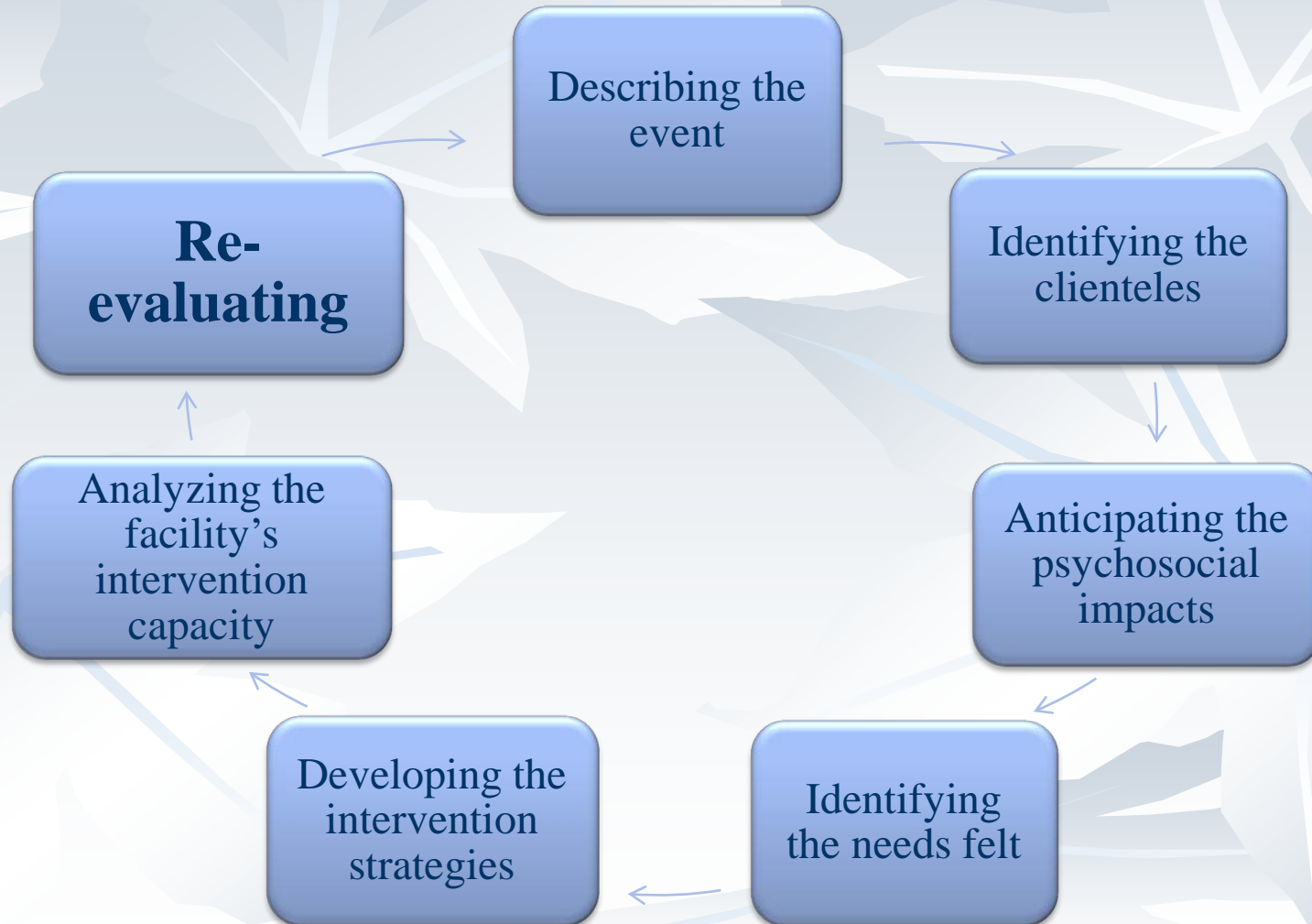


The immediate psychosocial intervention

- A particular context
 - Uncertainty regarding the situation
 - Importance of respect and empathy for the disaster victims
- Components
 - Establishing contact with the disaster victims
 - Restoration of the senses of security and comfort
 - Stabilization of the disorganized people



The evaluation and planning of the psychosocial services



The transitional psychosocial intervention

- Paying attention to certain particular events
 - Announcement of bad news (deaths...)
 - Events surrounding the death: body identification, investigation, funeral
 - Relocation and reintegration
 - Absence of services...
- Components: information, telephone response, debriefing, psychosocial follow-up



The psychosocial information session

- Structured group information meeting aiming to:
 - Provide information on the normal reactions and the stress management methods;
 - Present the typical problems associated with a return to normal life such as the manifestations of adjustment problems;
 - Present the services provided (health and social services, community setting)
- Targeted population
 - The disaster victims and their loved ones;
 - The partners;
 - The operational personnel;
 - The population in general.



Debriefing

- The psychological debriefing is an intervention technique that has become very popular in Quebec when a disaster or tragedy occurs. Its objective is to prevent or attenuate the post-traumatic reactions starting from **single sessions in small groups.**
- Words of caution regarding the psychological debriefing
 - Analysis of the needs
 - Clientele



Debriefing and follow-up

- In this sense, the psychological debriefing must be considered as being a **specialized intervention**, only practiced by experienced post-trauma clinicians.
- The debriefing must be accompanied by a **systematic follow-up** of the clientele that allows for offering other post-traumatic support and treatment services through individual or group follow-up.
Recommendations are made in order to better outline this approach.



3. Recovery

- Period characterized by:
 - The realization of all of the losses by the disaster victims
 - The demobilization of the emergency interveners
 - Media indifference

It is **essential** to remain active during this phase in order to prevent adaptation problems



Recovery (2)

- Manifestation of specific psychosocial phenomena
 - Social impacts
 - Interpersonal impacts
 - Psychological impacts
- Particular approaches
 - Community-based, family-based and individual
 - For the medium- and long-term



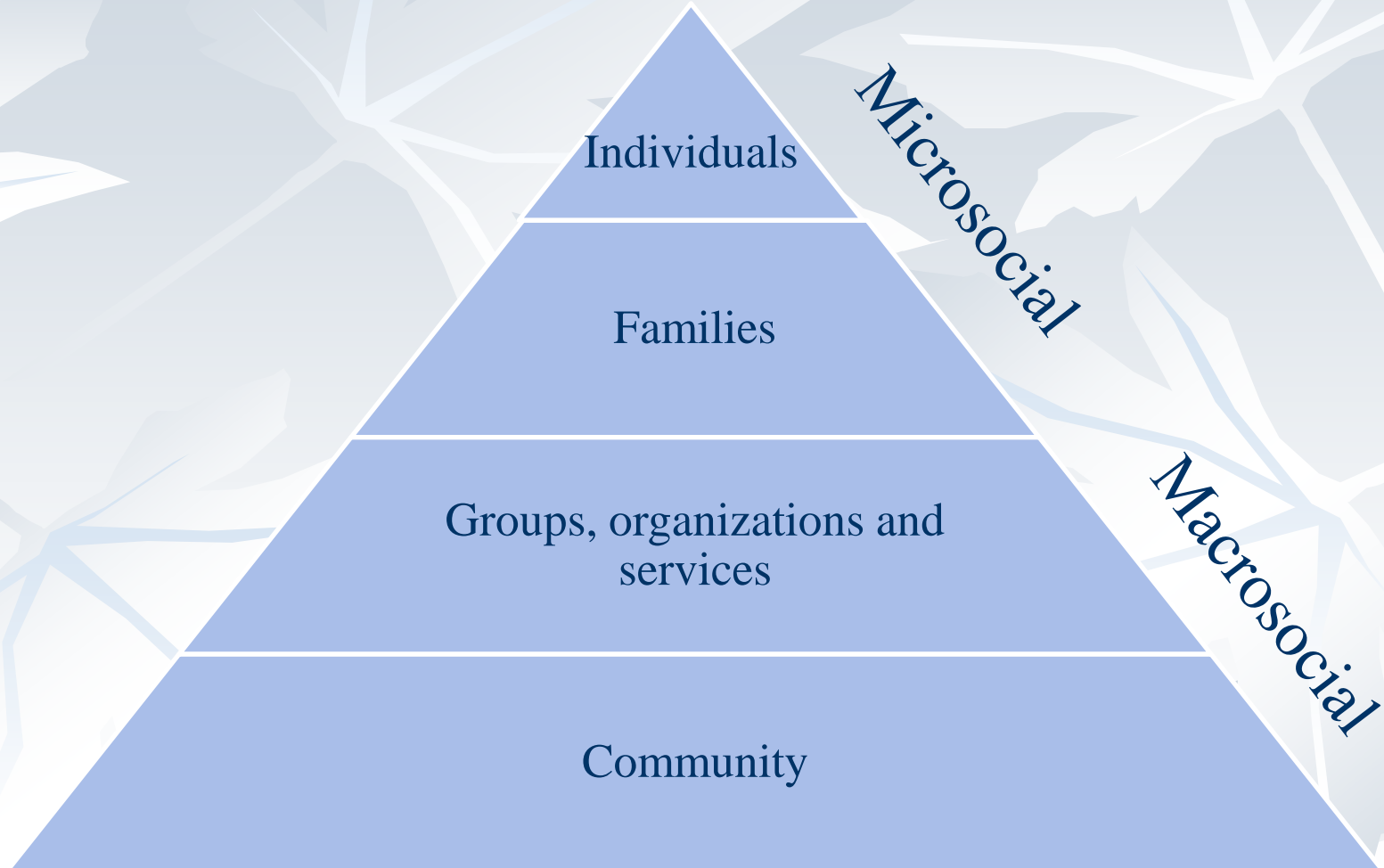
The community-based interventions

- Identification of the needs (psychosocial needs committee)
- Identification of the at-risk clienteles (outreach)
- Restoration of the community services and recreational activities
- Popular education and communication plan
- Fundraising
- Reconstruction
- Commemoration

Goal: create an environment that is conducive to the adaptation process

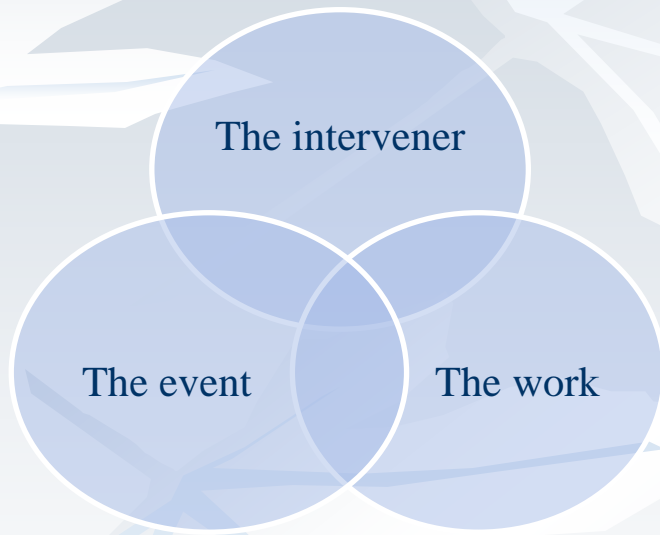


The evaluation process pyramid



Stress among interveners

Stress factors



Background

Past history

Stress consequences

Reactions

- Physical
- Psychological
- Behavioural



Creating a facilitating framework

Each facility/organization should implement the following means:

- Demobilization
- Support for interveners
 - EAP available
 - Psychosocial information session
- Supervision
 - Supervision
 - Coordination



Creating a facilitating framework

- Adequate organization of the work
 - Fostering team work
 - Adequate schedules
 - Area reserved for the interveners
 - Clear suspension policy to avoid burnout



Conclusion

- As managers, the psychosocial component must be a priority for the planning of the response in a context of emergency measures
 - In fact, the effects of a disaster require an immediate intervention but especially an action that is sustained over time
- It is therefore essential to have interveners who are informed and trained on the subject



References

- FNQLHSSC (2010) *Psychosocial Intervention in a Context of Civil Protection*, Training Guide
- Laurendeau M-C et al. (2007) *The psychosocial dimension of health and social service interventions in emergency situations*, Open Medicine, Vol. 1, No 2

