For Mental Health and Human Services Workers in Major Disasters

DISASTER COUNSELING SKILLS

Disaster counseling involves both listening and guiding. Survivors typically talk from both their past and their disaster experiences and being assisted by problem-solving and referral to resources. The following section provides tips and-bolts suggestions for workers.

ESTABLISHING RAPPORT

Survivors respond when workers offer caring eye contact, a calm presence, and when the worker is able to listen with their hearts. Rapport refers to the feelings of interest and understanding that develop when genuine concern is shown. Conveying respect and being nonjudgmental are necessary ingredients for building rapport.

ACTIVE LISTENING

Workers listen most effectively when they take in information through their ears, and "extrasensory radar" to better understand the survivor's situation and needs. Some tips for listening are:

Allow silence - Silence gives the survivor time to reflect and be aware of feelings. Silence can prompt the survivor to elaborate. Simply "being with" the survivor and their experience is supportive.

Attend nonverbally - Eye contact, head nodding, caring facial expressions, and occasional "uh-huhs" let the survivor know that the worker is in tune with them.

Paraphrase - When the worker repeats portions of what the survivor has said, understanding, interest, and empathy are conveyed. Paraphrasing also checks for accuracy, clarifies misunderstandings, and lets the survivor know that he or she is being heard. Good paraphrased responses are: "So you are saying that . . . " or "I have heard you say that . . . "

Reflect feelings - The worker may notice that the survivor's tone of voice or nonverbal gestures suggests anger, sadness, or fear. Possible responses are, "You sound angry, scared etc., does that fit for you?"

Allow expression of emotions - Expressing intense emotions through tears or angry venting is an important part of healing; it
often helps the survivor work through feelings so that he or she can better engage in constructive problem-solving. Workers should stay relaxed, breathe, and let the survivor know that it is OK to feel.

SOME DO’S AND DON’T’S

Do say:

- These are normal reactions to a disaster.
- It is understandable that you feel this way.
- You are not going crazy.
- It wasn't your fault, you did the best you could.
- Things may never be the same, but they will get better, and you better.

Don’t say:

- It could have been worse.
- You can always get another pet/car/house.
- It's best if you just stay busy.
- I know just how you feel.
- You need to get on with your life.

The human desire to try to fix the survivor's painful situation or make it feel better often underlies the preceding "Don't say" list. However, as workers receiving comments such as these, the survivor may feel discounted, not understood, or more alone. It is best when workers allow survivors the space to have their own experiences, feelings, and perspectives.

PROBLEM-SOLVING

Disaster stress often causes disorganized thinking and difficulty with planning. Some survivors react by feeling overwhelmed and become either immobilized or unproductively overactive. Workers can guide survivors through the following problem-solving steps to assist with prioritizing and focusing action.

- Identify and define the problem

Describe the problems/challenges you are facing right now.

Selecting one problem is helpful, identify it as the most immediate, and address it first. The problem should be relatively solvable, as an immediate success is important in bringing back a sense of control and confidence.

- Assess the survivor's functioning and coping

How have you coped with stressful life events in the past?

How are you doing now?

Through observation, asking questions, and reviewing the magnitude of the disaster, workers can assess the survivor's functioning and coping. This assessment helps workers understand how the survivor is currently coping and what challenges they may face.
survivor's problems and losses, the worker develops an impression of the survivor's capacity to address current challenges. Based on this assessment, the worker may make referrals, point out coping strengths, and facilitate the survivor's engagement with social supports. The worker may also seek consultation from medical, psychological, psychiatric, or disaster relief resources.

- **Evaluate available resources**

*Who might be able to help you with this problem?*

*What resources/options might help?*

Explore existing sources of assistance and support such as immediate family, extended family, friends, church community, health care providers, etc. the survivor might obtain their help. Refer the survivor to the appropriate agencies and assess if the survivor is able to make the calls and complete required applications. Assist with accessing resources when necessary.

- **Develop and implement a plan**

*What steps will you take to address this problem?*

Encourage the survivor to say aloud what he or she plans to do and how. Offer to check-in with the survivor in a few days to see how it is going. If the worker has agreed to perform a task for the survivor, it is very important to follow through. Workers should promise only what they can do, not what they would like to do.

**A WORD OF CAUTION**

When confronted with a disaster survivor's seemingly overwhelming needs, workers can feel the understandable impulse to help in every way possible. Workers may become over-involved and do too much for the survivor. This is usually not in the best interest of the survivor. When survivors are empowered to solve their own problems, they feel more capable, competent, and able to tackle the next challenge. Workers should clearly understand the scope of their role in the disaster relief effort and recognize that empowering survivors is different from doing for them.

**CONFIDENTIALITY**

A helping person is in a privileged position. Helping a survivor in need sharing of problems, concerns, and anxieties-sometimes with intimate details. This special sharing cannot be done without a sense of trust, built upon respect, and the explicit understanding that all discussions are confidential and private. No case should be discussed elsewhere without the consent of the person being helped (except in an extreme emergency when it is judged that the person will harm himself or others). It is only by maintaining the trust and respect of the survivor that the privilege of helping can continue to be exercised.