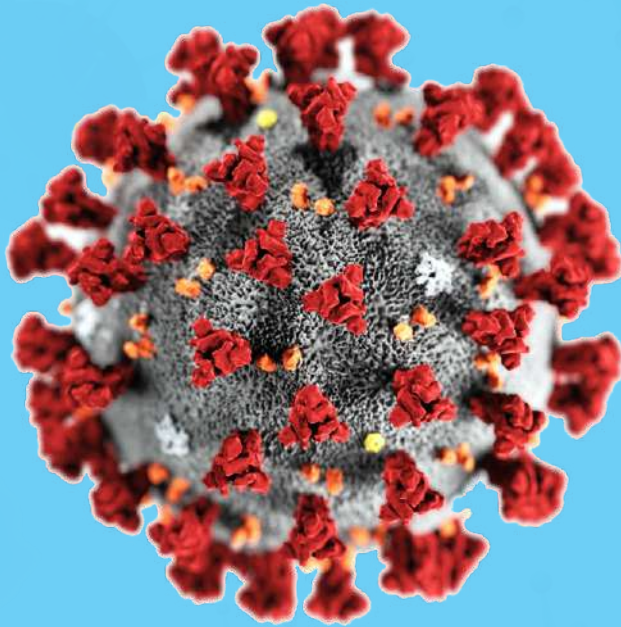




MINISTRY OF HEALTH

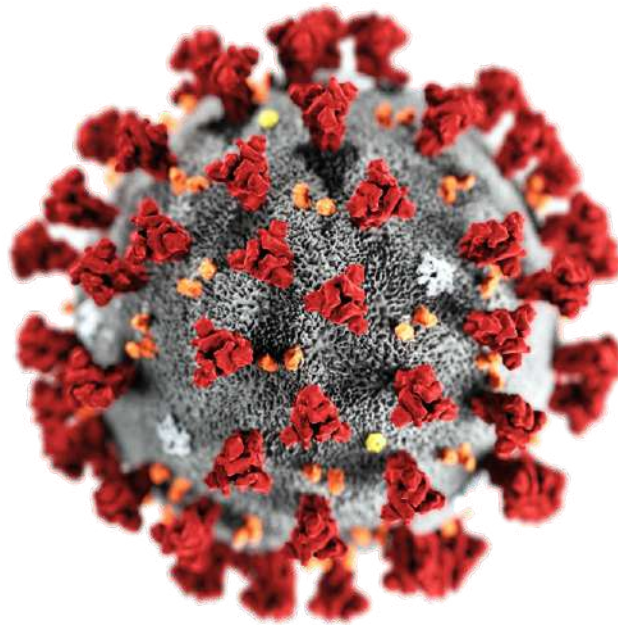


PSYCHOLOGICAL FIRST AID (PFA)

GUIDE FOR COVID-19 RESPONSE IN KENYA

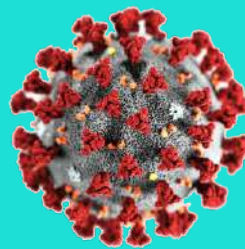


MINISTRY OF HEALTH



PSYCHOLOGICAL FIRST AID (PFA)

GUIDE FOR COVID-19 RESPONSE IN KENYA



FOREWORD

Like any other pandemic, The Covid-19 outbreak will likely have a significant impact on the wellbeing of those affected, their family, community members and the health workers treating people with COVID-19.

This guide focuses on psychological first aid, which involves humane, supportive and practical help to fellow human beings suffering crisis events. It is written for people who can help others experiencing an extremely distressing event.

This guide is an adaptation of the Psychological first aid: Guide for field workers (World Health Organization, War Trauma Foundation, World Vision International, 2011). It has been adapted to better respond to the challenges of Covid-19. Covid-19 poses specific problems for affected people (e.g., stigmatization, isolation, fear, and possible abandonment), their caregivers and responders (e.g., safety, access to updated information).

Psychological first aid has been recommended by many expert groups, including the Inter-Agency Standing Committee (IASC) and the Sphere Project. In 2009, the World Health Organization's (WHO) mental health Gap Action Programme (mhGAP) Guideline Development Group evaluated the evidence for psychological first aid. It concluded that psychological first aid, rather than psychological debriefing, should be offered to people in severe distress following recent exposure to a traumatic event.

Dr. Patrick Amoth.

Ag. Director General for Health.

MINISTRY OF HEALTH

1st April, 2020

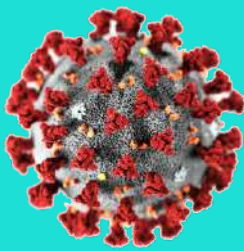
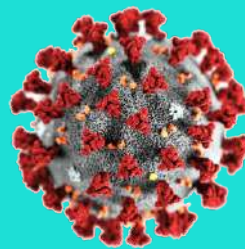


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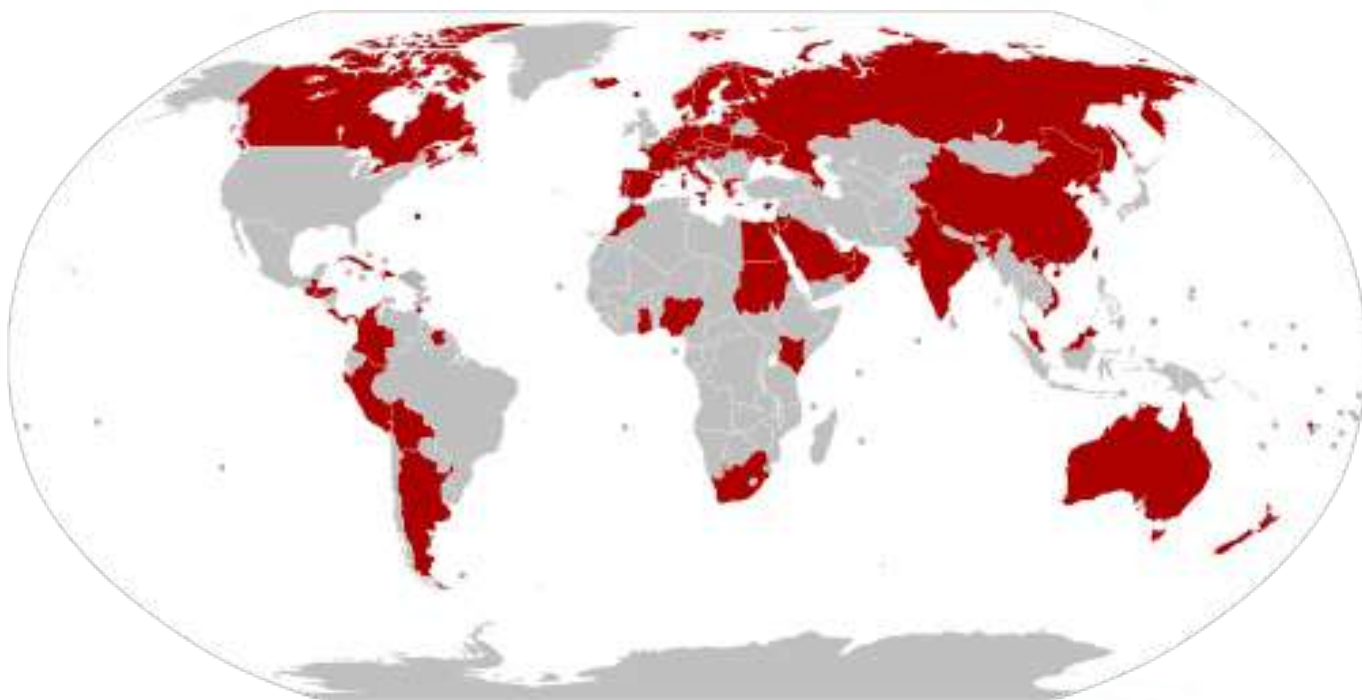
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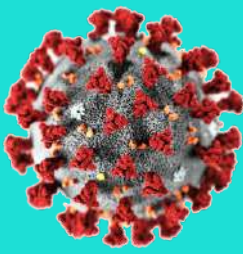
Chapter ONE: Understanding PFA

1.1 How do crisis events like the Covid-19 pandemic affect people?

Pandemics have been shown to cause significant distress. The current Covid-19 pandemic caused by the novel corona virus has rapidly spread infecting over 300,000 persons and causing close to 20,000 deaths worldwide. Anxiety-related behaviors, sleep disturbances, and overall lower perceived state of health have been reported as resulting from the actual or perceived threat of this infection.



There are a wide range of reactions and feelings each person can have during or following the Covid-19 pandemic. Many people may feel overwhelmed, confused or very uncertain about what is happening. They can feel very fearful or anxious, or numb and detached. Some people may have mild reactions, whereas others may have more severe reactions.



How someone reacts depends on many factors, including:

- 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)

Every person has strengths and abilities to help them cope with life's challenges. However, some people are particularly vulnerable in a crisis and may need extra help. This includes people who may be at risk or need additional support because of their age (children, elderly), because they have a mental or physical disability, or because they belong to groups who may be marginalized or targeted for violence.

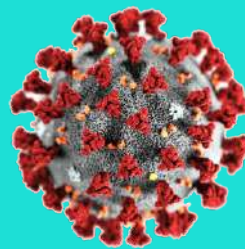
1.2 What is PFA?

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

- Providing practical care and support, which does not intrude
- Assessing needs and concerns
- Helping people to address basic needs (for example, food and water, information) listening to people, but not pressuring them to talk
- Comforting people and helping them to feel calm
- Helping people connect to information, services and social supports
- Protecting people from further harm.

PFA is not:

- Something that only professionals can do.
- Professional counseling.
- “psychological debriefing”¹ in that PFA does not necessarily involve a detailed



discussion of the event that caused the distress.

- Asking someone to analyze what happened to them or to put time and events in order.
- About pressuring people to tell you their feelings and reactions to an event.

PFA is an alternative to “psychological debriefing” which has been found to be ineffective. In contrast, PFA involves factors that seem to be most helpful to people's long-term recovery (according to various studies and the consensus of many crisis helpers²). These include:



- Feeling safe, connected to others, Calm and hopeful;
- Having access to social, physical and emotional support; and
- Feeling able to help themselves, as individuals and communities.

1.3 PFA: Who, when, where?

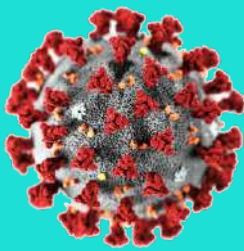
Who is PFA for?

PFA is for distressed people who have been recently exposed to the ongoing Covid-19 pandemic. You can provide help to both children and adults. However, not everyone will need or want PFA. Do not force help on people who do not want it but make yourself easily available to those who may want support.

There may be situations when someone needs much more advanced support than PFA alone. Know your limits and get help from others, such as medical personnel (if available), your colleagues or other people in the area, local authorities, or community and religious leaders. Below are people who need more immediate advanced support. People in these situations need medical or other help as a priority to save life.

People who need more immediate advanced support:

- people with serious, life-threatening symptoms who need emergency medical care e.g. difficulty breathing
- people who are so upset that they cannot care for themselves or their children



GUIDE FOR COVID-19 RESPONSE IN KENYA

- people who may hurt themselves people who may hurt others
- people who may hurt others



When is PFA provided?

Although people may need access to help and support for a long time after an event, PFA is aimed at helping people who have been very recently affected by a crisis event. You can provide PFA when you first have contact with very distressed people. This is usually during or immediately after an event. However, it may sometimes be days or weeks after, depending on how long the event lasted and how severe it was. In the case of the current pandemic, this may be after a confirmed diagnosis of infection, suspected infection or infection of a loved one. Death of a friend or relative from the infection could also cause distress.

During the Covid-19 outbreak, for example, PFA can be offered:

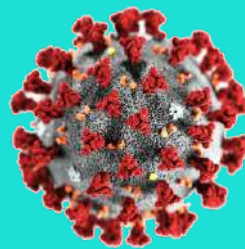
- during contact tracing of people who have had contact with a person with Covid-19
- when supporting a health care provider experiencing distress after a long shift at a clinic
- when supporting a family or community that has lost someone to Covid-19 and is suffering because their loved one cannot be buried according to tradition
- when supporting a child whose parents are in hospital, and who may be feeling confused and sad
- when helping members of the community share their frustrations about travel restrictions and the lockdowns

Where is PFA provided?

You can offer PFA wherever it is safe enough to do so. This is often in:

- community settings
- places where distressed people are assisted, such as hospitals or quarantine areas.

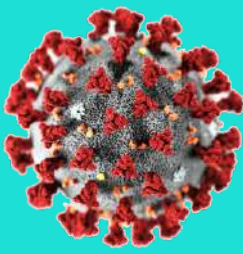
In the case of the Covid-19 pandemic, safety from exposure to the disease is the most important consideration in where to offer PFA – for yourself, the person and others. This means taking all relevant precautions to prevent infection and ensuring that the appropriate



medical care is offered immediately to people who have symptoms. When providing PFA, it is essential to respect a person's confidentiality and dignity. Ideally, try to provide PFA where you can have some privacy to talk with the person, when appropriate and possible, while still adhering to safety precautions. This is important not only for confidentiality, but also to avoid the spread of panic or rumors in the community. However, during the Covid-19 pandemic, there are limits to confidentiality because of the importance of stopping the spread of the disease. Explain to the person that personal matters shared with you will be kept confidential, but you are required to report to health surveillance teams if the person may have been exposed to Covid-19 and/or has symptoms of the disease. Explain in ways they can understand the importance of informing the authorities of suspected cases of Covid-19 – to promote the health and safety of the person, their family and their community.

You can tell them that:

- early detection and quarantine prevent the spread of infection within the community
- seeking medical advice if they have symptoms can help protect their family and the community from infection



Chapter TWO: How to Help Responsibly

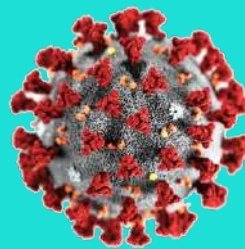
Helping responsibly involves four main points:

- 2.1 Respect safety, dignity and rights.
- 2.2 Adapt what you do to take account of the person's culture.
- 2.3 Be aware of other emergency response measures.
- 2.4 Look after yourself.

2.1 Respect safety, dignity and rights

When you take on the responsibility to help in situations where people have been affected by the pandemic, it is important to act in ways that respect the safety, dignity and rights of the people you are helping³. The following principles apply to any person or agency involved in any humanitarian response, including those who provide PFA:





Respect people's...

Safety Avoid putting people at further risk of harm as a result of your actions e.g. avoid putting them at risk of infections by taking all necessary precautions

Make sure, to the best of your ability, that the adults and children you help are safe and protect them from physical or psychological harm.

Dignity Treat people with respect and according to their cultural and social norms.

Rights Make sure people can access help fairly and without discrimination.

Help people to claim their rights and access available support.

Act only in the best interest of any person you encounter.

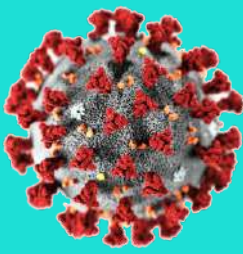
These principles are applicable to all persons regardless of their age, gender or ethnic background. Consider what these principles mean in terms of your cultural context.

Below are **Ethical Do's and Don'ts** as guidance **to avoid causing further harm to the person, to provide the best care possible, and to act only in their best interest.** 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

- Don't exploit your relationship as a helper.
- Don't ask the person for any money or favor 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.



2.2 Adapt what you do to take account of the person's culture

Whenever there is a crisis event, there are often people of various cultural backgrounds among the affected population, including minorities or others who may be marginalized. Culture determines how we relate to people, and what is all right and not all right to say and do. For example, in some cultures it is not customary for a person to share feelings with someone outside their family. Or it may only be appropriate for women to speak with other women, or perhaps certain ways of dressing or covering oneself are very important.

You may find yourself working with people of backgrounds different from your own. As a helper, it is important to be aware of your own cultural background and beliefs so you can set aside your own biases. Offer help in ways that are most appropriate and comfortable to the people you are supporting.

Each crisis is unique. Adapt this guide to the context, considering local social and cultural norms. See the following questions you can consider in providing PFA in different cultures.

Consider the following questions as you prepare to offer PFA in different cultures:

Dress:

- Do I need to dress a certain way to be respectful?
- Will impacted people need certain clothing items to keep their dignity and customs?

Language

- What is the customary way of greeting people in this culture?
- What language do they speak?

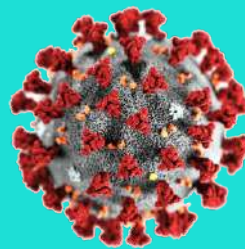
Gender

- Should affected women only be approached by women helpers?

Age and Power:

- Who may I approach? (In other words, the head of the family or community)

Beliefs and religion:



- What beliefs or practices are important to the people affected?
- How might they understand or explain what has happened?
- Who are the different ethnic and religious groups among the affected people?

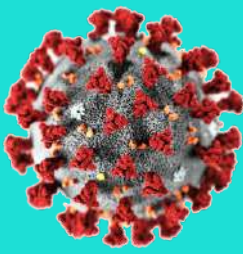
Touching and Behavior:

- Is it all right to hold someone's hand or touch their shoulder?
- Are there special things to consider in terms of behavior around the elderly, children, women or others?

2.3 Be aware of other emergency response measures

PFA is part of a broader response to large humanitarian emergencies such as the Covid-19 pandemic. When hundreds or thousands of people are affected, different types of emergency response measures take place. Following the Covid-19 epidemic response measures have centered on aggressive prevention measures such as lockdowns, quarantines and banning of travelling, tax cuts, food delivery etc. It is important that PFA providers are aware of the measures in place to ensure their own safety and that of others. Additionally, being aware of available supports will allow the PFA provider share this information with the people they are helping.





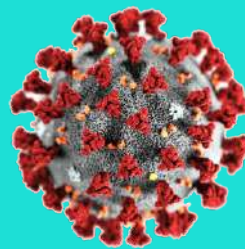
In responding to the Covid-19 crisis as a PFA provider:

- follow the direction of relevant authorities managing the crisis;
- learn what emergency responses are being organized and what resources are available to help people, if any;
- don't get in the way of search-and-rescue or emergency medical personnel; and
- know your role and the limits of your role.

It is not necessary to have a “psychosocial” background in order to offer PFA. However, if you want to help in crisis settings, we recommend that you work through an organization or community group. If you act on your own, you may put yourself at risk, it may have a negative effect on coordination efforts, and you are unlikely to be able to link affected people with the resources and support they need.

2.4: Look after yourself

Helping responsibly also means taking care of your own health and wellbeing. As a helper, you may be affected by what you experience in a crisis, or you or your family may be directly affected by the event. It is important to pay extra attention to your own wellbeing and be sure that you are physically and emotionally able to help others. Take care of yourself so that you can best care for others. If working in a team, be aware of the wellbeing of your fellow helpers as well.



Chapter THREE: Providing PFA

In this chapter, we will discuss:

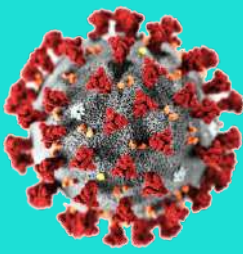
- 3.1 Good communication with people in distress.
- 3.2 Preparing to help.
- 3.3 The PFA action principles of look, listen and link.
- 3.4 Ending your help.
- 3.5 People who are likely to need Special attention in a crisis.



3.1 Good communication

The way you communicate with someone in distress is very important. People who have been through a crisis event may be very upset, anxious or confused. Some people may blame themselves for things that happened during the crisis. **Being calm and showing understanding** can help people in distress feel more safe and secure, understood, respected and cared for appropriately.

Someone who has been through a distressing event may want to tell you their story. Listening to someone's story can be a great support. However, it is important **not to pressure** anyone to tell you what they have been through. Some people may not want to speak about what has happened or their circumstances. However, they may value it if you stay with them quietly, let them know you are there if they want to talk, or offer practical support like a meal or a glass of water. Don't talk too much; allow for silence. Keeping silent for a while may give



the person space and encourage them to share with you if they wish.

To communicate well, be aware of both your words and body language, such as facial expressions, eye contact, gestures, and the way you sit or stand in relation to the other person. Each culture has its own ways of behaving that are appropriate and respectful. Speak and behave in ways that consider the person's culture, age, gender, customs and religion.

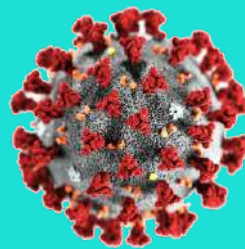
Below are suggestions for things to say and do, and what **not** to say and do. Most importantly, be yourself, be genuine and be sincere in offering your help and care.

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.
- Don't pressure someone to tell their story.

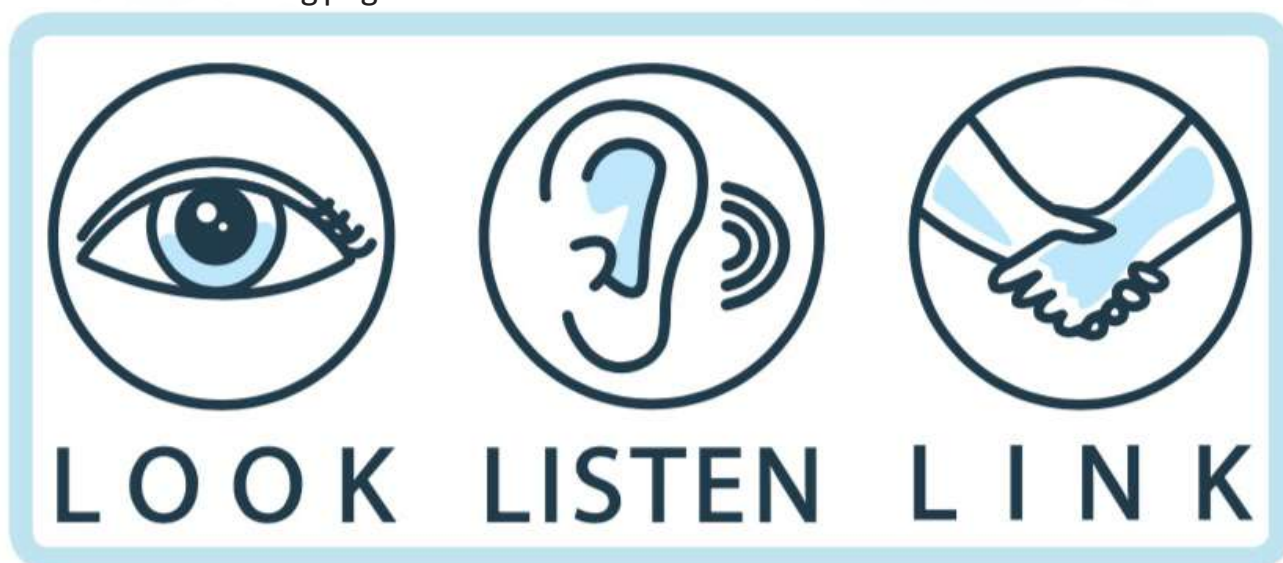
Things not to say and do

- 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”).

*“Keep good communication in mind as you **look, listen and link**”* – the action principles of PFA covered in the following pages.



3.2 Prepare – learn about the situation

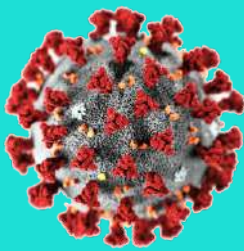
Crisis situations can be chaotic and often need urgent action. However, wherever possible before entering a crisis site, try to get accurate information about the situation. Consider the following questions:

Before entering a crisis Site, learn about the following:

Important questions to ask:

About the crisis event:

- What happened?
- How long have you been feeling off?
- Are you able to function as usual at work? Home?



Available services and supports

- Who is providing for basic needs like emergency medical care, food, water, shelter or tracing family members?
- Where and how can people access those services?
- Who else is helping? Are community members involved in responding?




Safety and security concerns

- Is the crisis event over or continuing, such as the need for testing, self-isolation.
- What dangers may be in the environment, such as stigma, patients attacks
- Are there areas to avoid entering because they are not secure (for example, obvious physical dangers) or because you are not allowed to be there?

These important preparation questions can help you to understand the situation you are entering, to offer PFA more effectively and to be more aware of your safety.

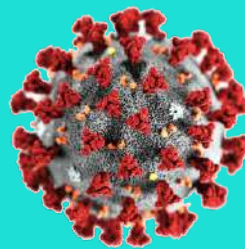
3.3 Action principles of PFA – Look, Listen, Link

The three basic action principles of PFA are look, listen and link. These action principles will help guide how you view and safely enter a crisis, approach affected people and understand their needs, and link them with practical support and information (see the table below).

look	<ul style="list-style-type: none">»» Check for safety.»» Check for people with obvious urgent basic needs.»» Check for people with serious distress reactions.	
listen	<ul style="list-style-type: none">»» Approach people who may need support.»» Ask about people's needs and concerns.»» Listen to people, and help them to feel calm.	
link	<ul style="list-style-type: none">»» Help people address basic needs and access services.»» Help people cope with problems.»» Give information.»» Connect people with loved ones and social support.	

Look: Check for safety; Check for people with obvious urgent basic needs, check for people with serious distress reactions

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Crisis situations can change rapidly. What you find at the scene may be different from what you learned before entering the crisis situation. Therefore, it is important to take time – even a few moments – to “look” around you before offering help. If you suddenly find yourself in a crisis situation without time to prepare, this may be just a quick scan. These moments will give you a chance to **be calm, be safe and think before you act**. See the following table for questions to consider and important messages as you “look” around you.



Safety: Can you be there without likely harm to yourself or others? If possible, communicate with people in distress from a safe position.



People with obvious urgent basic needs:

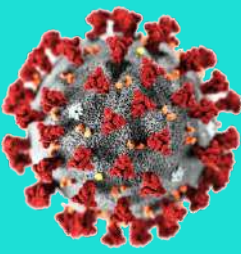
People with serious distress reactions:



People may react in various ways to a crisis. Some examples of distress responses to crisis are listed below:

- physical symptoms (for example, shaking, headaches, feeling very tired, loss of
- appetite, aches and pains)
- crying, sadness, depressed mood, grief
- anxiety, fear
- being “on guard” or “jumpy”
- worry that something really bad is going to happen
- insomnia, nightmares
- irritability, anger
- guilt, shame (for example, for having survived, or for not helping or saving others)
- confused, emotionally numb, or feeling unreal or in a daze
- appearing withdrawn or very still (not moving)
- not responding to others, not speaking at all
- disorientation (for example, not knowing their own name, where they are from, or what happened)





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- not being able to care for themselves or their children (for example, not eating or drinking, not taking appropriate steps of self-protection e.g. Improper donning or discarding of PPE)

Some people may only be mildly distressed or not distressed at all.

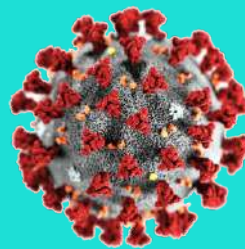
Most people will recover well over time, especially if they can restore their basic needs and receive support such as help from those around them and/or PFA. However, people with either severe or long-lasting distress reactions may need more support than PFA alone, particularly if they cannot function in their daily life or if they are a danger to themselves or others. Make sure that severely distressed people are not left alone and try to keep them safe until the reaction passes or until you can find help from health personnel, local leaders or other community members in the area.

Also, look for people among the affected population who are likely to need special attention for their care and safety, directly or as care givers to these vulnerable groups:

People who are likely to need Special attention in a crisis (See Section 3.5):

- **Children – including adolescents** – especially those separated from their caregivers, may need protection from abuse and exploitation. They will also likely need care from those around them and help to meet their basic needs.
- **People with health conditions or physical and mental disabilities** may need special help to get to a safe place, to be protected from abuse and to access medical care and other services. This may include frail elderly people, pregnant women, people with severe mental disorders, or people with visual or hearing difficulties.
- **People at risk of discrimination or violence**, such as women or people of certain ethnic groups, may need special protection to be safe in the crisis setting and support to access available help.





2. Listen to people and help them to feel calm:

- Stay close to the person.
- Do not pressure the person to talk.
- Listen in case they want to talk about what happened.
- If they are very distressed, help them to feel calm and try to make sure they are not alone.

3. Ask about people's needs and concerns:

- Although some needs may be obvious, such as a blanket or covering for someone whose clothing is torn, always ask what people need and what their concerns are.
- Find out what is most important to them at this moment, and help them work out what their priorities are.

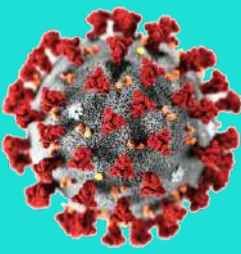
Listening properly to people you are helping is essential to understand their situation and needs, to help them to feel calm, and to be able to offer appropriate help. Learn to listen with your:

- »» Eyes »» giving the person your undivided attention
- »» Ears »» truly hearing their concerns
- »» Heart »» with caring and showing respect

1. Approach people who may need Support:

- Approach people respectfully and according to their culture.
- Introduce yourself by name and organization.
- Ask if you can provide help.
- If possible, find a safe and quiet place to talk.
- Help the person feel comfortable; for example, offer water if you can.
- Try to keep the person safe.
- Remove the person from immediate danger, if it is safe to do so.
- Try to protect the person from exposure to the media for their privacy and dignity.
- If the person is very distressed, try to make sure they are not alone.





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2. Ask about people's needs and concerns:

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- Do not pressure the person to talk.
- Listen in case they want to talk about what happened.
- If they are very distressed, help them to feel calm and try to make sure they are not alone.

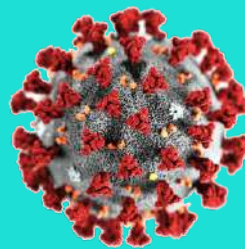


Help people to feel calm

Some people who experience a crisis situation may be very anxious or upset. They may feel confused or overwhelmed, and may have some physical reactions such as shaking or trembling, difficulty breathing or feeling their heart pounding. The following are some techniques to help very distressed people to feel calm in their mind and body:

- » Keep your tone of voice calm and soft.
- » If culturally appropriate, try to maintain some eye contact with the person as you talk with them.
- » Remind the person that you are there to help them. Remind them that they are safe, if it is true.
- » If someone feels unreal or disconnected from their surroundings, it may help them to make contact with their current environment and themselves. You can do this by asking them to:
 - » Place and feel their feet on the floor.
 - » Tap their fingers or hands on their lap.
 - » Notice some non-distressing things in their environment, such as things they can see, hear or feel. Have them tell you what they see and hear.
 - » Encourage the person to focus on their breathing, and to breathe slowly.





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



Although each crisis situation is unique, people who are affected often need the things listed in the following box.

Frequent needs:

- »» Direct needs, such as shelter in case of self-isolation, who will care for loved ones.
- »» Health services for injuries or help with chronic (long-term) medical conditions.
- »» Understandable and correct information about the event, loved ones and available services.
- »» Being able to contact loved ones, friends and other social supports.
- »» Access to specific support related to one's culture or religion.
- »» Being consulted and involved in important decisions.

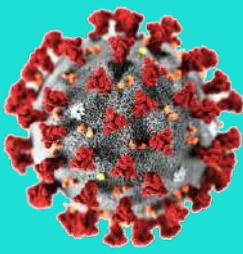
People may feel vulnerable, isolated or powerless after a distressing event. In some situations, their daily life is disrupted. They may be unable to access their usual supports, or they may find themselves suddenly living in stressful conditions. Linking people with practical support is a major part of PFA. ***Remember that PFA is often a one-time intervention and you may only be there to help for a short time.*** Affected people will need to use their own coping skills to recover in the long term. **Help people to help themselves and to regain control of their situation.**

1. Help people address basic needs and access services

In helping people to address basic needs, consider the following:

- Immediately after a crisis event, try to help the person in distress to meet the basic needs they request, such as food, water, shelter and sanitation.
- Learn what specific needs people have – such as health care, clothing– and try to link them to the help available.
- Make sure those with vulnerable or marginalized people under their care are not overlooked (see Section 3.5).
- Follow up with people if you promise to do so.





2. Help people cope with problems

A person in distress can feel overwhelmed with worries and fears. Help them to consider their most urgent needs, and how to prioritize and address them. For example, you can ask them to think about what they need to address now, and what can wait for later. Being able to manage a few issues will give the person a greater sense of control in the situation and strengthen their own ability to cope. Remember to:

- help people identify supports in their life, such as friends or family, who can help them in the current situation;
- give practical suggestions for people to meet their own needs (for example, explain how the person can register to receive food aid or material assistance);
- ask the person to consider how they coped with difficult situations in the past, and affirm their ability to cope with the current situation;
- ask the person what helps them to feel better. Encourage them to use positive coping strategies and avoid negative coping strategies (see the following table)

Coping

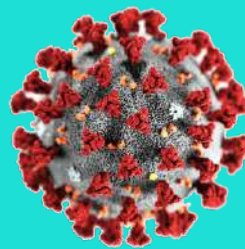
Everyone has natural ways of coping. Encourage people to use their own positive coping strategies, while avoiding negative strategies. This will help them feel stronger and regain a sense of control. You will need to adapt the following suggestions to take account of the person's culture and what is possible in the particular crisis situation.

Encourage positive coping strategies

- »» Get enough rest.
- »» Eat as regularly as possible and drink water.
- »» Talk and spend time with family and friends.
- »» Discuss problems with someone you trust.
- »» Do activities that help you relax (walk, sing, pray, play with children).
- »» Do physical exercise.
- »» Find safe ways to help others in the crisis and get involved in community activities.

Discourage negative coping strategies

- »» Don't take drugs, smoke or drink alcohol.
- »» Don't sleep all day.
- »» Don't work all the time without any rest or relaxation.
- »» Don't isolate yourself from friends and loved ones.
- »» Don't neglect basic personal hygiene.
- »» Don't be violent.



3. Give information

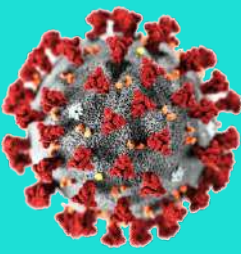
People affected by a crisis event will want accurate information about:-

- the event
- loved ones or others who are impacted
- their safety
- their rights
- how to access the services and things they need



Getting accurate information after a crisis event may be difficult. The situation may change as information about the crisis event becomes known and relief measures are put in place. Rumors may be common. You may not have all the answers in any given moment, but wherever possible:

- find out where to get correct information, and when and where to get updates;
- try to get as much information as you can before you approach people to offer support;
- try to keep updated about the state of the crisis, safety issues, available services, and the whereabouts and condition of missing or injured people;
- make sure people are told what is happening and about any plans;
- if services are available (health services, family tracing, shelter, food distribution), make sure people know about them and can access them;
- provide people contact details for services, or refer them directly;
- make sure vulnerable people also know about existing services



In giving information to affected people:

- explain the source of the information you are providing and how reliable it is;
- **only say what you know – do not make up information or give false reassurances;**
- keep messages simple and accurate, and repeat the message to be sure people hear and understand the information;
- it may be useful to give information to groups of affected people, so that everyone hears the same message;
- let people know if you will keep them updated on new developments, including where and when.

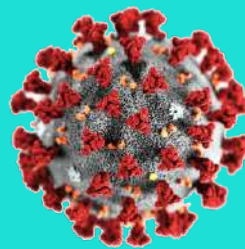
When giving information, be aware that the helper can become a target of the frustration and anger people may feel when their expectations of help have not been met by you or others. In these situations, try to remain calm and be understanding.

4. Connect with loved ones and Social Support

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. Because of this, linking people with loved ones and social support is an important part of PFA.

- Help keep families together, and keep children with their parents and loved ones—where possible and safe
- Help people to contact friends and relatives so they can get support; for example, provide a way for them to call loved ones.
- If a person lets you know that prayer, religious practice or support from religious leaders might be helpful for them, try to connect them with their spiritual digital community
- Help bring affected people together to help each other e.g. A digital support groups





Crisis and Spirituality

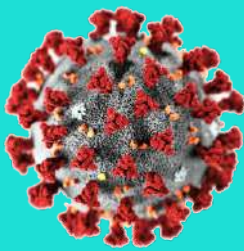
In crisis situations, a person's spiritual or religious beliefs may be very important in helping them through pain and suffering, providing meaning, and giving a sense of hope. Being able to pray and practice rituals can be a great comfort. However, the experience of crisis – particularly in the face of terrible losses – can also cause people to question their beliefs. People's faith may be challenged, made stronger or changed by this experience. Here are some suggestions about the spiritual aspects of providing care and comfort after a distressing event:

- »» Be aware of and respect the person's religious background.
- »» Ask the person what generally helps them to feel better. Encourage them to do things that help them to cope, including spiritual routines if they mention these.
- »» Listen respectfully, and without judgment, to spiritual beliefs or questions the person may have.
- »» Don't impose your beliefs, or spiritual or religious interpretations of the crisis, on the person.
- »» Don't agree with or reject a spiritual belief or interpretation of the crisis, even if the person asks you to do so.

3.4 Ending your help

What happens next? When and how you stop providing help will depend on the context of the crisis, your role and situation, and the needs of the people you are helping. Use your best judgment of the situation, the person's needs and your own needs. If appropriate, explain to the person that you are leaving, and if someone else will be helping them from that point on, try and introduce them to that person. If you have linked the person with other services, let them know what to expect and be sure they have the details to follow up. No matter what your experience has been with the person, you can say goodbye in a positive way by wishing them well.





People who May be vulnerable and need Special help in a crisis include:

1. Children, including adolescents.
2. People with health conditions or disabilities.
3. People at risk of discrimination or violence.

Remember that all people have resources to cope, including those who are vulnerable. Help vulnerable people to use their own coping resources and strategies.

1. Children, including adolescents

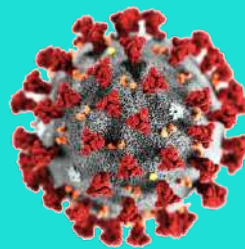
Many children – including adolescents – are particularly vulnerable in a crisis situation. Crisis events often disrupt their familiar world, including the people, places and routines that make them feel secure. Children who are affected by a crisis may be at risk of sexual violence, abuse and exploitation, which tends to be more common in the chaos of large crisis situations. Young children are often particularly vulnerable since they cannot meet their basic needs or protect themselves, and their caregivers may be overwhelmed. Girls and boys often face somewhat different risks. Usually girls face the greatest risk of sexual violence and exploitation, and those who have been abused may be stigmatized and isolated.

How children react to the hardships of a crisis (for example, witnessing destruction, injury or death, being exposed to the elements, lack of food and water) depends on their age and developmental stage. It also depends on the ways their caregivers and other adults interact with them. For example, young children may not fully understand what is happening around them, and are especially in need of support from caregivers. **In general, children cope better when they have a stable, calm adult around them.**



Children and young people may experience similar distress reactions as adults do (see Section 3.3). They may also have some of the following specific distress reactions⁴:

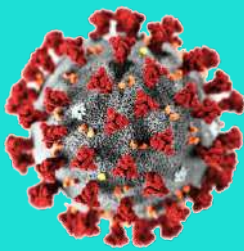
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- Young children may return to earlier behavior (for example, bedwetting or thumb-sucking), they may cling to caregivers, and reduce their play or use repetitive play related to the distressing event.
- School-age children may believe they caused bad things to happen, develop new fears, may be less affectionate, feel alone and be preoccupied with protecting or rescuing people in the crisis.
- Adolescents may feel “nothing”, feel different from or isolated from their friends, or they may display risk-taking behavior and negative attitudes.



Family and other caregivers are important sources of protection and emotional support for children. Those separated from caregivers may find themselves in unfamiliar places and around unfamiliar people during a crisis event. They may be very fearful and may not be able to properly judge the risks and danger around them. Instead, try to link them with available trustworthy supports for the children. When children are with their caregivers, try to support the caregivers in taking care of their own children. The following box gives suggestions for how they can support children of different ages and developmental stages.



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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

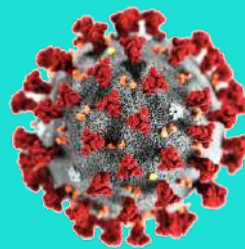
- »» Give them extra time and attention.
- »» Remind them often that they are safe.
- »» Explain to them that they are not to blame for bad things that happened.
- »» Avoid separating young children from caregivers, brothers and sisters, and loved ones.
- »» Keep to regular routines and schedules as 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.





If the caregiver is injured, extremely upset or otherwise cannot care for their children, you can arrange to get help for the caregiver and care for the children. Involve a trustworthy child protection agency or network, whenever possible. Keep children and their caregivers together, and try not to let them get separated. For example, if the caregiver is being transported somewhere for medical care, try to keep the children with them or take down the details of where the caregiver is being taken so they can be reunited.

Also keep in mind that children may gather around a crisis setting and may witness horrific events, even if they or their caregivers are not directly affected by the event. In the chaos of a crisis, adults are often busy and may not be watching closely what children in the area are doing or what they see or hear. Try to shield them from upsetting scenes or stories.

Things to Say and do for children

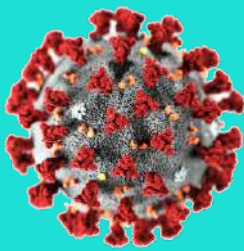
Keep safe

- »»Protect them from being overexposed to social media.
- »»Protect them from hearing upsetting stories about the event.
 - »»Protect them from the media or from people who want to interview them who are not part of the emergency response.

Listen, talk and play

- »» Be calm, talk softly and be kind.
- »» Listen to children's views on their situation.
 - »» Try to talk with them on their eye level, and use words and explanations they can understand.
 - »» Introduce yourself by name and let them know you are there to help.
 - »» Find out their name, where they are from, and any information you can in order to help find their caregivers and other family members.
 - »»When they are with their caregivers, support the caregivers in taking care of their own children.
 - »» If passing time with children, try to involve them in play activities or simple conversation about their interests, according to their age.

Remember that children also have their own resources for coping. Learn what these are and support positive coping strategies, while helping them to avoid negative coping strategies. Older children and adolescents can often help in crisis situations. Finding safe ways for them to contribute in the situation may help them to feel more in control.



2. People with health conditions or physical or Mental disabilities

People with chronic (long-term) health conditions, with physical or mental disabilities (including severe mental disorder), or who are elderly may need special help. This may include help to get to a safe place, to connect with basic support and health care, or to take care of themselves. The experience of a crisis event can make different types of health conditions worse, such as high blood pressure, heart conditions, asthma, anxiety and other health and mental disorders. Pregnant and nursing women may experience severe stress from the crisis that can affect their pregnancy, or their own and their infant's health. People who cannot move on their own, or who have problems seeing or hearing, may have difficulty finding loved ones or accessing the services available.

Here are some things you can do to help people with health conditions or disabilities:

- Help them to get to a safe place.
- Help them to meet their basic needs, such as being able to eat, drink, get clean water, care for themselves, or to build shelter from materials handed out by agencies.
- Ask people if they have any health conditions, or if they regularly take medication for a health problem. Try to help people get their medication or access medical services, when available.
- Stay with the person or try to make sure they have someone to help them if you need to leave. Consider linking the person with a protection agency or other relevant support, to help them in the longer term.
- Give them information on how to access any services available.

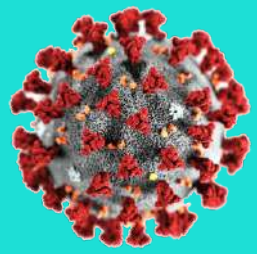
3. People at risk of discrimination or violence

People at risk of discrimination or violence may include women, people from certain ethnic or religious groups, and people with mental disabilities. They are vulnerable because they may be:

- left out when basic services are being provided;
- left out of decisions about aid, services or where to go;
- targeted for violence, including sexual violence.

People at risk of discrimination or violence may need special protection to be safe in a crisis situation and may need extra help to address their basic needs and access available services.

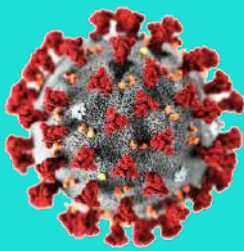
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Be aware of these people and assist them by:

- helping them to find safe places to stay;
- helping them to connect with their loved ones and other trusted people; and
- providing them with information on available services and helping them to link directly with those services when necessary.





Chapter FOUR: Caring For Yourself & Your Colleagues

In this chapter, we will discuss:

- 4.1 getting ready to help.
- 4.2 Managing stress: healthy work and life habits.
- 4.3 rest and reflection.



You or your family may be directly affected by the crisis situation. Even if you are not directly involved, you may be affected by what you see or hear while helping. As a helper, it is important to pay extra attention to your own wellbeing. Take care of yourself, so you can best take care of others!

4.1 Getting Ready to help

Consider how you can best get ready to be a helper in crisis settings. Whenever possible:

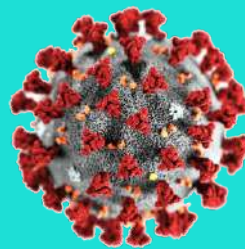
- »» Learn about crisis situations, and roles and responsibilities of different kinds of helpers.
- »» Consider your own health, and personal or family issues that may cause severe stress as you take on a helping role for others.
- »» Make an honest decision about whether you are ready to help in this particular crisis situation and at this particular time.



4.2 Managing stress: Healthy work and life habits

A main source of stress for helpers is day-to-day job stress, particularly during a crisis. Long working hours, overwhelming responsibilities, lack of a clear job description, poor communication or management, and working in areas which are not secure are examples of job-related stress that can affect helpers.

As a helper, you may feel responsible for people's safety and care. You may witness or even directly experience terrible things, such as destruction, injury, death or violence. You may also hear stories of other people's pain and suffering. All of these experiences can affect you and your fellow helpers. Consider how you can best manage your own stress, to support and be supported by your fellow helpers. The following suggestions may be helpful in managing your stress.



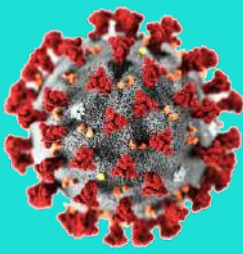
- Think about what has helped you cope in the past and what you can do to stay strong.
- Try to take time to eat, rest and relax, even for short periods.
- Try to keep reasonable working hours so you do not become too exhausted. Consider, for example, dividing the workload among helpers, working in shifts during the acute phase of the crisis and taking regular rest periods.
- People may have many problems after a crisis event. You may feel inadequate or frustrated when you cannot help people with all of their problems. Remember that you are not responsible for solving all of people's problems. Do what you can to help people help themselves.
- Minimize your intake of alcohol, caffeine or nicotine and avoid nonprescription drugs.
- Check in with fellow helpers to see how they are doing, and have them check in with you. Find ways to support each other.
- Talk with friends, loved ones or other people you trust for support, also join support groups where possible

4.3 Rest and Reflection

Taking time for rest and reflection is an important part of ending your helping role. The crisis situation and needs of people you have met may have been very challenging, and it can be difficult to bear their pain and suffering. After helping in a crisis situation, take time to reflect on the experience for yourself and to rest. The following suggestions may be helpful to your own recovery.

- »» Talk about your experience of helping in the crisis situation with a supervisor, colleague or someone else you trust.
- »» Acknowledge what you were able to do to help others, even in small ways.
- »» Learn to reflect on and accept what you did well, what did not go very well, and the limits of what you could do in the circumstances.
- »» Take some time, if possible, to rest and relax before beginning your work and life duties again.

If you find yourself with upsetting thoughts or memories about the event, feel very nervous or extremely sad, have trouble sleeping, or drink a lot of alcohol or take drugs, it is important to get support from someone you trust. Speak to a health care professional or, if available, a mental health specialist if these difficulties continue for more than one month.



Chapter FIVE: Case Scenarios

Case scenario1

You are informed that several patients have been admitted into the neighboring School for isolation as they are confirmed to have COVID 19.

You and your colleagues receive a call that many of the patients are terribly shaken by separation from their loved ones. The agency you work for has asked you and your colleagues to support these patients.

As you prepare to help, ask yourself the following questions:

- Am I ready to help?
- What personal concerns might be important?
- What information do I have about the crisis situation?
- Will I go to the scene or make a phone call? Why or why not?

Things to consider:

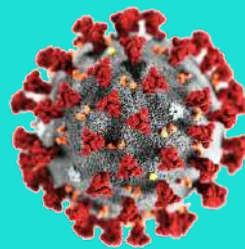
»» When preparing to help in a crisis situation consider the advantages of working in a team or in pairs.

Working in teams will help you to have support and back-up in difficult situations and is important for your safety. You can also be more effective in a team. For example, one person can stay with someone who is distressed while the other person can focus on finding special help such as medical care, if needed. If possible, try to have a “buddy system” where you and a fellow helper can check in with each other for support and help.

»» Some agencies may be able to give you support, such as supplies, transportation, communication equipment, updated information about the situation or security issues, and coordination with other team members or services.

As you plan on the way forward ask yourself, **what should you look for?**

- »» Is it safe enough to be at the crisis site?
- »» What services and supports are available?
- »» Are there people with obvious urgent basic needs?

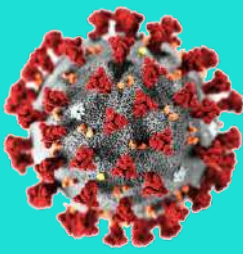


- »» Are there people with obvious serious emotional reactions?
- »» Who may likely be in need of special help?
- »» Where can I provide PFA?

Sample conversation with a distressed adult Patient

In this conversation, you have a telephone conversation with one of the patients in the isolation centre. She is crying and her voice is shaking.

- You:** Hello, my name is ___. I'm working with the agency ___. May I talk with you?
- Woman:** It's terrible! I had just gone to the hospital for a checkup because I have a Flu. The doctor insisted on testing for COVid- 19 because I had attended church last Sunday! I don't understand what's happening! I don't believe I have COVID 19. I just want to go home and see my children.
- You:** I can imagine it was terrible for you. What is your name?
- Woman:** I'm Mary – Mary Cheruiyot I'm very scared! *[shaking, crying]* I wonder if I should try to run away from here. My children are all alone at home. My husband died last year. I don't know if my children are alright right!
- You:** Mrs Cheruiyot, I am sorry about how you feel. Right now it's not safe at all for you to go back home. You may infect your children. If you like, I can call home to talk to your children. Would you like that?
- Woman:** Yes, please. Here is the number 07... *[You drop the conversation and call home. Then you call Mrs Cheruiyot again.]*
- You:** I have called home. Your children are alright. Your sister Jane has come to stay with them. She has brought some food for them. She will be calling you shortly
- Woman:** Thank you so much, I feel better. One more thing. I have no airtime. I would like to talk to my pastor. How can you help. His no is 07...
- [You call the pastor and ask him to get in touch with Mary.]*
- Woman:** I feel terrible! I should not have gone to church!
- You:** I can understand that. You did not know that you were going to get infected.
- Woman:** I washed my hands at the church, also tried to sit near a window. I feel terrible. Am afraid I will die!
- You:** It's difficult to know what to do in a situation like this. But it sounds as though



you tried to take some precautions. You would not have known that someone in Church was infected.

Woman: I left my young child coughing. I am afraid she has contacted the disease too. We shall all die! *[crying]*

You: I'm so sorry. There is a team that has been sent to your house, they will test your children also. They have also given your sister instructions how to take care of herself. Remember that most people recover and do quite well.

Woman: You have really helped me feel better. Thank you for calling.

You: Am glad you feel better. I will call you tomorrow to see how you are doing. I will also call your home. Thank you for letting me talk to you.

Woman: Thank you again.

In this sample conversation, notice that you:

- »» introduced yourself by name and told the person the agency you work for;
- »» asked the person if they would like to talk;
- »» addressed the person by their name, respectfully using their last name;
- »» »» offered the distressed person some comfort (for example, calling home);
- »» listened to the person, without forcing them to talk;
- »» reflected back to the person ways they had acted appropriately;
- »» took the time to listen;
- »» identified the person's needs and concerns;
- »» acknowledged the person's worry over the possible death;
- »» offered to help connect the person with their pastor.

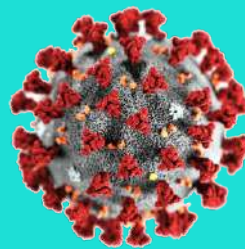
Case Scenario 2

You are called to help a family whose mother had travelled to Italy for a conference but was taken ill at the airport. She was immediately taken to Mbagathi and was diagnosed with Covid- 19. She is a single mother of one child. She had left her son with a house girl. The house girl decided to leave this morning upon getting news that her boss is Covid-19 positive. You have been called by the chief to check on the boy.

Sample conversation:

At the home of this lady you find a boy of about 10 years old standing alone at the door step

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of their house and looking very frightened and exhausted from crying.

You: *[getting down on one knee at the eye level of the child]:* Hi, my name is _____. I'm with _____ agency and I'm here to help. What is your name?

Child: *[looking down and speaking softly]:* I am Otieno

You: Hi Otieno. Would you like to come into the house with me? *[Offer something to eat or drink or some other practical comfort like a blanket if you have it.]* ? Whom are you with.

Child: I am alone. My mum is dying of Corona. Auntie Agness packed her things and left saying mum will bring Corona to her. I don't know what to do. *[beginning to cry]*

You: I can see you're scared Otieno. It is ok to feel that way in this situation. I will try to help you and connect you with people who will take care of you. Can you tell me the name of your uncle?

Child: Yes, He is Mr Oyugis, he lives in Kawangware. I visited him with mum before she travelled.

You: Thank you, Otieno. Do you have his phone number?

Child: No but mum has a book she writes telephone contacts. *(He points to a book on the table).* There it is. *(You get the contact and have a call with the uncle).*

You: Your uncle is on the way coming. Would you like to prepare to go with him?

Child: Yes. But I have no bag to pack my things.

You: Can I try to help you find you get a paper bag?

Child: Yes please. *(You step out to buy a paper bag at a nearby shop. You return and finds him crying, staring at his mums photo)*

You: I'm sorry, Otieno. You must miss your mother.

Child: I am scared that she will die!

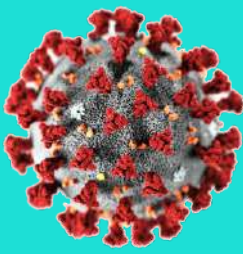
You: *[in a warm, natural manner]:* I understand. It is normal to feel like that in such times. I would like you to know that not all people who have corona will die. People like your mum who are otherwise healthy are likely to get well.

Child: What should I do to stop worrying?

You: At such times you need to focus on other things as you hope for the best. What do you like to do when you are not at school?

Child: I like to draw and do some paintings.

You: Ok. Can you pack some drawing book and colours? It is also helpful to play with your



cousins. We could also try ask to speak to your mum on phone when she is much better.

Child: Thank you. I feel much better. (*There is a knock on the door. The uncle has arrived to pick him*).

Uncle: Thank you so much for helping with Otieno. I got news that his mum is out of danger but will be in hospital a few more days

You: The pleasure has been mine. I will call you in two days to check how you are doing.
(you bid each other goodbye and leave)

In this sample conversation, notice that you:

»» Found a lonely child

»» got down on one knee to speak with the child on his eye level;

»» spoke calmly and kindly to the child;

»» found out information about the child's uncle

You reassured and gave hope

»» stayed with the child while waiting for uncle to arrive and that organized a safe place for the child to stay until his mother is back

Questions to ask yourself as you prepare link people with information and practical support.

- What basic needs might people have?
- What services do I know are available?
- How can people access them?
- When and where can people find more information about what is happening?
- How can I help to protect vulnerable people, such as women or unaccompanied children, from further harm?
- What challenges might there be in this situation to finding out about available resources (food, shelter, water) or services for affected people?
- What worries and concerns may be on people's minds?
- What practical suggestions could I give to help them address their problems?
- What information will affected people want? Where will I find updated and reliable information about the crisis event?



MINISTRY OF HEALTH

COVID-19 CORONAVIRUS DISEASE

