









The course presentation for increasing of psychological resilience for emergency personnel



Erasmus+ Programme - Strategic Partnership

Project Title: "Psychological Resilience for Emergency Responders"

Project # 2020-1-RO01-KA202-079773



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Psychological resilience for emergency personnel



Staff involved in emergency situations cannot change an injured person's state of distress, but they can change their attitude to the situation and thus not be affected by what is happening. This is precisely the aim of this course, to raise awareness of what consequences can arise from direct participation in saving lives and how resilience can be developed to overcome these possible circumstances.



Reactions after emergency response by rescuers





These disorders do not necessarily affect the fragile or weakest people, but where **psychological resilience** is not sufficiently developed.





Working in constant contact with suffering and exposure to dangerous situations involves possible psychological risk

Indirect trauma

 a process by which the rescuer's internal experience can be transformed into a negative experience because of the rescuer's empathic involvement with the traumatised person.

Psychic contagion

 can lead to real structural changes in the personal and professional identity of the rescuer.



- Divide the learners into 2 or 3 groups.
- Each group, in turn, plays the role of emergency victims.
- The other groups take it in turns to identify what emotional states they might feel in such situations.
- After all groups have played their roles, a discussion takes place.



Sympathy weariness

Symptoms of this condition can be:

- Re-experiencing the emotionally charged reliving or remembering of the emergency.
- Avoidance (distancing attitudes, both physical and emotional, towards people, not just patients), or over-involvement (taking charge of all the patient's situations, the rescuer thinks only he can help).
- Hyperactivity (state of tension, constant alertness and reactivity).



Factors predisposing to compassion fatigue

Individual factors:

- the lack of communication skills;
- the lack of self-control;
- accumulated stress;
- little experience of working in trauma or crisis situations;
- use of inappropriate coping strategies.

Organisational factors:

- corporate culture that neither appreciates nor recognizes emotional variables;
- poor guidance by supervisors;
- uninterrupted 12- or 14-hour shifts.



- Divide the trainees into two groups.
- One group plays the role of rescuers who have acquired compassion fatigue.
- The other group identifies and notes the symptoms.
- Then the role of the groups is changed.
- There is a debate at the end.





Stimulus condition - stress response

Status of tension acute or chronic

Defence
psychological and
physiological of the
body

Restoration homeostasis



Stress factors

- Physics
- Biological
- Psychosocial



- Each learner is given a piece of paper, on which they have to write down the types of stressors and how they might respond to emergency rescuers.
- A discussion takes place at the end of the exercise.





Reaction to stress

Alarm phase

 The stressor awakens a sense of alertness in the body, resulting in the activation of a whole series of psychophysiological processes (increased heart rate, hyperventilation, sweating, etc.) aimed at coping with the new situation.

Resistance phase

 The person adapts to the new demands of the external environment, with normalisation of physiological indicators.

Exhaustion phase

 The final phase, which occurs when the body runs out of functional reserves and is no longer able to counteract the prolonged action of stressors to restore a state of equilibrium. The cascade of hormonal and nervous events, usually limited over time, is constantly activated, causing a continuous state of emergency, with the consequent appearance of physical, physiological and emotional symptoms.



- The trainees are divided into 4 groups and each group reproduces one of the phases that occur during the stress reaction.
- At the end of the exercise there is a discussion and processing.





Burnout syndrome to professionals in the field of emergency

- Burn-out is a syndrome of physical, emotional and mental exhaustion caused by longterm involvement in emotionally demanding activities.
- It is a syndrome that can occur in those who by profession are faced with problematic situations where there is continuous contact with illness and death.
- Emergency workers, due to the specific nature of their work, are in close and continuous contact with victims of accidents, disasters and emergency situations, and are therefore among the categories most affected by Burn-out.



Burn-out stages

- 1. Idealistic Enthusiasm
- 2. Stagnation
- 3. Frustration
- 4. radual emotional disengagement



- Learners are divided into two groups and each group exemplifies and acts out the roles of people suffering from BURN-OUT syndrome.
- Each learner is then encouraged to list the symptoms and identify if there have been situations where they have encountered burn-out.





What is resilience?

- An individual's ability to adapt positively to a negative and traumatic situation.
- Maintaining a stable balance.
- Resilience means adaptation.



- Each learner will identify 2 of their own resources that position them to be a resilient person.
- Write down these resources and then at the end of the exercise the whole group identifies which resource is most common.





Factors that influence an individual's resilience response

Individuals Social Related



Strategies

Folkman and Greer

- problem solving in situations perceived as controllable.
- coping based on processing one's own emotions.
- coping based on the meaning attributed to unresolved or unresolvable events.



- The learners are divided into two groups and each group exemplifies the Folkman and Greer method.
- At the end of the exercise there is a discussion.





Strategies

- Psychological assistance
- Psychotherapeutic approach
- Support



 Learners are chosen, who volunteer to participate in the exercise and the cognitive restructuring, desensitization and problem solving technique is exemplified.

• The results are then discussed.





Debusing – faze

- Initiation
- Exploring
- Information



- The learners are divided into two groups and each group exemplifies the Debusing strategy.
- At the end of the exercise there is a discussion and processing.





Debriefing Stages

- Initiation
- Thoughts
- The Facts
- Emotions
- Symptoms
- Teaching
- Ritual
- Conclusion



- Divide learners into two groups and each group exemplifies the Debriefing method.
- After going through the phases, the debriefing is discussed and processed at the end of the exercise.





EMDR

• EMDR therapy has a theoretical basis, addressing unprocessed memories, which can give rise to many dysfunctions.



Mindfulness

- Focus on what is in your control.
- Recognise your thoughts and feelings.
- Commit to what you are doing.
- Identify your resources.



- The trainees, who volunteer, will exemplify mindfulness techniques.
- Technique 1 pin a point on a wall and focus on that point.
- Technique 2 abdominal breathing and fixing a positive image of oneself in the mind.





Consultancy in the field of emergency situations

- Understanding the problem
- Exploring the problem
- Managing the problem



- Four learners are chosen to play the role of counsellor and rescuer.
- They will simulate an emergency response situation, chosen in agreement with the whole group.
- At the end of the exercise the results are processed and discussed.





Coping

- Logical analysis: cognitive attempts to understand and mentally prepare to deal with a stressor and its consequences.
- **Positive reappraisal:** cognitive attempts to construct and restructure a problem in a positive way by accepting the reality of a situation.
- Seeking guidance and support: behavioural attempts to seek information, support and guidance.
- Problem Solving: behavioural attempts to take actions that lead directly to solving the problem.
- Cognitive avoidance: cognitive attempts to avoid thinking realistically about the problem.
- Acceptance/resignation: cognitive attempts to react to the problem by accepting it.
- Seeking alternative rewards: behavioural attempts to engage in substitute activities and create new sources of satisfaction.
- Emotional release: behavioural attempts to reduce stress by expressing negative feelings.



- Divide learners into two groups and exemplify the copping method, following the steps listed above.
- At the end of the exercise, discuss and process.





Good self-knowledge

- The stages and characteristics of good self-knowledge are discussed.
- List the resources of selfknowledge.





Listen to your emotions

- Emotions are discussed.
- Make a list of the emotions most often felt by rescuers at the scene of accidents or disasters.





 Take a seat, make yourself comfortable, light a candle and a scented stick.

• Sit there and observe the flame, smell the scent... and listen to yourself.

 Let all that needs to surface, like a flowing river.

 Stay until you feel that you have lifted that weight of soul that weighs you down.





Perseverance

Trainees will have tasks, which they will do in class and complete at home.





Build a positive mindset

Learners will go to the flipchart and learn how to build positive mindsets, such as:

• I can, I am capable





Reference points

Learners will make a list of people and items of reference for them.





Developing gratitude

Learners will make a list of events and people in their lives to be grateful for.





Developing the capacity for the reinvention

Learners will identify resources and actions that can help them reinvent themselves.





Routine

Learners will develop a routine to help them become aware of their own resources and qualities.







Partners

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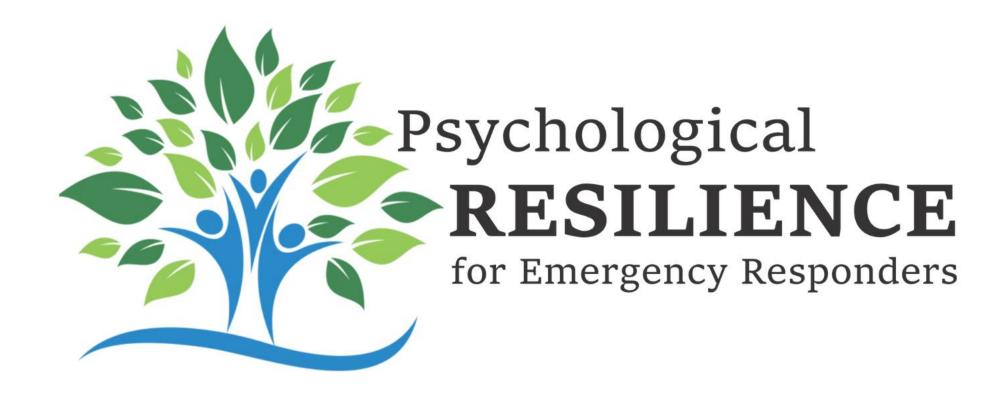
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Thanks for your attention!!!