Contemporary large migration waves into Europe: Enabling health workers to provide psychological support to migrants and refugees and develop strategies for dealing with their own emotional needs

Psychological Support Tools and Best Practices

July 2018
INTERNATIONAL GUIDELINES FOR THE PROVISION OF PSYCHOLOGICAL SUPPORT

IENE 6
Contemporary large migration waves into Europe: Enabling health workers to provide psychological support to migrants and refugees and develop strategies for dealing with their own emotional needs

Intellectual Output 7

(Project number: 2016-1-UK01-KA202-024283)

Edited By:
Dr. Umit Tural
Dr. Ayse Dilara Yalcin
Dr. Firdevs Alioglu
Kocaeli University, Kocaeli, Turkey

January 2018
This document is designed to orient helpers to offer psychological first aid (PFA) to people following a serious crisis event.

What is psychological first aid?
Psychological first aid is a ‘humane, supportive response to a fellow human being who is suffering and who may need support’

In this writing, you can find several resources for providing psychological first aid. These guidelines provides an overview of best practice in psychological first aid following disasters and traumatic events.

Resource 1
Title: Psychological first aid: Guide for field workers

Organization: World Health Organization (WHO)  
Year: 2011  
Authors: Leslie Snider (War Trauma Foundation, WTF), Mark van Ommeren (World Health Organization, WHO) and Alison Schafer (World Vision International, WVI)

(© World Health Organization 2011 All rights reserved. Publications of the World Health Organization are available on the WHO website [www.who.int](http://www.who.int).)

Purpose of the Tool: This tool provides information about how to conduct and utilize PFA in a textbook format.

Description/ Brief Summary: This guide is designed to orient helpers to offer psychological first aid (PFA) to people who have experienced an extremely distressing event. It gives the framework for supporting people in ways that respect their dignity, culture and abilities. It provides information about what PFA is and what the basic principles of PFA are.

Special Features (Validation, Language Options etc): This manual is available in Arabic, Chinese, Dutch, English, Farsi, French, German, Greek, Japanese, Kiswahili, Korean, Portuguese, Romanian, Russian, Serbian, Sinhala, Slovenian, Spanish, Tamil, Turkish, and Urdu.

Conclusions and Recommendations: This resource could be helpful for the health care professionals and volunteers to give the best help in hard situations with having a chapter called “Practise what you have learned” that has case scenarios, sample conversations and actions (Page: 43-52) . There are good tables which have the key points about PFA, important questions, action principles of PFA in the guide. It has also a pocket guide (Page:53-54) which gives the basic information about PFA.

---

Resource 2

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

Organization: World Health Organization (WHO)  
Year: 2013
**Authors:** Leslie Snider (War Trauma Foundation), Alison Schafer (World Vision International (WVI)), Mark van Ommeren (World Health Organization (WHO) Department of Mental Health and Substance Abuse), Khalid Saeed (WHO Regional Office for the Eastern Mediterranean)

**Source/Link:** [http://apps.who.int/iris/bitstream/10665/102380/1/9789241548618_eng.pdf?ua=1](http://apps.who.int/iris/bitstream/10665/102380/1/9789241548618_eng.pdf?ua=1)

© World Health Organization 2013 All rights reserved. Publications of the World Health Organization are available on the WHO web site (www.who.int)

**Purpose of the Tool:** This facilitator’s guide is designed to orient helpers to offer psychological first aid (PFA) to people following a serious crisis event.

**Description/Brief Summary:** This guide provides information about how to conduct and utilize PFA.

**Special Features (Validation, Language Options etc):** This manual is available in Chinese; English; Greek

**Conclusions and Recommendations:** This manual has useful group works, orientation tips, communication exercises, case scenarios for volunteers and health care workers.

---

**Resource 3**

**Title:** Psychological First Aid. An Australian guide to supporting people affected by disaster

**Organization:** Australian Psychological Society, Australian Red Cross

**Year:** 2013

**Authors:** Dr Susie Burke, John Richardson, Shona Whitton

**Source/Link:** [http://www.redcross.org.au/files/Psychological_First_Aid_An_Australian_Guide.pdf](http://www.redcross.org.au/files/Psychological_First_Aid_An_Australian_Guide.pdf)

(©Australian Red Cross 2013 All rights reserved.)

**Purpose of the Tool:** This psychological first aid guide is for people working in disaster preparedness, response and recovery.

**Description/Brief Summary:** This guide gives basic knowledge about PFA. It gives information about aims and basic principles of PFA. This guide has chapters about understanding, using and adapting psychological first aid.

**Special Features (Validation, Language Options etc):** This document is available only in English

**Conclusions and Recommendations:** This guide could be useful for volunteers and health care professionals. This guide has a special chapter about adapting PFA for people who have special needs such as children, mentally disabled people, people who have health issues. (Page:22-27) And also this guide gives information about self care and reducing stress tips for people who work in the field. (Page: 28-31)
Title: Psychological First Aid - Field Operations Guide

**Organization:** National Center for PTSD, National Child Traumatic Stress Network

**Year:** 2006

**Authors:** Melissa Brymer, Christopher Layne, Anne Jacobs, Robert Pynoos, Josef Ruzek, Alan Steinberg, Eric Vernberg, and Patricia Watson

**Source/Link:** [https://www.ptsd.va.gov/professional/manuals/manual-pdf/pfa/PFA_2ndEditionwithappendices.pdf](https://www.ptsd.va.gov/professional/manuals/manual-pdf/pfa/PFA_2ndEditionwithappendices.pdf)

**Purpose of the Tool:** This is a tool which gives information about best practices of psychological first aid.

**Description/Brief Summary:** This Psychological First Aid Field Operations Guide provides an overview of best practice in psychological first aid following disasters and traumatic events. This guide gives information about basic principles of PFA and to whom and when we should deliver PFA.

**Special Features (Validation, Language Options etc):** This manual is available in English, Spanish, Japanese, Chinese

**Conclusions/Recommendations:** This guide was one of the most useful guide for trauma following disasters. It gives basic information for stabilizing and orienting emotionally overwhelmed survivors. It has sample conversations for different situations related traumatic events, PFA worksheets (Page:123-127), and handouts for survivors (Page:129-153).

---

Title: Psychological first aid: Field Worker’s Guide

**Organization:** Unspecified

**Year:** Unspecified
Authors: Dr. Vinod Singaravelu


(The author does not claim copyrights of the information in this material. The author is making the materials available to be used, as necessary for noncommercial purposes, by the field workers or to the train them to deliver Psychological First Aid in disaster situations)

Purpose of the tool:

This guide was developed in order to have widely agreed upon psychological first aid material for use in developing countries.

Description/Brief Summary: This guide Provides information about how to conduct and utilize PFA in a textbook format.

The materials included in this guide are compiled from various internationally approved references.

Special Features (Validation, Language Options etc): This document is available only in English.

Conclusions/Recommendations: This resource could be helpful for learning basic PFA principles. This is a guide that is easy to understand and that can be used for training purposes.
TOOLS FOR ASSESSING PSYCHOLOGICAL DISTRESS

IENE 6

Contemporary large migration waves into Europe: Enabling health workers to provide psychological support to migrants and refugees and develop strategies for dealing with their own emotional needs.

Intellectual Output 7
(Project number: 2016-1-UK01-KA202-024283)

Edited By:

Dr. Umit Tural
Dr. Ayse Dilara Yalcin
Dr. Firdevs Alioglu
Kocaeli University, Kocaeli, Turkey

January 2018
TOOLS AND PROTOCOLS FOR ASSESSING PSYCHOLOGICAL DISTRESS

Psychological distress is common among people who are affected by war-trauma and migration-stress. Refugees can suffer from many physical and psychological symptoms and disorders, partly owing to the stressful experiences they have. Assessing the stressful experiences and the symptoms and disorders is challenging but the assessment process has a critical importance for providing proper psychological first aid.

In this writing, you can find several resources for assessing mental health needs and problems in refugees and screening instruments for these reasons.

Resource 1

Title: Refugee Health Technical Assistance Service

Subtitles: (Selected few)
- Assessments for Trauma and Mental Health in Refugees
- Screening for Emotional Distress and Mental Health

Organization: The Refugee Health Technical Assistance Center (RHTAC)

Year: Unspecified

Authors: Most of the material which is in the website was adapted from:


References may be found in the website.

Source/Link:


http://refugeehealthta.org/physical-mental-health/mental-health/adult-mental-health/assessments-for-trauma-and-mental-health-in-refugees/

Purpose of the Tool: This website gives us a brief summary of assessment tools and screening instruments for mental health in refugees.
Description/ Brief Summary: There is useful information in the website for assessing refugees mental health needs. The basic principles for assessment are:

- Provide safe private environment
- Beware of possible traumatic immigration history
- Ask about immigration history and trauma history
- If torture/trauma history is elicited consider:
  - Sensitiveness in examining
  - More through review of social situation
  - More through review of mental health symptoms

Recommend mental health referral when:

- Suicide ideation or behavior
- Psychotic symptoms
- Cases that make provider anxious
- Failure to respond to treatment

Refugee mental health considerations:

- Discussing mental health issues does not worsen mental health
- Not discussing mental health issues does not make them go away
- Developing a way to speak about symptoms possibly related to stress (somatic/functional) that sets realistic expectations for patient is most effective
- Treatments are available and effective for mental health symptoms and problems

In this website you can find a detailed information about screening instruments such as:

- The Harvard Trauma Questionnaire (HTQ)
- Post Migration Living Difficulties Scale (PMLD)
- The 32-item Resettlement Stressor Scale (RSS)
- The War Trauma Scale (WTS)
- The Comprehensive Trauma Inventory – 104 (CTI-104)
- The New Mexico Refugee Symptom Checklist – 121 (NMRSCCL-121)

There are also useful webinars which are about addressing mental health needs for refugees and an instruction for a scale which is named Refugee Mental Health Screening-15 (RHS-15). It is a scale which has 15 questions.
15. question of the scale can also be useful for quick assessment:

![Distress Thermometer](image)


Special Features (Validation, Language Options etc): This website is available only in English.

Conclusions/ Recommendations: A refugee’s expression of distress requires careful consideration of a variety of factors therefore a detailed and careful examination has become an important part of the assessment process. This website gives some clues about this factors. In the website you can find lots of different instruments’ name but for original ones you should ask for permission from the author of scale.

Resource 2

Title: Assessing Mental Health and Psychosocial Needs and Resources: Toolkit for Humanitarian Settings

Organization: World Health Organization (WHO), The UN Refugee Agency (UNHCR)

Year: 2012

Authors: Wietse A. Tol (Johns Hopkins University School of Public Health) and Mark van Ommeren (WHO)

Source/Link: http://www.unhcr.org/509bb3229.pdf

(© World Health Organization 2012 All rights reserved. Publications of the World Health Organization are available on the WHO web site [www.who.int] )
**Purpose of the Tool:** This toolkit is made for primarily for public health agencies which needs and uses assessment process after disasters.

**Description/Brief Summary:** This document gives a good framework to whom will work with refugees and traumas after disasters. This document assumes you know about mental health and psychosocial concepts as outlined in the IASC, MHPSS Guidelines (2007). It gives a general information about assessment process, assessment methodology, and how to translate assessment into action. This toolkit has 12 tools which are for coordination and advocacy, For MHPSS through health services, For MHPSS through different sectors, including through community support. You can find different assessment methods in this guide. For example:

The 2nd tool (page: 34-40) provides information about mental health needs for refugees. It includes these questions:

- The next questions are about how you have been feeling during the last two weeks. About how often during the last two weeks did you feel so afraid that nothing could calm you down — would you say all of the time, most of the time, some of the time, a little of the time, or none of the time?
- About how often during the last two weeks did you feel so angry that you felt out of control — would you say all of the time, most of the time, some of the time, a little of the time, or none of the time?
- During the last two weeks, about how often did you feel so uninterested in things that you used to like, that you did not want to do anything at all? (IF NEC: all of the time, most of the time, some of the time, a little of the time, or none of the time?)
- During the last two weeks, about how often did you feel so hopeless that you did not want to carry on living? (IF NEC: all of the time, most of the time, some of the time, a little of the time, or none of the time?)
- You may have experienced one or more events that have been intensely upsetting to you, such as the recent emergency/disaster/war. During the last two weeks, about how often did you feel so severely upset about the emergency/disaster/war or another event in your life, that you tried to avoid places, people, conversations or activities that reminded you of such event? (IF NEC: all of the time, most of the time, some of the time, a little of the time, or none of the time?)
- The next question is about how these feelings of fear, anger, fatigue, disinterest, hopelessness or upset may have affected you during the last two weeks. During the last two weeks, about how often were you unable to carry out essential activities for daily living because of these feelings? (IF NEC: all of the time, most of the time, some of the time, a little of the time, or none of the time?)

The 10th (page: 63-69) and 11th (page: 70-73) provides information for learning about local perspectives on problems and coping to develop an appropriate MHPSS response.

The 12th (74-77) tool provides questions to be used in interviews with people who are severely affected by the humanitarian crisis, for example, because of direct exposure to major trauma or loss. This first question is for free listing. Free listing means asking an individual to provide as many answers to a single question as possible. It includes these questions:

- Could you list the problems you are currently experiencing because of the humanitarian situation? [WHEN THE PERSON STOPS LISTING PROBLEMS, YOU CAN PROBE WITH] What other problems are you currently experiencing because of the humanitarian situation? [WHEN THE PERSON AGAIN STOPS LISTING PROBLEMS, PROBE WITH] What else? What other problems are you currently experiencing because of the humanitarian situation?
I am especially interested in [INSERT ANY RELEVANT PSYCHOSOCIAL AND MENTAL HEALTH PROBLEMS MENTIONED ABOVE]. [FOR EACH PROBLEM OF INTEREST, ASK THE FOLLOWING QUESTIONS]

- Could you tell me how [INSERT PROBLEM] affects your daily life?
- Have you tried to find support for this problem?
- Could you describe how you have tried to deal with this problem? What did you do first? And after that?
- Have you received support from others in dealing with this problem?
- Who gave you this support?
- What kind of support did you get?
- To what extent did this help to deal with the problem?
- Do you feel you need additional support with this problem?

**Special Features (Validation, Language Options etc):** This manual is available only in English.

**Conclusions/Recommendations:** This toolkit has useful tables. The guide has 12 tools which are easy to use in the field. This guide provides an approach for selecting the right tools. For different situation you could select a few different tools and adapt them within each assessment project.

---

**Resource 3**

**Title:** Screening and Assessing Immigrant and Refugee Youth in School-Based Mental Health Programs

**Organization:** Center for Health and Health Care in Schools  [www.healthinschools.org](http://www.healthinschools.org)

**Year:** 2008

**Authors:** Dina Birman and Wing Yi Chan

**Source/Link:**
[https://www.rwjf.org/content/dam/farm/reports/issue_briefs/2008/rwjf29520](https://www.rwjf.org/content/dam/farm/reports/issue_briefs/2008/rwjf29520)

(Copyright©2008 This publication is protected by copyright and may not be reprinted without written permission from the Center for Health and Health Care in Schools.)

**Purpose of the Tool:** This document provides an overview of screening, identification, and assessment tools and processes that can be used by practitioners and researchers who care for immigrant and refugee youth.

**Description/Brief Summary:** This guide provides information about mental health needs, and gives information about existing scales and tools to screen school-aged children refugees and migrants (page: 14-21). It also gives information about efficacy and effectiveness of these tools (page: 7-9). Some of the assessment tools for youth population are:

- The Child and Adolescent Functional Assessment Scale (CAFAS)
- The Child & Adolescent Needs and Strengths (CANSMH)
This guide strongly emphasizes that:

- As a first step, and throughout the process, it is critical to involve consultants from the local immigrant/refugee community to help design the screening process and identify possible measures to use. Such consultants may be parents from the community, professionals or paraprofessionals who themselves have immigrated from the same country, as well as professionals knowledgeable about this community. Importantly, a team approach that includes a range of expertise is likely to provide the most information and result in the most culturally sensitive process.

- If translation is required, it is important to use the “decentering” procedure described earlier in the paper (Brislin, 1986). It is imperative that the resulting translations are discussed by a team including translators, members of the local ethnic community, and mental health professionals. Translators and consultants from the local community can help ensure that the translated measures are meaningful, appropriate, and acceptable to the target community. However translators who have also been trained in mental health are rarely available. Therefore involvement of mental health professionals on the team is essential to help assure that the translated and adapted measure continues to be valid, and capture the construct of interest.

**Special Features (Validation, Language Options etc):** This manual is available only in English.

**Conclusions/Recommendations:** One of the advantages about this document is its focus on the youth population. This guide clarifies when to use which tool for what purpose. This document offers an approach to assessment that should help professional care givers review information that is already available.

**Resource 4**

**Title:** Mental Health Screening Recommendations for Newly Arrived Refugees in Minnesota

**Organization:** Minnesota Department of Health Refugee Health Program

**Year:** 2014

**Authors:** Susan Dicker, Ann O’Fallon, Greg Vinson, Patricia Shannon

**Source/Link:**

**Purpose of the Tool:** This document provides screening questions for assessment

**Description/Brief Summary:** This tool is designed for developing a mental health screening process for newly arrived refugees. The members who make contribution to this Project included experts in refugee mental health, refugee screening clinicians, policy makers, and other professionals in the field of international health.

**Special Features (Validation, Language Options etc):** This manual is available only in English.
Conclusions/Recommendations: This guide provides information about recommended screening questions.

Resource 5

Title: Vulnerability Screening Tool

Organization: The UN Refugee Agency (UNHCR), International Detention Coalition, OAK Foundation
Year: 2016

Authors: The UN Refugee Agency (UNHCR), International Detention Coalition, OAK Foundation


Purpose of the Tool: The purpose of this tool is to identify situations of vulnerability, to encourage early intervention, effective care of individuals in need. Also it aims to reduce the presumption of detention and to encourage a consideration of placement options.

Description/Brief Summary: This tool is designed for health care workers and volunteers who works for refugees and asylum seekers. The explanation of vulnerability and the purpose and rationale of screening could be useful for decision makers. This tool gives information about vulnerability and how to assess this different situations and what we can do with different groups such as LGBTI persons or children.

Special Features (Validation, Language Options etc): This manual is available only in English.

Conclusions/Recommendations: This guide provides information about different situations can cause vulnerability and it also has a useful screening tool for vulnerability. This guide has useful communication tips for different groups.

For example for LGBTI persons it says:

It is important to avoid assumptions and to adopt inclusive language. Use non-gender specific terms; for example, ask: “Are you in a relationship?” rather than “Are you married?” and “What is your partner’s name?” rather than “What is your wife’s name?” In some situations it might be useful to enquire: “People identified as belonging to a sexual minority or as LGBTI may be at risk of danger... does this affect you or a member of your family?” A supportive response if and when someone does disclose is important; then explore: “What would keep you safe, and what support do you need?”

For elderly persons it says:

Is the elderly person separated from her/his family/primary carers? If so what assistance is required to restore family links?
• Does the elderly person have any physical signs of illness, neglect, injury, distress or cognitive impairment?
• Can you establish that the elderly person is safe and appropriately assisted (or independently able) to undertake day-to-day tasks as previously identified? Ask: “Do your older family members have any difficulty with day-to-day tasks? What support do you require to assist with these tasks?” Preferably, ask the elderly person directly.
• Is the elderly person’s accommodation appropriate given any specific needs?

Resource 6

Title: EASO Tool For Identification Of Persons With Special Needs

Organization: European Asylum Support Office

Year: 2016

Authors: European Asylum Support Office

Source/Link: https://ipsn.easo.europa.eu/easo-tool-identification-persons-special-needs

Purpose of the Tool: The primary objective of this tool is to facilitate the timely identification of persons with special procedural and/or reception needs. It may be used at any stage of the asylum procedure and at any stage of the reception process.

Description/Brief Summary: This is a easy to use tool for detecting different needs for different groups. With this tool you can select different needs just few clicks and with that it gives a detailed information for interview arrangements, post interview actions and how to conduct interview.

Special Features (Validation, Language Options etc): This manual is available only in English.

Conclusions/Recommendations: This guide provides information for different groups and different needs such as disabled people, elderly people etc.
Title: PROTECT- Questionnaire and Observations for Early Identification of Asylum Seekers Having Suffered Traumatic Experiences

Organization: Process of Recognition and Orientation of Torture Victims in European Countries to Facilitate Care and Treatment - EU Project

Year: Unspecified

Authors: PROTECT-ABLE EU PROJECT


Purpose of the Tool: The primary objective of this tool is to facilitate the early recognition of persons having suffered traumatic experiences, e.g. victims of torture, psychological, physical or sexual violence.

Description/Brief Summary: This is an easy to use tool for detecting traumatic events with 10 questions. And it gives the degree of risk for further actions.

Special Features (Validation, Language Options etc): This manual is available only in English.

Conclusions/Recommendations: This tool has 10 questions which are:
1. Do you often have problem falling asleep?
2. Do you often have nightmares?
3. Do you often suffer from headaches?
4. Do you often suffer from other physical pains?
5. Do you easily get angry?
6. Do you often think about painful past events?
7. Do you often feel scared or frightened?
8. Do you often forget things in your daily life?
9. Do you find yourself losing interest in things?
10. Do you often have trouble concentrating?

And with scoring these questions health care worker or volunteer can detect the risk of person and can easily select the person who should be referred to further medical examination.

Resource 8

Title: The Asylum Seekers’ Protection Indices (ASPIS) Form
Organization: The UN Refugee Agency (UNHCR)

Year: Unspecified

Authors: UNHCR- unspecified


Purpose of the Tool: This tool provides us a detailed questions to assess refugees and their psychical and mental wellbeing.

Description/Brief Summary: This is a easy to use tool for assessing the refugees with every aspect.

Special Features (Validation, Language Options etc): This manual is available only in English.

Conclusions/Recommendations: This tool has questions of 10 different sections such as:
1. External Circumstances
2. Family Constellation
3. Psychical Health
4. Psychological/ Psychiatric State
5. Community Connections
6. Wider society connections
7. Degree of Difference Between Home and Receiving Country
8. Type of Journey
9. Legal position
10. Daily Routine
And with scoring these questions health care worker or volunteer can have a better understanding of what the situation of the refugee really is.
INTERVENTION TOOLS FOR PSYCHOLOGICAL DISTRESS

IENE 6

Contemporary large migration waves into Europe: Enabling health workers to provide psychological support to migrants and refugees and develop strategies for dealing with their own emotional needs.

Intellectual Output 7
(Project number: 2016-1-UK01-KA202-024283)

Edited By:

Dr. Umit Tural
Dr. Ayse Dilara Yalcin
Dr. Firdevs Alioglu
Kocaeli University, Kocaeli, Turkey

January 2018

INTERVENTION TOOLS FOR HEALTHCARE PROFESSIONALS AND VOLUNTEERS

The interventions for refugees or in any other emergency settings occurs in different levels. The role of health-care providers extends beyond clinical care to advocacy for the overall well-being of people who need support across multiple sectors, as shown in the IASC Guidelines pyramid (cited in “Clinical Management of Mental, Neurological and Substance Use Conditions in Humanitarian Emergencies: mhGAP Humanitarian Intervention Guide”).
According to this pyramid, activating social networks (level 2) is one of the aims and expected results of IENE 6 project by designing a comprehensive knowledge hub for refugees and also health care providers dealing with refugees. As part of the “Intellectual Output 7: Psychological support tools and best practices” we aimed the focus on level 3&4.

Various specific professional treatments have shown some preliminary efficacy for common mental disorders in refugees. There is no standard of care for treatment of common mental disorders in refugees. Interventions that have shown efficacy in research studies include the following:

- Pharmacotherapy,
- Culturally-adapted psychotherapy for PSTD, depression, and anxiety,
- Psychological first aid,
- School-based education and trauma healing exercises for children,
- Multi-family disclosure, education, and support,
- Trauma disclosure and testimony therapy for adults and children,
- The use of lay-counselors for larger populations,
- Qigong and tai’chi,
- Dance and movement therapies.

In this writing, you can find several resources for conducting basic psychosocial support for refugees and also the general knowledge about other intervention methods used mostly by mental health professionals.

Resource 1&2

Title 1: Psychological First Aid: Guide for Field Workers
Title 2: Psychological First Aid: Facilitator’s Manual for Orienting Field Workers

Organization: World Health Organization (WHO)

Year: 2011

Authors: Leslie Snider (War Trauma Foundation, WTF), Mark van Ommeren (World Health Organization, WHO) and Alison Schafer (World Vision International, WVI).

Source/Link:  
http://apps.who.int/iris/bitstream/10665/102380/1/9789241548618_eng.pdf?ua=1

© World Health Organization 2011 All rights reserved. Publications of the World Health Organization are available on the WHO website (www.who.int).

Purpose of the Tool: These tools provide information about how to conduct and utilize PFA in a textbook format. One of them (the facilitator’s manual) has more descriptive group exercises and supporting materials inside.

Description/Brief Summary: These tools give detailed information about what is PFA and how it can be used. The three basic action principles of PFA are look, listen and link:
- **Look** » Check for safety. » Check for people with obvious urgent basic needs. » Check for people with serious distress reactions.
- **Listen** » Approach people who may need support. » Ask about people’s needs and concerns. » Listen to people, and help them to feel calm.
- **Link** » Help people address basic needs and access services. » Help people cope with problems. » Give information. » Connect people with loved ones and social support.

The guide for facilitator’s orientation aims to build the capacity of helpers in crisis situations. These aims are:
- To approach a situation safely, for themselves and others
- To say and do the most supportive things for very distressed people
- To NOT cause further harm by their actions.

The case scenarios and sample conversations could be adaptable and helpful for the health care professionals and volunteers when they are dealing with refugees. Also there are lots of group exercises, such as role-playings inside the facilitator’s manual for orienting field workers.

Special Features (Validation, Language Options etc): This manual is available in Arabic, Chinese, Dutch, English, Farsi, French, German, Greek, Japanese, Kiswahili, Korean, Portuguese, Romanian, Russian, Serbian, Sinhala, Slovenian, Spanish, Tamil, Turkish, and Urdu.

Conclusions/Recommendations: These resources could be useful for learning the basic principles of a psychological first aid and how to conduct a PFA.
Title: Psychological First Aid: Field Operations Guide 2nd Edition

Organization: National Child Traumatic Stress Network and National Center for PTSD

Year: 2006


Copyright © 2006 Brymer M, Jacobs A, Layne C, Pynoos R, Ruzek J, Steinberg A, Vernberg E, Watson P, (National Child Traumatic Stress Network and National Center for PTSD). All rights reserved. You are welcome to copy or redistribute this material in print or electronically provided the text is not modified, the authors and the National Child Traumatic Stress Network (NCTSN) and National Center for PTSD (NCPTSD) are cited in any use, and no fee is charged for copies of this publication.

Purpose of the Tool: This tool also provides information about how to conduct and utilize PFA in a textbook format.

Description/Brief Summary: The core actions mentioned inside the guide are:
- Contact and Engagement
- Safety and Comfort
- Stabilization
- Information Gathering: Current Needs and Concerns
- Practical Assistance
- Connection with Social Supports
- Information on Coping
- Linkage with Collaborative Services

Especially “information on coping” (Page: 77-92) is a comprehensive chapter to provide information about stress reactions and coping to reduce distress and promote adaptive functioning. There are many tips for parents including “responses” and “examples of things to do and say” in different reactions/behaviors after trauma. Some of these could be adaptable and useful for health care providers/volunteers dealing with refugees.

Special Features (Validation, Language Options etc): This manual is available in English, Spanish, Japanese, Chinese.

Conclusions/Recommendations: This resource could be helpful for health care providers and volunteers dealing with refugees to find examples of things to do and say in different reactions/behaviors after trauma.

Resource 4

Title: Clinical Management of Mental, Neurological and Substance Use Conditions in Humanitarian Emergencies: mhGAP Humanitarian Intervention Guide (mhGAP-HIG)
Purpose of the Tool: According to WHO and UNHCR; in every general health facility in humanitarian emergencies at least one supervised health care-staff member should be capable to assess and manage mental, neurological and substance use conditions. The mhGAP Humanitarian Intervention Guide is a simple, practical resource that aims to ensure this target.

Description/Brief Summary: This guide contains first-line management recommendations for mental, neurological and substance use conditions for non-specialist health-care providers in humanitarian emergencies where access to specialists and treatment options is limited.

The tool has brief modules on the assessment and management of:

- Acute Stress (Page: 13-16)
- Grief (Page: 17-20)
- Moderate-severe Depressive Disorder (Page: 21-26)
- Post-traumatic Stress Disorder (PTSD) (Page: 27-30)
- Psychosis (Page: 31-34)
- Epilepsy/Seizures (Page: 35-40)
- Intellectual Disability (Page: 41-44)
- Harmful Use of Alcohol and Drugs (Page: 45-48)
- Suicide (Page: 49-52)
- Other Significant Mental Health Complaints (Page: 53-55)

This guide provides the basic management principles of these conditions, including their psychoeducation and basic pharmacological interventions. It also defines necessary referrings for further interventions like specific psychotherapies given by health care professionals.

Special Features (Validation, Language Options etc): This manual is available in Arabic, English, French, Russian, Spanish and Ukrainian.

Conclusions/Recommendations: This resource could be useful for health care providers dealing with refugees for learning the basic intervention methods.
Purpose of the Tool: This tool is a refugee suicide prevention toolkit.

Description/Brief Summary:

Responding to suicide within refugee communities can take the form of prevention or direct intervention.

**Prevention:** Working broadly in a community to decrease risk factors and promote protective factors can help prevent risk for suicide across whole refugee communities. For instance, finding ways to promote social connection and a sense of belonging, connecting refugees with employment and language resources, and conveying a sense of hope that things will become easier may all be important ways to reduce the risk for suicide.

**Targeted Intervention:** For individuals who are most at risk for suicide, specific steps can be taken to help them through the typically brief period where they are at risk for attempting suicide. Certain warning signs may be present in those most at risk for suicide, such as:

- Making statements that life is not worth living
- Making statements that they will not be around in the future
- Behaving in unexpected and unusual ways
- ‘Saying goodbye’ to loved ones

There may also be culture-specific warning signs that someone is considering suicide. Members of refugee communities are important resources in helping to identify cultural expressions of distress and despair within specific cultural groups.

If an individual seems to be considering or at risk for suicide, targeted intervention can include:

- Asking whether someone is considering suicide
- Referring someone to treatment and/or helping them to call a suicide hotline
- Asking about what is upsetting them and trying to offer a sense of hope
- Staying connected to the person and helping him/her to connect to other people and helpers
The toolkit contains a self-study webinar, a facilitator’s manual and external links of other websites & resources on refugees. Also there are many helpful role play exercises inside the manual.

**Special Features (Validation, Language Options etc):** This website is available only in English.

**Conclusions/Recommendations:** This website is a useful resource for the health care providers dealing with refugees because it presents mental health facts of refugees and gives general information about psychological intervention methods. It also gives external links to screening and assessment tools and a refugee suicide prevention toolkit. There are also several webinars about refugee’s mental health.

### Resource 6

**Title:** Addressing Depression in Muslim Communities

- BA-M Treatment Manual
- Self-Help Booklet “One step at a time”

**Organization:** Leeds Institute of Health Sciences, Faculty of Medicine and Health

**Year:** 2012

**Authors:** Ghazala Mir, Jonathan Kanter, Shaista Meer (BA-M Treatment Manual); Mohammad Shabbir, Ghazala Mir, Shaista Meer, Wali Wardak (Self-Help Booklet “One step at a time”)

**Source/Link:**
- [Europe/London](http://medhealth.leeds.ac.uk/info/615/research/327/addressing_depression_in_muslim_communities)

**Purpose of the Tool:** The aim is to fill the gap in knowledge about how best to address the needs of Muslim service users with depression through:

- Adapting a mental health therapy called Behavioural Activation, combining existing approaches with evidence from existing research and practice to produce a guidance manual for practitioners
- Gathering feedback on how acceptable and useful Muslim service users and their therapists find the guidance and using this to further improve the manual
- Outlining in detail important principles and effective methods for treating Muslim service users from a variety of ethnic backgrounds.

**Description/Brief Summary:**

BA-M Treatment Manual contains session plans for delivering BA-M therapy include references to sections later in the manual that the therapist will need to read and understand in order to engage appropriately with Muslim clients, particularly those for whom religion is important.
Self-Help Booklet “One step at a time” could be helpful for the refugees use either with their therapist or on their own. It includes basic information about Islam and some teachings that you could be useful.

**Special Features (Validation, Language Options etc):** This manual is available in Arabic, English, and Urdu.

**Conclusions/Recommendations:** This resource could be useful for health care providers dealing with Muslim refugees with depression. It combines the behavioral activation therapy method with the relief of religion.
TOOLS FOR SELF HELP FOR HEALTH WORKERS AND VOLUNTEERS

IENCE 6
Contemporary large migration waves into Europe: Enabling health workers to provide psychological support to migrants and refugees and develop strategies for dealing with their own emotional needs.

Intellectual Output 7
(Project number: 2016-1-UK01-KA202-024283)

Edited By:
Prof. Dr. Umit Tural
Ayse Dilara Yalcin
Firdevs Alioglu
Kocaeli University, Kocaeli, Turkey

January 2018
Resource 1

Title: UNHCR’s Mental Health and Psychological Support for Staff

Organization: The UN Refugee Agency (UNHCR)

Year: 2013

Authors: Courtney E. Welton-Mitchell, Ph.D. Asst. Professor, Graduate School of Professional Psychology International Disaster Psychology, University of Denver


(© United Nations High Commissioner for Refugees Policy Development & Evaluation Service Geneve, July 2013 This document is for general distribution. All rights reserved. Reproductions and translations are authorised, except for commercial purposes, provided the source is acknowledged.)

Purpose of the Tool: This is a tool designed for evaluating mental health conditions and psychosocial support needs of humanitarian staff. It is also a tool created for raising awareness for institutional responses intended to mitigate distress and enhance resilience of humanitarian staff in response to stressors encountered during the course of providing humanitarian assistance.

Description/Brief Summary: The tool gives a detailed report of UNHCR’s current mental health and psychosocial programs and policies for humanitarian staff and how these compare to recognized frameworks. Also it contains the knowledge of current mental health needs and concerns of UNHCR staff and how these are being addressed. It could be very useful for collecting the principles of self-help guides&tools from an international and professional organisation’s perspective. There are recommendations for ensuring appropriate response and follow up for survivors of critical incidents, for increasing availability and utilization of formal mental health and psychosocial support and for encouraging informal social support among staff. Many useful external links of self-help tools for staff are given in the related chapters, such as:


Mobile PFA phone apps (https://www.ptsd.va.gov/professional/pages/pfa_mobile_app.asp)

Various free online training courses including ones on secondary stress and vicarious trauma for humanitarian workers (http://headington-institute.org/?tabid=2258)

Self assessment tools (https://ecouch.anu.edu.au/welcome)

Overall the tables of “Management response to the UNHCR’S Mental Health and Psychosocial Support of Staff (MHPSS) evaluation” is a good summary for action plans and recommendations.
Special Features (Validation, Language Options etc): This manual is available only in English.

Conclusions/Recommendations: This resource could be useful for framing the mental health and psychological support issues for the health care professionals and volunteers dealing with refugees and their wellbeing from an organisational perspective of UNHCR’s. It could give a good start to conducting and structuring the necessary actions for psychological support for staff with the summarising tables of “what to do’s” and also with the external links for PFAs, online training courses specialised for humanitarian staff and self assessment tools.

Resource 2

Title: UNHCR Emergency Handbook: Staff Wellbeing

Subtitle: Coping with Stress

Organization: The UN Refugee Agency (UNHCR)

Year: 2015

Authors: This document forms part of the 4th edition of the UNHCR Emergency Handbook and was generated from the digital Emergency Handbook system.

Source/Link: https://emergency.unhcr.org/entry/34516/coping-with-stress

Purpose of the Tool: This tool is specifically created for the use of humanitarian staff when they need to cope with chronic stress.

Description/Brief Summary: The tool gives brief key points for coping with stress that could be helpful for the health care professionals, service providers and volunteers dealing with refugees.

These key points are:
- Know what you are trying to do in every situation. This helps you to remain constructive when you face problems.
- Engage in something other than work every day. This helps you to stay mentally fit.
- Call or skype home. Write a letter if telephone lines are poor or internet is too slow for Skype. This helps you to be who you are.
- Create opportunities for extended sleep (at least 6 hours). Make every effort to eat good food. Drink water rather than alcohol or sweetened soft drinks. This helps you to remain balanced.
- Do not drink excessively to unwind or relax. Practice breathing or other relaxing exercises instead.

There are given good practice recommendations, considerations for practical informations such as:
- Think regularly about things other than work: this injunction is common to all methods of building resilience.
- Avoid talking about work with your colleagues after work. Do not become your work.
- Keep in regular contact with home and friends (by skype or e-mail). They will remind you that there is a world outside your duty station.
- Find an understanding soul in your duty station and talk about what matters (emotions, meaning, life choices).
- Write your thoughts in a stream of consciousness every evening. It has been shown that this technique improves the quality of sleep and reduces the impact of cumulative stress.
- Do a mindfulness breathing exercise every morning. This is an alternative to the stream of consciousness exercise and also improves the quality of sleep. If practised in the morning, it improves attention, emotional control and mental discipline in general.
- Take physical exercise or do yoga. These activities rebalance your hormones and drain toxic metabolic agents.
- If you have hobbies, practise them: do them every day if the environment permits.
- Read literature rather than watch TV. Television rarely engages your mind as much as literature.

The tool also provides useful external links such as:

A site dedicated to the mental health of humanitarian workers: http://www.headington-institute.org/

This covers a broad range of health subjects, including mental health, in a user friendly way:
https://www.helpguide.org/
https://www.helpguide.org/articles/ptsd-trauma/helping-someone-with-ptsd.htm

A site dedicated to raising self-awareness:
http://www.pathwaytohappiness.com/

A site developed by colleagues which demonstrates yoga and other stress management exercises in a typical guest-house setting:
https://emergencyoga.com/

**Special Features (Validation, Language Options etc):** This manual is available in English and French.

**Conclusions/Recommendations:** This resource could be helpful for learning basic coping stress methods.

---

**Resource 3**

**Title:** UNHCR Emergency Handbook: Staff Wellbeing

**Subtitle:** Dealing with Critical Incidents and Trauma (Staff)

**Organization:** The UN Refugee Agency (UNHCR)

**Year:** 2015

**Authors:** This document forms part of the 4th edition of the UNHCR Emergency Handbook and was generated from the digital Emergency Handbook system.
Purpose of the Tool: This tool is specifically created for the use of humanitarian staff if they went through a traumatic event. It provides information about recognising acute stress reaction and when to seek further psychological help.

Description/Brief Summary: The tool provides knowledge and recommendations that could be helpful for the health care professionals and volunteers dealing with refugees when they faced a critical accident, a traumatic event or if they were in a position to give a hand for a colleague who had a trauma and needed help. The tool gives basic key points for the traumatized staff such as:

- Seek safety and support.
- Be in contact with your family and friends.
- Check symptoms (acute stress reactions).
- Contact the staff welfare section.

Good practice recommendations are given and considerations for practical information such as:

Taking care of yourself after a critical incident

- Expect the incident to bother you.
- Expect to feel guilty: be gentle with yourself.
- Remind yourself that your reactions are normal.
- Learn as much as possible about acute stress reaction.
- Get plenty of sleep and rest.
- Spend time with trusted family members, friends and colleagues. Talk with them about the event. Talk about your immediate reactions as the incident was unfolding, particularly your thoughts and feelings.
- As much as possible, try to follow your routines and eat a balanced diet.
- Practice stress management and relaxation techniques, do physical activities, play music, read.
- Attend group debriefings and informational update meetings unless these deeply disturb you.
- Minimize use of alcohol, nicotine, caffeine, other drugs, and sugar.
- Contact staff welfare or visit a mental health professional.

Taking care of others (for managers and colleagues)

- Comfort and console the distressed person.
- Protect him or her from further threats or distress. Protect him or her from the media, onlookers, insensitive colleagues, and emergency workers.
- Meet his or her immediate physical needs and provide practical help.
- Facilitate social support. Provide access to a phone, contact supportive friends and family.
- Listen actively and supportively if he or she wishes to talk about the experience. If he or she does not wish to talk, respect his or her decision.
- Offer access to information, including information about the event. (What happened? Who was affected? How seriously? Where are they now?)
- Try to ground the person. Help him or her to identify specific goals, break tasks down into manageable sub-tasks, encourage a return to routine. At the same time, advise him or her not to undertake a heavy workload, take on demanding tasks, or work long hours, because this will impede the natural healing process.
- Assist him or her to find sources of help and support. Offer access to professional counselling.

The tool also provides useful external links such as:

Relaxation Techniques for Stress Relief:  
https://cms.emergency.unhcr.org/documents/11982/34619/Relaxation+Techniques+for+Stress+Relief/3b3ae17a-2dbf-4cc4-b2b8-569c805bd379

Self Care during Deployment:  
https://cms.emergency.unhcr.org/documents/11982/34619/Self+Care+during+Deployment/3ead8e45-2712-42be-b3b8-62a4ec8390df

Stress Symptom Scale:  
https://cms.emergency.unhcr.org/documents/11982/34619/Stress+Symptom+Scale/67ba906b-8b88-4ed9-b8ce-71eb51df170b

Stress Management Textbook:  
https://cms.emergency.unhcr.org/documents/11982/34619/Stress+Management+textbook/444b08a2-2a23-48ba-a527-79fd8640092e

Special Features (Validation, Language Options etc): This manual is available in English and French.

Conclusions/Recommendations: This resource could be helpful for health care professionals and volunteers for recognising the acute stress reactions after a traumatic event and learning how to take care of themselves and also their colleagues after a critical incident or trauma.
Purpose of the Tool: This tool provides information about how to conduct and utilize PFA in a textbook format.

Description/Brief Summary: The tool involves a chapter called “Caring for yourself and your colleagues” (Page: 37-40) that gives basic recommendations for health care professionals and volunteers.

Special Features (Validation, Language Options etc): This manual is available in Arabic, Chinese, Dutch, English, Farsi, French, German, Greek, Japanese, Kiswahili, Korean, Portuguese, Romanian, Russian, Serbian, Sinhala, Slovenian, Spanish, Tamil, Turkish, and Urdu.

Conclusions/Recommendations: This resource could be useful for the health care professionals and volunteers to give the best help to the refugees while maintaining their own psychological wellbeing.

Resource 5

Title: USAID Staff Care Program Website

Subtitles: (Selected few)
- Stress Management Tips
- The Resilience Factor in Staff Care

Organization: United States Agency for International Development (USAID)

Year: Unspecified

Authors: Dr. Nancy Good USAID Staff Care Center, Training and Organizational Resilience Advisor (for the text “The Resilience Factor in Staff Care”).
Material Used with permission from The KonTerra Group (for the text “Stress Management Tips”).

Source/Link:
https://staffcare.usaid.gov/
http://konterragroup.net/usaid/resources/

Purpose of the Tool: This website presents a variety of external links to self help manuals, self assessment tools and also brief interventions/recommendations of specialised conditions for the use of humanitarian staff.

Description/Brief Summary: Selected useful external links from the website are shown below:

Stress Management Tips

The Resilience Factor in Staff Care
Stress and Coping: A Crash Course

Coping with Grief and Loss

Compassion Fatigue

Sleep Hygiene: Good Sleep Habits

Special Features (Validation, Language Options etc): This website is available only in English.

Conclusions/Recommendations: This website has a rich list of external links which could be helpful for the health care professionals and volunteers when they need psychological support for themselves and also when they were helping refugees.

---

Resource 6

Title: The Road to Resilience

Organization: American Psychological Association (APA)

Year: Unspecified

Authors: Lillian Comas-Diaz, PhD, Director, Transcultural Mental Health Institute, Washington DC, Suniya S. Luthar, PhD, Teachers College, Columbia University, New York City, N.Y., Salvatore R. Maddi, PhD, The Hardiness Institute, Inc., University of California at Irvine, Newport Beach, Calif., H. Katherine (Kit) O’Neill, PhD, North Dakota State University and Knowlton, O’Neill and Associates, Fargo, N.D., Karen W. Saakvitne, PhD, Traumatic Stress Institute/Center for Adult & Adolescent Psychotherapy, South Windsor, Conn., Richard Glenn Tedeschi, PhD, Department of Psychology, University of North Carolina at Charlotte.

Source/Link:

The full text of articles from APA Help Center may be reproduced and distributed for noncommercial purposes with credit given to the American Psychological Association.

Purpose of the Tool: This tool contains information within describes resilience and some factors that affect how people deal with hardship. Much of this brochure focuses on developing and using a personal strategy for enhancing resilience.

Description/Brief Summary: The tool introduces what resilience is and which factors contributes to resilience. The strategies for building resilience and other recommendations are also described briefly in this tool.

“10 ways to build resilience”
• Make connections
- Avoid seeing crises as insurmountable problems
- Accept that change is a part of living
- Move toward your goals
- Take decisive actions
- Look for opportunities for self-discovery
- Nurture a positive view of yourself
- Keep things in perspective
- Maintain a hopeful Outlook
- Take care of yourself
- Additional ways of strengthening resilience may be helpful

**Special Features (Validation, Language Options etc):** This manual is available in English and Spanish.

**Conclusions/Recommendations:** This resource could be helpful for the health care professionals and volunteers dealing with refugees to learn about the concept of “resilience” and how to enhance it.