

Basic Psychosocial Skills

A Guide for COVID-19 Responders



Espe

Translations

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COVID-19 specific icons used in this guide are OCHA humanitarian COVID-19 icons. The whole array of icons include symbols for lockdown, physical distancing, COVID-19 and coronavirus, infection prevention, testing, infected and not infected, and case management. They can be found at <https://www.unocha.org/story/ocha-releases-humanitarian-icons-help-covid-19-response>.



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Introduction

Basic psychosocial support skills are at the core of any Mental Health and Psychosocial Support (MHPSS) intervention. Such skills are also indispensable for many others involved in the COVID-19 response, whether they identify as an MHPSS provider or not. Thus, this guide is meant for all COVID-19 responders.

This Basic Psychosocial Skills Guide is a project by the Inter-Agency Standing Committee Reference Group on Mental Health and Psychosocial Support in Emergency Settings. The project was supported by member agencies of the IASC MHPSS RG, with extensive inputs from COVID-19 survivors and COVID-19 responders from all sectors in the following countries: Australia, Bangladesh, Bulgaria, Bolivia, Canada, Denmark, Democratic Republic of Congo, Egypt, Ethiopia, Greece, India, Iraq, Italy, Jamaica, Kenya, Laos, Liberia, Morocco, Myanmar, Netherlands, Philippines, Portugal, Rwanda, South Africa, Spain, Sri Lanka, Sweden, Switzerland, Syria, Uganda, UK, USA. They all responded to a survey to help us draft this guide and make it more relevant to their mental health and psychosocial needs. The initial draft was then opened up to further feedback from COVID-19 survivors and COVID-19 responders through review and additional in-depth interviews. The final guide incorporates this feedback.

A big thank you to these responders - who include food supply, distribution, law enforcement, health professionals, protection actors, transportation workers, managers and others - for completing our surveys and influencing this guide. This is a guide developed for and by responders around the world. The IASC MHPSS RG acknowledges Espe for his illustrations in this publication.

We hope that this guide will help to orient responders from different countries, from different sectors, on how to integrate psychosocial support into their daily COVID-19 responses and how to make a difference in well-being of people they communicate with during the COVID-19 pandemic.

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Is this for me?

Are you performing a critical function during the COVID-19 pandemic?
Is your work essential to the survival of people affected by COVID-19?
Or to keep systems and services functioning for the benefit of everyone?
If yes, then this information is for you!

You may work...

as a health professional, e.g. a doctor, nurse, counsellor; or a social worker or case manager



as a first responder, e.g. law enforcement officer, ambulance driver or firefighter



in food supply or preparation, in a pharmacy or in funeral work, transportation, government, utilities or sanitation



in supporting loved ones or friends, or vulnerable people in your community



as a supervisor or manager supporting staff or volunteers.



Why is this information important?

Most people will feel stressed during the COVID-19 pandemic. Supporting the emotional well-being of others during this challenging time is important.^{1,2,3} **You can make a difference to the well-being of people through how you interact and communicate during the COVID-19 response**, even if the interaction is only brief.

The information in this guide can be used to support anyone during the COVID-19 pandemic: people who have COVID-19, have lost someone to COVID-19, are caring for someone with COVID-19, have recovered from COVID-19 or are affected by restrictions.

What will I learn?

Basic psychosocial skills are at the core of helping others to feel better. In this guide, you will learn how to use these skills to look after yourself and how to help others feel supported through your interactions.

1 IASC (2020) Briefing note on addressing mental health and psychosocial aspects of COVID-19 outbreak. <https://interagencystandingcommittee.org/system/files/2020-03/MHPSS%20COVID19%20Briefing%20Note%202020March%202020-English.pdf>

2 WHO (2020) Clinical management of severe acute respiratory infection when COVID-19 is suspected. [https://www.who.int/publications-detail/clinical-management-of-severe-acute-respiratory-infection-when-novel-coronavirus-\(ncov\)-infection-is-suspected](https://www.who.int/publications-detail/clinical-management-of-severe-acute-respiratory-infection-when-novel-coronavirus-(ncov)-infection-is-suspected)

3 WHO (2012) mhGAP Evidence Resource Centre. https://www.who.int/mental_health/mhgap/evidence/other_disorders/q6/en/

Module 1

Your well-being

Looking after yourself and team members while working in the COVID-19 response **is not a luxury, it is a responsibility.** This section is about how you can best look after yourself, for your own well-being and to best help others.

There is no response without you

You are an essential part of the COVID-19 response.

It can feel rewarding to know that you are making a difference.



It is likely that **you are facing many new demands.** You may:

- have longer working hours, without adequate resources or protection
- have to deal with COVID-19-related stigma and discrimination
- fear for your own and loved ones' safety and well-being
- be confronted with illness, suffering or death
- have to care for family members or be in quarantine, or
- find that the stories of those you help remain with you after work.

Many people will feel stressed and exhausted while working in the COVID-19 response. This is natural given the difficult demands. Everyone reacts differently to stress. You may experience some of the following:

- physical symptoms: headaches, difficulty sleeping and eating
- behavioural symptoms: low motivation to work, increased use of alcohol or drugs, disengaging from religious/spiritual practices
- emotional symptoms: fear, sadness, anger.

If stress is consistently stopping you from doing your daily activities (e.g. going to work) then seek professional support.



Can you identify your own signs of stress? Think of three things you can regularly do to support your well-being.



In the same way that a car needs fuel to drive, you need to look after yourself and keep your tank "full" so you can keep going. **Helping in the COVID-19 response is a long-distance race, not a sprint,** so pay attention daily to your well-being.

Looking after yourself

Try as far as possible to act on some of the suggestions below to help you manage stress on a daily basis. Choose those that work best for you personally. If you do not manage to do this one day, be kind to yourself and try again the next day.

1 Stay up to date with accurate information about COVID-19 and follow safety measures to prevent infection. Take “breaks” from COVID-19 media when needed.

2 Eat well, get enough sleep and exercise physically every day.

3 Do an activity you enjoy or find meaningful every day (e.g. art, reading, prayers, talking to a friend).

4 Take five minutes out of your day to talk to a friend, family member or other trusted person about how you are feeling.

5 Talk to your manager, supervisor or colleagues about your well-being at work, particularly if you are worried about working in the COVID-19 response.

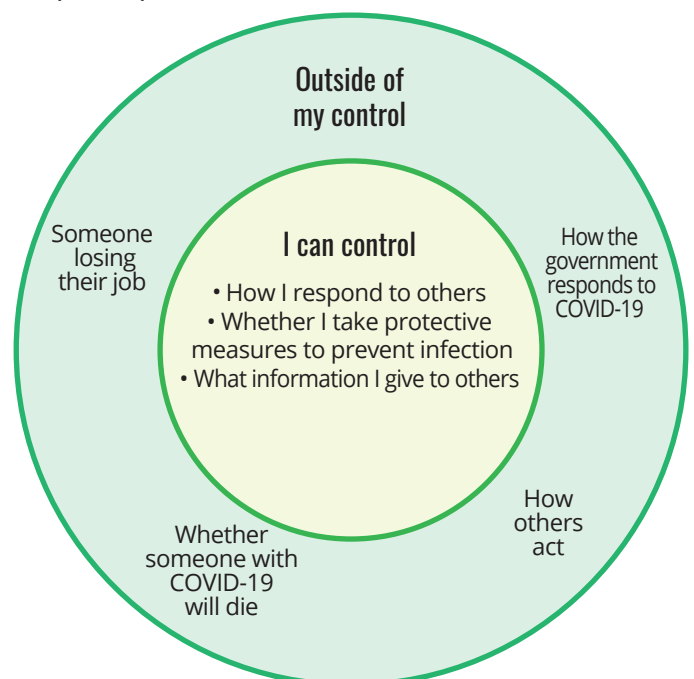
6 Establish daily routines and stick to them (see the daily routine planner in Annex B).

7 Minimize your use of alcohol, drugs, caffeine or nicotine. These might seem to help in the short term, but they can lead to lower mood, anxiety, difficulty sleeping and even aggression as the effects wear off. If you are consuming too much of any of these substances, you can cut down by reducing the amount available in your house and finding other ways to manage stress, such as those mentioned here.

8 At the end of each day, make a short list (in your head or on paper) of ways you were able to help others or **things you are grateful for**, such as “I helped by being kind to someone who was upset” or “I’m grateful for support from my friend”.

9 Be realistic about what you can and cannot control. Visualizing circles of control may help with this. An example of a worker’s circle of control is below, and you can fill out your own in Annex C.

If you are feeling powerless to help others, it can be helpful to identify those problems you can do something about and those you cannot. Forgive and be gentle with yourself if you are unable to help in a particular situation.



10 Try an activity to relax – see what works for you. You may already have some activities you use now or have used in the past. You can also try:

- slow breathing (see the instructions on page 14);
- stretching, dancing, praying or doing yoga;
- progressive muscle relaxation (see instructions in Annex D).



Managers and supervisors: Information for supporting your team can be found in Annex A.

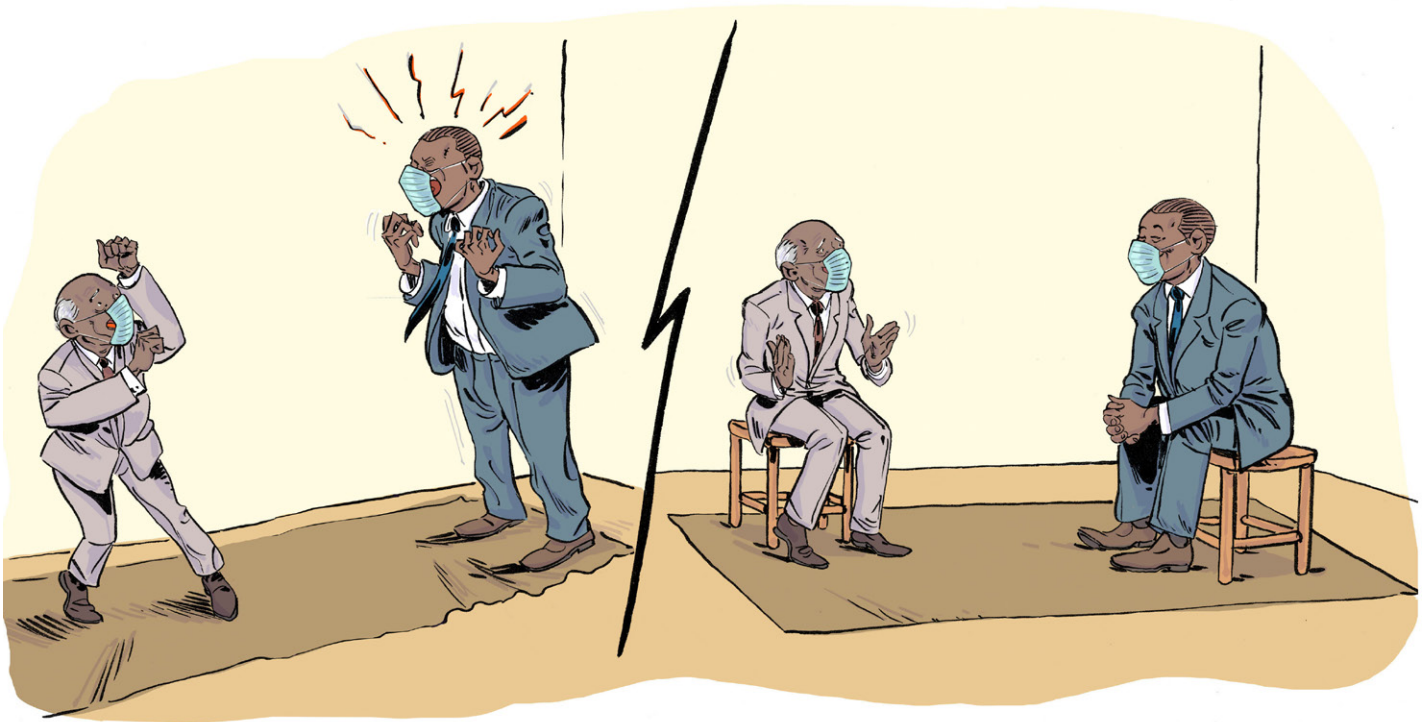
Patrick's case

Patrick enjoys his work as a community leader. However, during the COVID-19 crisis, many community members have lost their jobs and are unable to eat. There are rumours spreading that COVID-19 is not real but a hoax. People started calling Patrick, asking for help and for money.

Patrick found himself working long hours listening to community members' problems. He felt powerless and confused about how best to help. He even lost his temper with one person. He realised that he must do something to look after himself.

Patrick made a routine. He put time aside to be with his family and take a walk every day. He made a "control circle" and realised that he could not compensate for people's lost salaries, so he thought about ways he could kindly explain this to others if they asked. He also identified ways in which he could support others: **listening and helping people to support each other.**

After a week, Patrick felt more relaxed, was able to speak respectfully to community members and was able to do his job effectively for a longer period of time.



Further self and team care resources

You can read and learn more about self-care in these resources

Psychological First Aid

PFA Guide for Field Workers (WHO, WTF and WVI, 2011), in multiple languages
<https://bit.ly/2VejUX7>

Remote PFA during the COVID-19 outbreak, interim guidance (IFRC Reference Centre for Psychosocial Support, March 2020) <https://bit.ly/2RK9BNh>

One-pager on coping with stress in COVID-19 (WHO)

Easy-to-read infographics
<https://bit.ly/2VfBfUe>

14-day Well-being Diary

Interactive and creative calendar to set up your own coping strategies

<https://bit.ly/3aeypmH>

Social Stigma associated with COVID-19

A guide to preventing and addressing social stigma (IFRC, UNICEF, WHO)

<https://bit.ly/3czCZh5>

Doing What Matters in Times of Stress: An Illustrated Guide (WHO)

An easy to read illustrated guide with information and skills to help manage stress. Techniques can be easily applied in a few minutes each day <https://bit.ly/3ajSdib>

Module 2

Supportive communication in everyday interactions

The COVID-19 pandemic is stressful and will cause many people to feel isolated, scared and confused. Everyday interactions can be used to support others and can transform the well-being of those around you.

How you present yourself in everyday interactions (tone of voice, posture, introductions) can affect how people:

- **See you:** whether they trust you, like you.
- **Respond to you:** whether they follow your advice, become aggressive, are calm, open up to you for support.
- **Recover:** the more supported someone feels the better their physical and emotional recovery will be.

Supporting others to feel comfortable with you

For a person to feel supported by you, they first need to trust you and feel comfortable with you.

Even when someone appears aggressive or confused, you can communicate more effectively (and potentially reduce a tense situation) by approaching them in a kind and respectful way. Suggested “do’s” and “don’ts” are set out below – be sure to adapt them for your own cultural context.



Think about a time when you felt supported by someone who you just met. How did they speak to you? How did they hold themselves physically?

Do	Don't
Keep an open, relaxed posture	Don't cross your arms
Look at the person	Don't look away, down at the floor or at your phone
Use culturally appropriate eye contact to support the person to feel relaxed and heard	Don't use culturally inappropriate eye contact, e.g. don't stare at the person
Clearly introduce yourself – your name and role	Don't assume that the person knows who you are or what your role is in the response
Maintain a calm and soft tone of voice with a moderate volume	Don't shout or speak very quickly
If the person cannot see your face, try to have a photo of yourself attached onto your clothing (e.g. if you are wearing personal protective equipment such as a mask)	Don't assume that the person knows what you look like if you are wearing personal protective equipment (e.g. mask).
Confirm that they are comfortable speaking with you, e.g. “Are you comfortable speaking to me (a man)? If you would like to speak to a woman, I can arrange for my colleague to speak with you”	Don't assume that the person is comfortable speaking to you
If someone speaks a different language from you, try to access an interpreter (or family member) and to reassure them	Don't assume that the person speaks the same language as you
Maintain physical distance to reduce COVID-19 infection and explain why, e.g. meet in a large room, through a screen or over the phone	Don't put yourself or others at risk of COVID-19 infection by ignoring physical distancing rules

David's case

David works in a small community shop, and many people depend on him for their groceries. When people come into the shop, David stands behind the counter with his shoulders relaxed and his arms comfortably open, makes eye contact with people as they come in and says “Hello” with a smile. Many people tell David that his open attitude makes such a difference in these difficult times and helps them feel a little less isolated.



Supporting others with active listening

Listening is the most essential part of supportive communication. Rather than immediately offering advice, allow people to speak in their own time and listen carefully so that you can truly understand their situation and needs, help them feel calm and be able to offer appropriate help that is useful to them. Learn to listen with your:



Be aware of both your **words** and your **body language**.

Words Use supportive phrases to show empathy (“I understand what you are saying”) and acknowledge any losses or difficult feelings that the person shares (“I am so sorry to hear that”, “That sounds like a tough situation”).

Body language Includes your facial expressions, eye contact, gestures and the way you sit or stand in relation to the other person.

Be sure to speak and behave in ways that are appropriate and respectful, according to the person’s culture, age, gender and religion. **Do not pressure the person to speak if they do not want to.**

Asma’s case

Asma is a nurse working in a community health centre. One of her patients, Fatima, has COVID-19. Fatima tells Asma that she misses her family, and is scared that she may become more unwell. Asma puts down her notepad to show she is giving Fatima attention, sits down and looks Fatima in the eye as she speaks. Asma nods her head and says “This is such a tough situation”, “I can understand that you miss your family”, “It must be hard not being able to see them”. Later, Fatima tells Asma, “Thank you for listening, I no longer feel alone as you gave me your time and attention.”



When communicating remotely (e.g. over the telephone):

- If talking about a sensitive subject, make sure that the person is able to speak, e.g. *“I’m calling to speak to you about your health concern. Are you able to speak freely at this time? You can answer simply yes or no.”*
- Clarify any miscommunications or misunderstandings, e.g. *“It’s different now we are talking over the phone, and I wasn’t quite sure what you meant when you said... can you explain further?”*
- Allow for pauses when the person stays silent.
- Make helpful comments to normalize silence such as *“It’s ok, take your time”, “I’m here when you want to talk”, etc.*
- Try to minimize disruptions, e.g. *“I am having trouble hearing you, would it be possible for you to move to a quieter area?”* Make sure that you are in a **quiet area** when calling others.
- If possible, support the person to both see and hear you when talking. For example, if there is a window, speak to them on the phone outside their window so they can see you, or if it is available you can try to use video calling software.

Active listening is a technique to help you listen well and communicate supportively. It involves 3 steps:



Listen attentively

- Really try to understand the person's point of view and feelings.
- Let them talk; remain quiet until they have finished.
- Block out distractions – is it noisy around? Can you go somewhere quieter? Can you calm your mind and focus on the person and what they are saying?
- Be warm, open and relaxed in the way you present yourself.



Repeat

- Repeat messages and key words the person has said, e.g. "You say looking after your children while working can be overwhelming."
- Ask for clarification if there is something you didn't understand, e.g. "I didn't quite understand what you said just then, could you please explain again?"



Summarize at the end what you have understood

- Identify and reflect key points you heard the person say, so that they know you have heard them and to be sure you have understood them correctly, e.g. "From what you have just said, I understand that you are mainly worried about [summarize main concerns they have expressed], is that correct?"
- Describe what you have heard, rather than interpreting how they feel about the situation (e.g. don't say: "You must feel horrible/devastated"). Don't judge them or their situation.

Precious' Case

Precious, a worker in a funeral parlour, was able to use active listening to support Grace:

Grace: Hi, I need to arrange a funeral for my brother who has... [sobs]

Precious: It's okay, take your time. It sounds like you are having a difficult time.

[10 seconds of silence]

Grace: Okay, I am here. Yes, thank you. It's so hard – I can't believe this has happened.

Precious: I can hear how upsetting this is for you.

Grace: I just don't want this to be real.

Precious: Mmhmm, I am here, listening.

Grace: I loved my brother so much – we were tight. He was my best friend. And today he passed away.

Precious: It sounds like your brother was very important to you – your best friend.

Grace: Yes, he was my best friend... it's so tough... I remember all the fun times we had together [laughs a little].

Precious: I am hearing that you are also remembering the fun times too.

Grace: Yes, it makes me smile to think of the fun times. Thank you, my dear, you have really helped me feel better.

Precious: Of course, I am happy to support in these tough times.

Grace: I am now ready to discuss what can be done about the funeral arrangements.



Module 3

Offering practical support

People affected by the COVID-19 pandemic may have needs such as:



Information related to COVID-19 (e.g. symptoms, access to treatment, how to care for others, how to keep themselves safe, updates for the local area, impact on work).



Accessing food, other essential items and essential services due to physical distancing and loss of income.



Access to alternative burial rituals when someone has died.



Ways to ensure that dependants (e.g. children) are looked after if the main caregiver is in hospital or isolation.

Offering information or basic items yourself

Providing information:

Misinformation and rumours are common during the COVID-19 pandemic. To provide clear and accurate information:

- Use clear, concise language that will be easily understood. Be sure to use words that are age and developmentally appropriate. Avoid any jargon or technical language.
- Provide information from reputable sources, such as the World Health Organization.
- Try to have written materials in relevant languages with visual aids.
- When needed, have a translator present.
- If you do not know something, be honest about this rather than trying to guess.

Providing basic items or services:

You may be able to offer basic items or services yourself, like food, water or going shopping for others. However, don't feel that you have to provide all these. Be aware of what is possible for you.

Priya and Deepak's case

Priya lives in a crowded community. One of her neighbours, Deepak, is an elderly man who lives by himself. Priya telephones him and asks how he is doing. Deepak says he has not been able to get outside to buy the medicine he normally takes for his hypertension. Priya goes to buy food every week and suggests that she could go to the pharmacy and buy Deepak's medicine too. They decide on a safe place just outside Deepak's door where he can leave money and Priya can leave the medicine. In that way, they do not have to come into physical contact.



Linking to others providing practical support

To effectively link to other service providers, make a list of all the organizations operating in your area and how to access them (fill in the box in Annex E). Make sure to quickly link people in distress or those who need food, water, shelter or urgent medical or social services to ensure their safety and protection.

Follow up with people if you agree to do so!

Helping others to help themselves

For people to recover well, they often need to feel that they have some control in their lives. The best way to support others is to help them to help themselves. This will also give you more energy and time to help others.

The STOP-THINK-GO method can be used to support others to manage their own problems.



STOP Help the person to take a pause, and consider what problems are most urgent. Help the person to use the circles of control to identify and choose a problem which they can do something about.



THINK Encourage the person to think of ways to manage that problem.

The following questions may help:

- What have you done in the past to overcome problems like this?
- What have you already tried doing?
- Is there someone who can help with managing this problem (e.g. friends, loved ones or organizations)?
- Do other people you know have similar problems? How have they managed?



GO Help the person to choose a way to manage that problem and try it out. If it doesn't work, encourage the person to try another solution.

Ahsan and Mohammad's case: Stop–Think–Go

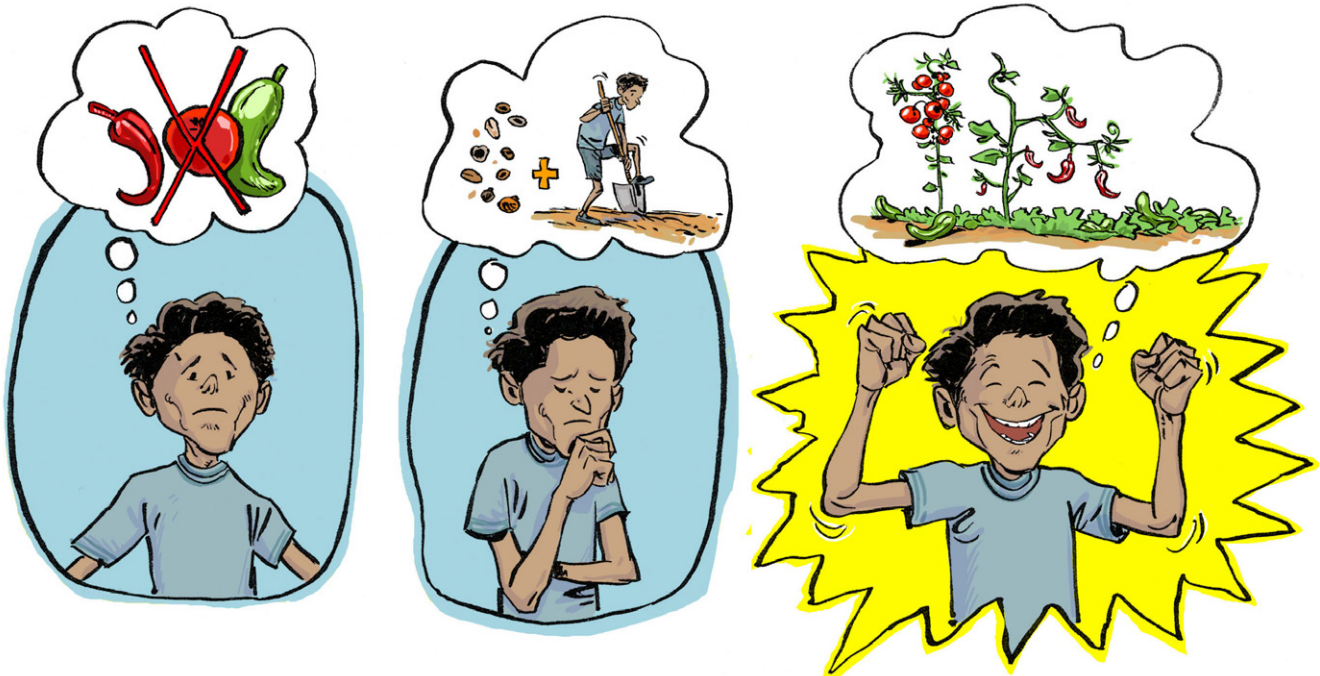
Mohammad seems to be overwhelmed by his problems. Ahsan is supporting him.

STOP: Ahsan helps Mohammad to identify his two most urgent problems. He repeats them to check that he has understood: "Worries about feeding your family and worries about your wife contracting COVID-19". To help Mohammad choose one problem, Ahsan asks, "Is there anything you can do about this?" Mohammad decides that he can do something about both of his problems. He decides that feeding his family is the priority at the moment.

THINK: Ahsan asks Mohammad to think of all the possible ways to feed his family. He tells him that he can suggest any solutions, even if they are silly or unrealistic. Mohammad struggles to begin with, so he talks with his wife, who helps him think of solutions. Together, they think of the following:

Beg for food / Begin growing their own food / Contact a local NGO or food bank / Offer to exchange food with neighbours in return for his work.

GO: Ahsan asks Mohammad to choose one solution from the list to try out. Mohammad has some seeds and would like to grow his own food; however, this will take time. Begging for food could put Mohammad at increased risk of infection. Mohammad decides to contact a local NGO for food immediately and to begin growing some vegetables in his garden for the future. If he cannot get food help from the NGO, then he will come back to the list of solutions. Ahsan gives Mohammad the NGO's number to call them.



Module 4

Supporting people who are experiencing stress

Signs of stress

Stress is a natural reaction, and one which everyone experiences. Signs of stress may include:

- emotional reactions: feeling sad, angry, scared, etc.
- behavioural reactions: lack of motivation, avoiding doing activities, becoming violent, etc.
- physical reactions: headaches, muscle pain, back pain, difficulty sleeping, lack of appetite, etc.

Supporting people who are experiencing stress

The supportive communication skills described in Module 2 may be enough to help someone feel better. If a person requires more support, the following may help.

First encourage the person to think of something they can do to feel better

People may already have things they do to help themselves in stressful situations. To support them to draw on this knowledge, ask the person, "What has helped you previously when you have felt this way?" or "What do you currently do to help yourself feel better?" You can provide them with prompts if they struggle to think of something, e.g. "Is there anyone who can help you?"; "Are there any activities you used to enjoy doing that you could do?".

If a person cannot think of anything they can do to help themselves, you can make suggestions like the ones in the box.



Suggestions of things that the person can try to feel better

- Make a list of all the things you are grateful for (in your head or on paper).
- Try to find time to do an activity you enjoy (a hobby) or find meaningful every day.
- Exercise, walk or dance.
- Do something creative, such as art, singing, crafts or writing.
- Listen to music or the radio.
- Speak to a friend or family member.
- Read a book or listen to an audiobook.

Try a relaxation activity

If someone appears anxious or stressed, **slow breathing** may help.

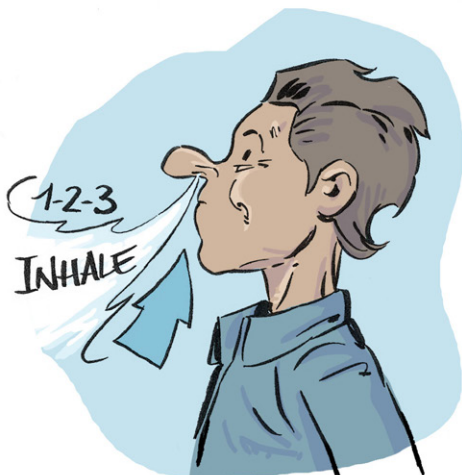
Say: "I have a technique which can help you to feel calmer when you feel stressed. It involves taking some slow breaths together. Is it okay for us to try doing this together?"

If the person is agreeable, then continue:

"Together with me, take a breath in through your nostrils while counting to 3. Keep the shoulders down and let the air fill the bottom of the lungs and then exhale slowly through your mouth while counting to 6. Are you ready? We will do this 3 time."



This strategy will not help everyone, and if the person feels any discomfort then stop the exercise.



Josephine and Julia's case

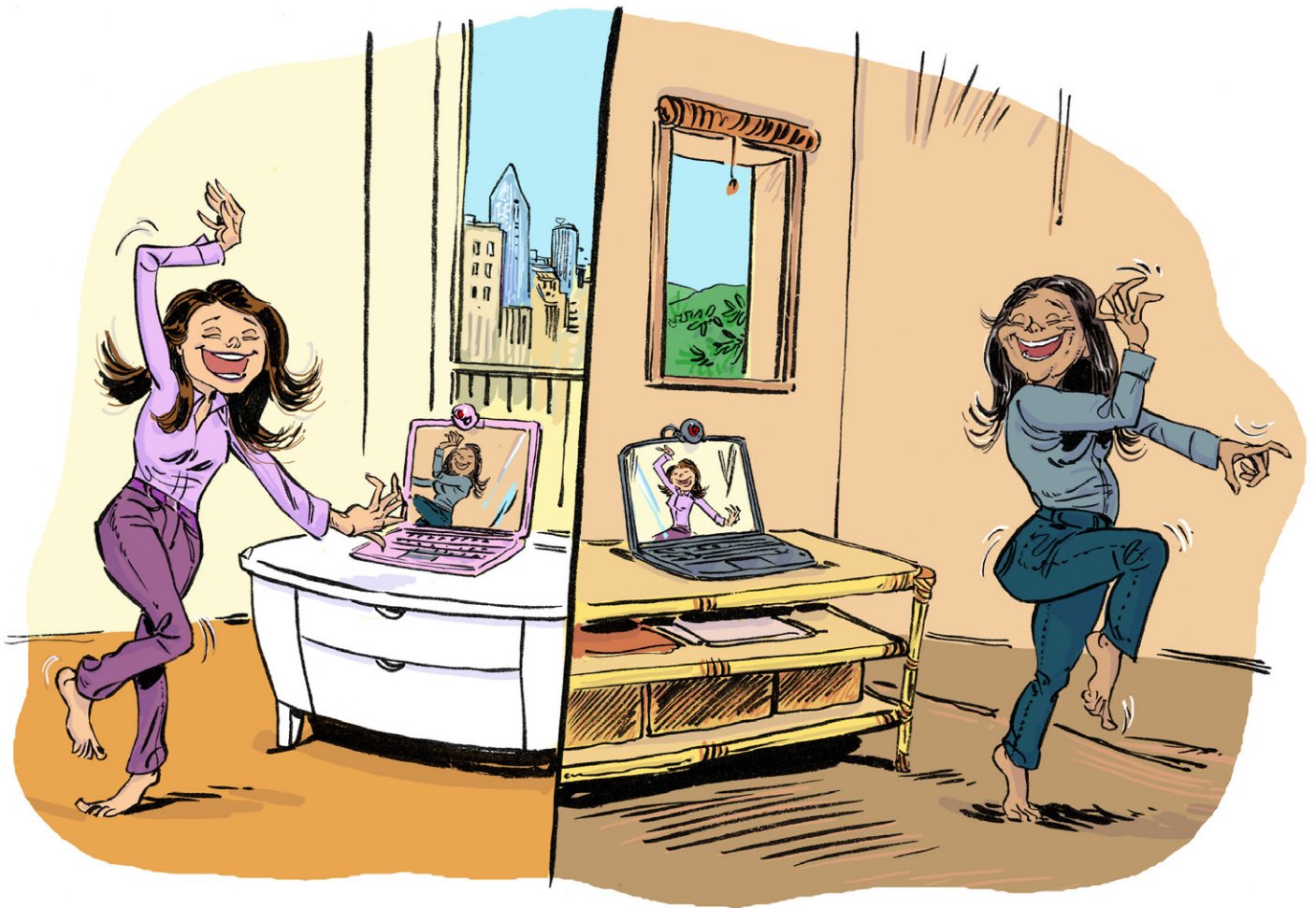
Josephine's partner has been taken into hospital with COVID-19. She is so worried about him that she is not sleeping at night, she cannot eat and she has back pain.

Josephine is talking to her colleague, Julia, on the phone and tells her how she is feeling. Julia listens to her, and shows her support and care. She asks Josephine if there is anything she can do to make herself feel better. Josephine is so tired that she can't think about anything at the moment. Her

back aches so much...

She realises that she has been at home without walking or moving very much and decides to do some stretches and to dance in the mornings to some nice music, as she and her partner would normally do. Julia loves this idea and tells her that she can join her by telephone or video call in the morning to stretch and dance too.

Josephine is happy about that suggestion and to have her colleague join her in this way.



When someone is experiencing serious distress

The signs of stress described above are natural and may fluctuate over time. Some people may have longer-lasting and more intense reactions. When this happens, they might be seriously distressed. Feeling serious distress is a normal reaction to extraordinary circumstances, but it can stop people being able to function. In a situation like this, it is likely that you will need to refer the person on to specialized support. Signs that someone is experiencing serious distress include if they are:

So upset they cannot take care of themselves or others

Being very anxious and fearful
Being very withdrawn
Being angry
Threatening to hurt others
Feeling disoriented or “unreal”
Shouting
Crying
Shaking
Not knowing their name, where they are from, what is happening
Talking about wanting to hurt or kill themselves

What to do when you encounter someone in serious distress

1 Safety first! Make sure that you, the person and others are safe from harm. If you feel unsafe, leave and get help. If you think the person may hurt themselves, get help (ask a colleague, call emergency services, etc.). Take preventative measures against COVID-19 infection (e.g. physical distancing). Do NOT put yourself at risk.

2 Let them know who you are: Introduce yourself clearly and respectfully – your name and your role, and that you are there to help. Ask them for their name so that you can address them.

3 Keep calm: Don't shout at the person or physically restrain them.

4 Listen: Use your communication skills, as described in Module 2. Do not pressure the person to talk. Be patient and reassure them that you are there to help and to listen.

5 Offer practical comfort and information: If possible, offer the person a quiet place to talk, a non-alcoholic drink or a blanket. These gestures of comfort will help them feel safe. Ask them what they need – don't assume that you know.



If you **are talking on the phone**, try to stay on the line with the person until they calm down and/or you are able to contact emergency services to go and help directly. Check that they are comfortable and able to talk.

6 Help people regain control:

a. If the person is anxious, support them to breathe slowly – see **“slow breathing”** technique page 14.

b. If the person is out of touch with their surroundings, remind them where they are, the day of the week and who you are. Ask them to notice things in their immediate environment (e.g. “Name one thing you see or hear”).

c. Help them to use their own good coping strategies and to reach out to supportive people in their lives.

7 Provide clear information: Give reliable information to help the person understand the situation and what help is available. Make sure that you use words they can understand (not complicated words). Keep the message simple and repeat it or write it down if needed. Ask them if they understand or have any questions.

8 Stay with the person: Try not to leave the person alone. If you can't stay with them, find a safe person (a colleague, a friend) to be with them until you find help or they feel calmer.

9 Refer to specialized support: Do not go beyond the limits of what you know. Let others with more specialized skills, such as doctors, nurses, counsellors and mental health professionals, take over. Link the person directly with support, or make sure that they have contact information and clear instructions for getting further help.

Module 5

Helping in specific situations

Some situations that require specific considerations during the COVID-19 pandemic are listed here.

Make sure that people in vulnerable or marginalized situations are not overlooked

Anyone can be in a vulnerable or marginalized situation at different points in their lives. However, some people, based on the barriers, bias and stigma associated with specific aspects of their identity, will face these situations more often and with more severity. People in vulnerable situations will likely need special attention during the COVID-19 pandemic. Those who may be vulnerable or marginalized include:

- people at risk of, or currently experiencing, violence or discrimination (e.g. people experiencing gender-based violence and/or intimate partner violence, which that may escalate during movement restrictions during the pandemic, LGBTQI people, minorities, migrants, refugees, people with disabilities)
- older adults, especially those who are forgetful (e.g. those with dementia)
- pregnant women and people with chronic health conditions who need regular access to services
- people with disabilities, including mental health conditions and psychosocial disabilities
- children, adolescents and their caregivers
- those in crowded living conditions (e.g. prisoners, people in detention, refugees in camps and informal settlements, older adults in long-term care institutions, people in psychiatric hospitals, inpatient units or other institutions) or those who are homeless
- people living alone who have difficulties leaving their home
- people who may have difficulty accessing services (e.g. migrants).



Not all vulnerabilities will be visible or obvious, so it is important to respond in a caring and empathetic way to everyone you encounter.

Supporting those living in care homes

Those working in care homes (e.g. nursing homes and other institutions) may face specific challenges. For example, older people are at higher risk of COVID-19 infection and are likely to have a more serious course of illness. They may experience heightened anxiety, fear and sadness – particularly as isolation measures may prevent them from seeing loved ones.

Extraordinary circumstances such as the COVID-19 pandemic can trigger violations of human rights and dignity, including neglect, in institutions. Workers may feel guilty or powerless to change the situation, and they may require additional information and training to ensure that residents' rights and dignity are preserved.



Further resources

See the chapter on Older Adults in IASC Operational Considerations for Multisectoral Mental Health and Psychosocial Support Programmes During COVID-19 Pandemic (forthcoming publication).

Women and girls affected by COVID-19

Like other emergencies, COVID-19 is exposing women and girls to higher levels of vulnerability, such as an increase in the duties of girls and young women in caring for elderly and ill family members or for siblings who are out of school. They may be at higher risk of violence in the home and of being cut off from essential protection services and social networks. Some women and girls may experience reduced access to health, sexual and reproductive services, as well as maternal, newborn and child health services. In both the short and long terms, they may have greater economic difficulties, which could further increase their risks of exploitation, abuse and engaging in high-risk work. It is important that care is taken to meet the specific needs of women and girls in all aspects of the pandemic response – including in workplaces, communities and camps.



Further resources

UN Women. Policy Brief: The Impact of COVID-19 on Women:

<https://bit.ly/3avwg6v>

IASC Interim Technical note on Protection from Sexual Exploitation and Abuse (PSEA) during covid-19 response:

<https://bit.ly/2VNuvvX>

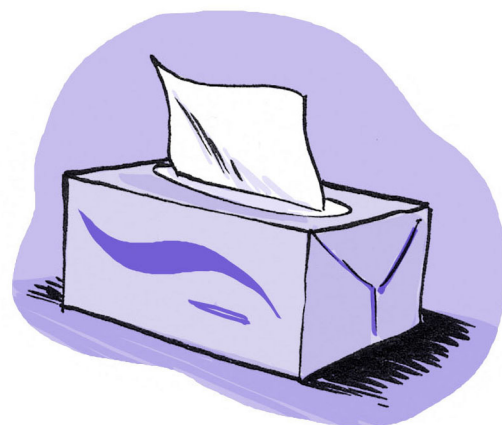
Interim Guidance: Gender Alert for COVID-19 Outbreak:

<https://bit.ly/2XUDJcr>

Supporting those who are grieving

It is especially difficult to mourn the loss of loved ones during the COVID-19 pandemic. People may be unable to use their normal ways of coping with stress, such as seeking support from family members, or to continue their normal daily routines. They may feel that their loss is not significant because so many people are dying from COVID-19, and they may be unable to perform normal mourning rituals.

Those working during the COVID-19 pandemic may witness more death and grief than normal. They may find themselves feeling overwhelmed by the losses and grief they witness, with the added difficulty of coping with their own losses.



Further resources

Grieving in Exceptional Times (Irish Hospice Foundation):

<https://bit.ly/2Sh60X1>

Communicating with children about death, and helping children cope with grief: <https://bit.ly/3d2hZQp>



Supporting those living in refugee camps and informal refugee and migrant settings

Specific challenges for people living in settings of this kind include not being able to access basic needs such as food, shelter, water, sanitation, hygiene and adequate health care; not being able to follow rules on physical distancing due to crowded conditions; and experiencing human rights abuses from those enforcing movement restrictions. Those who remain working in refugee camps when other agencies might have left may have an increased and overwhelming workload. Also, refugees and others who are displaced have already suffered the loss of home, community, loved ones or livelihoods, and may have fewer internal and external resources to cope with the COVID-19 pandemic.

Further resources

Quick Tips on COVID-19 and Migrant, Refugee and Internally Displaced Children (UNICEF):

<https://uni.cf/2VZIDck>



Supporting people with disabilities

People with disabilities may experience a number of barriers in accessing relevant and inclusive information about COVID-19, its spread and means of staying protected. People living in institutions will be affected by the issues highlighted above for those living in care homes, and they may be at risk of abuse and/or neglect. In environments that do not adequately address inclusion, people with disabilities generally have less access to care and services, including food, health care, basic services and information. Therefore, people with disabilities may suffer more severe consequences during this crisis.

Further resources

Toward a Disability-Inclusive COVID19 Response:
10 recommendations from the International Disability Alliance:

<https://bit.ly/3anq4NX>

Disability Inclusive Community Action – COVID-19 Matrix (CBM):

<https://bit.ly/2KooqRu>

Annex A

Advice for managers and supervisors who support staff and volunteers

As a manager and/or supervisor, you play a crucial role in ensuring the well-being, safety and health of workers and/or volunteers. You can use the skills described in this guide to support staff and volunteers if they become distressed, and you can build supportive work environments that promote employee health and well-being.

To support staff and volunteers, you can:

Proactively encourage them to engage in positive self-care strategies, and create an environment of collective care between teams.

Lead by example, through modelling healthy work behaviours (e.g. not working overtime, being kind to others).

Prepare them by providing regular training for working in the COVID-19 response.

Provide accurate, up-to-date and easy to understand information on staying safe during the COVID-19 pandemic.

Have regular meetings to discuss challenges, concerns and solutions.

Ensure that they have regular breaks, and time to connect with family and friends.

Implement a buddy system and encourage peer support.

Provide information to all staff and volunteers on anonymous mental health counselling and support available to them.

Be aware of staff and volunteers who may be in vulnerable or marginalized situations, and who may require additional support.

Operate an open-door policy for staff and volunteers to report problems, preferably to someone different from their line manager.

Work to proactively address conflicts: emphasize the importance of a supportive team environment, and model kindness and compassion towards oneself and other team members.

Selena's case

Selena manages a small team of counsellors. Due to the COVID-19 pandemic, everyone is working remotely. To support her team, Selena arranges for daily check-in calls for the team, to assess how everyone is doing, discuss any concerns and provide any up-to-date guidance or information on COVID-19. Selena encourages the team of counsellors to have regular social meet-ups and peer support without her present, to help them relax and build a team environment. She also provides contact numbers for counselling services. To help her staff feel appreciated and motivated, Selena sends weekly emails saying thank you to the team for their work.



Further resources

Staying Resilient During a Pandemic (Headington Institute):

<https://bit.ly/3ewMIq8>

Organizational staff care resources for managers and staff (Antares Foundation):
in several languages <https://bit.ly/34McOkp>

Mental Health and Psychosocial Support for Staff, Volunteers and Communities in
an Outbreak of Novel Coronavirus (IFRC): <https://bit.ly/2XIAC7t>

Annex B

Set up your own routines here

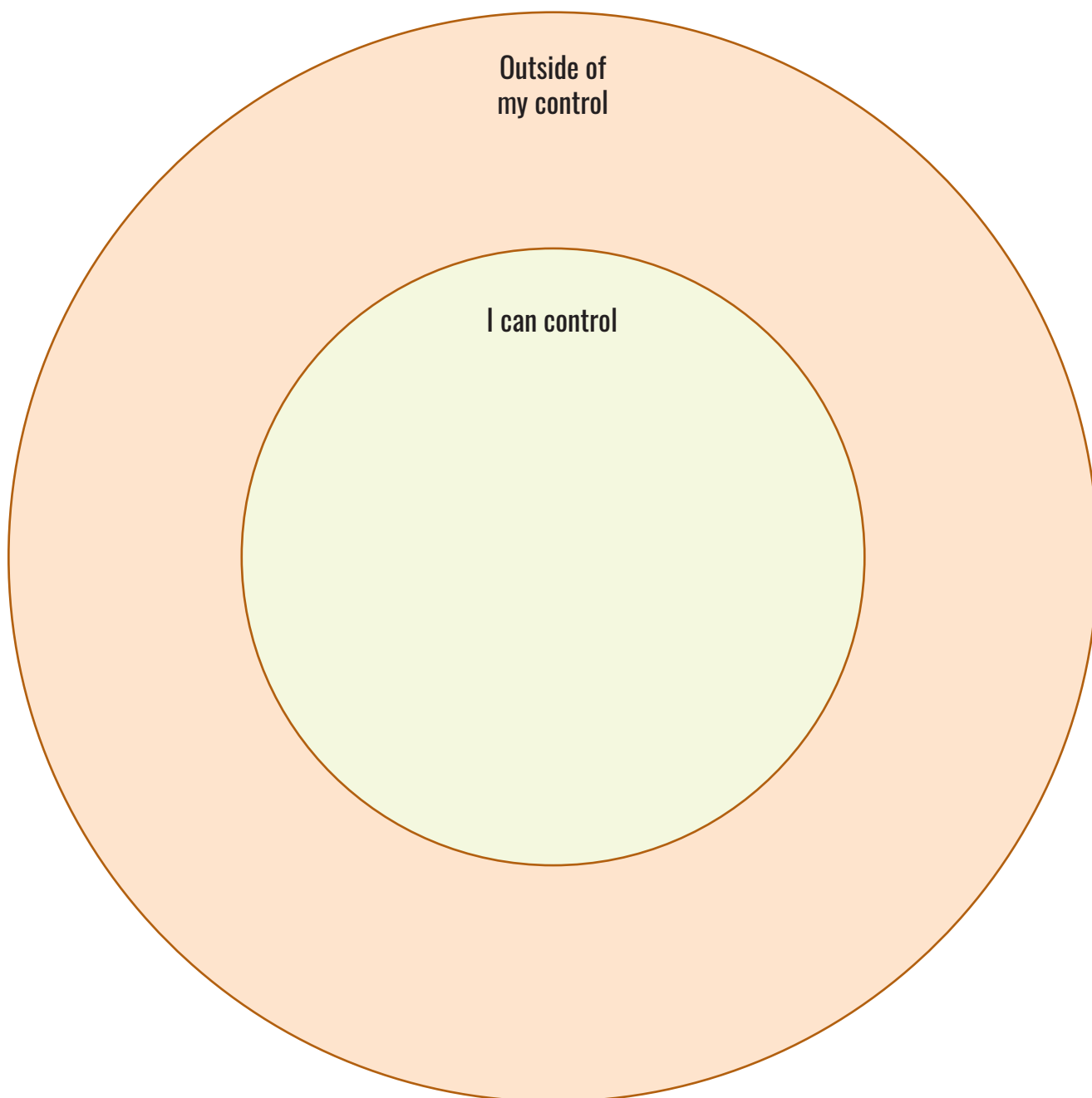


Time	What will I do ?

Annex C

Circles of control

If you are feeling powerless to help others, it can be helpful to identify those problems you can do something about and those you cannot. Forgive and be gentle with yourself if you are unable to help in a particular situation.



Annex D

Progressive Muscle Relaxation instructions

A useful stress management tool!
The exercise takes about seven minutes.

Here is a script to carry out progressive muscular relaxation. You can use this exercise for yourself as one of your self-care strategies, and you may also be able to offer it to others, such as people you may be helping. If you use it with others, remember to keep a calming tone of voice as you give the instructions below and speak slowly, allowing ample time for people to experience the full effect of relaxation.

Progressive Muscle Relaxation script

As we breathe, we will do some progressive muscle relaxation so that you can feel the difference between tension and relaxation in your muscles. We are not often aware when we hold tension in our bodies. These exercises will make us more aware and give us a way to release the tension.

Close your eyes and sit straight in your chair. Place your feet on the floor and feel the ground under your feet. Relax your hands in your lap. As you breathe in, I will ask you to tense and tighten certain muscles in your body. As you tense and hold the muscles, you will hold your breath for a count of three, then relax them completely when I tell you to breathe out.

Let's begin with our toes...

Lead the person through progressive muscle relaxation SLOWLY. Ask them to tense a part of their body and to inhale and hold their breath while you count aloud slowly, like this: *Inhale and hold your breath, 1 --- 2 ---3.* Then say: *Exhale and relax.*

Give a slight rise to your voice as you say: *Inhale and hold your breath* and a bring your voice down as you say: *Exhale and relax.*

Have the person tense and relax their muscles in this order:

- *Curl your toes tightly and hold the tension strongly.*
- *Tense your thigh and leg muscles.*
- *Tense your belly, holding it in.*
- *Make fists of your hands.*
- *Tense your arms by bending at the elbows and bringing your arms tight alongside your upper body.*
- *Shrug your shoulders up to your ears.*
- *Tense all your facial muscles.*

After they have exhaled and relaxed each part of their body, say: *...Now feel your [toes, thighs, face/forehead, etc.] relaxed. Breathe normally. Feel the blood come into your [toes, thighs, etc.].*

Now, drop your chin slowly toward your chest. As you inhale, slowly and carefully rotate your head in a circle to the right, exhale as you bring your head around to the left and back toward your chest. Inhale to the right and back ... exhale to the left and down. Inhale to the right and back ... exhale to the left and down. Now, reverse directions ... inhale to the left and back, exhale to the right and down (repeat twice).

Now bring your head up to the centre.

Notice the calm in your mind and body.

Make a commitment now to take care of yourself each and every day.

Annex E

Resources in your area

The blank boxes are for you to fill in local resources



Support service	Phone number	How to refer
Mental health services		
Emergency medical service		
Fire services		
Social services		
Police		
Women's services		
Child protection services		
Legal services		
COVID-19 MHPSS Helpline		

