

Emotional First Aid: The FINER Points

Following are specific skills you will most likely need to help the survivor of a tragic

ACKNOWLEDGE

"It sounds like what you are experiencing is . . ."

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NORMALIZE

"What you are feeling is normal under the circumstances."

"Anyone would feel this way in this situation."

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EXPAND THE SURVIVOR'S STORY

"Tell me the whole story."

"What happened . . . then what happened . . . then what happened?"

=====

REDIRECT

"I know you want to drive, but your son here needs you now."

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THE FINE ARE OF HANGING AROUND

"How about if I just stand in the hallway in case you need me?"

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CARING DEMEANOR

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RECOGNIZE THE SURVIVOR'S SOURCES OF STRENGTH

***ACKNOWLEDGE* The Survivor's Experience**

1. What survivors really need from helpers is someone to **accept and validate** their experience.
2. What survivors **don't** need is . . .
 - Minimizing: *"At least you weren't hurt."*
 - Discounting: *"It's no big deal. It happens a lot."*
 - Cheerleading: *"It will be OK tomorrow."*
 - Personalizing: *"That happened to me, and I got over it quickly."*
 - Changing the subject: *"Have something to eat."*
 - Judging: *"You brought it on yourself."*

All of the above leave the survivor feeling that the helper does not understand and accept the magnitude of what just happened.

3. **How to acknowledge**
 - A. First **ask**: *"Tell me what happened."*
 - B. **Listen** quietly
 - C. **Validate** what you hear using the survivors words . . .
 - *"It seems like what you are saying is . . ."*
 - *"It sounds like you are very fearful . . ."*
 - D. **Seek clarification**: *"Did I hear you correctly when you said . . ."*
 - E. **Acknowledge** the survivor's thoughts and feelings, even when they seem "strange" or "inaccurate".
 - *"I know it seems they are laughing at you . . ."*
 - *"Yes, I know it seemed like it took forever for them to get here."*
4. Remember: Your first "job" as a helper is to "get with" the survivor so he feels he has an ally who understands and accepts him.

NORMALIZE

1. When tragedy strikes it's very common for survivors to feel . . .

- *"What's wrong with me?"*

or

- *"What's wrong with her?"*

or

- *"What's wrong with the system? Why are they doing what they're doing?"*

In other words, because the tragic event is often a "first time" event, survivors don't know what is normal under the circumstances and what isn't. They have nothing to compare their plight to, because they've had no experience coping with a tragedy like the one that has occurred.

The feeling that *"this is not right"* or *"I'm not right"* is an added burden for the survivor on top of the tragedy that has occurred.

2. How to Normalize

- A. **If you hear:** *"Why am I feeling so _____."*

Say: *"It's very normal to feel _____ when something like this happens."*

- B. **If you hear:** *"What's wrong with my wife, she isn't even crying?"*

Say: *"It's very normal after a tragedy for people to feel numb and not to cry for awhile."*

- C. **If you hear:** *"Why are they asking me all these questions?"*

Say: *"Let me get someone to explain that for you."*

EXPAND THE SURVIVOR'S STORY

1. Survivors often feel guilt after a tragic event

- *"If I had only taken him to the doctor."*
- *"I shouldn't have been driving in that weather."*
- *"I should have called 911 rather than driving him to the hospital."*
- *"I should have locked the door."*

2. You can't "talk someone out" of guilt . Don't say . . .

- *"Don't feel guilty."*
- *"It wasn't your fault."*
- *"Don't beat yourself up."*

3. Guilt is a narrow perception of what happened, and a survivor feeling guilty needs help looking at "the big picture".

Gently ask questions like . . .

- *"What happened?"*
- *"Can you tell me more?"*
- *"What were you doing before he went to the hospital."*
- *"What did you do after he collapsed?"*
- *"What did the coroner say to you?"*

4. Very gently mention aspects of "the big picture" you think may be helpful . . .

- *"From what you've said you have been a very loving wife."*
- *"From what you've told me you did everything right after he collapsed."*
- *"What a wonderful day you had with him and your kids yesterday."*

REDIRECT

1. **It's very common for survivors to decide to do something dangerous which is clearly not in their best interest. For example . . .**

- A mother may decide to run into the ocean to "join" her son who has drowned.
- A father may decide to "get into it" with the police who he blames for his son's death.
- A woman who is clearly not fit to drive may decide to jump into her car to drive to the hospital.

2. **What doesn't work with a determined and impulsive survivor is to say. . .**

"NO, NO, NO, you aren't allowed to do that."

"That's not a good idea."

"You don't want to do that."

All of these phrases fall on deaf ears.

3. **The best approach is to use the skill of Redirecting. These are components of Redirecting . . .**

A. **Acknowledge what the person wants to do . . .**

- *"Yes, I understand you want to be with your son."*
- *"Yes, I understand you're angry at the police and feel like fighting them."*
- *"Yes, I understand you want to drive to the hospital."*

B. **Suggest a powerful alternative action**

- *"Your son needs you now."*
- *"You need to stay here, your daughter will need you when she arrives."*

THE FINE ART OF HANGING AROUND

1. An effective Helper must strike a **balance between being too passive and being too intrusive**. Survivors are individuals, and their desire for assistance varies from individual to individual. Some survivors welcome “all the help they can get” and others are very private. Therefore helpers always need to assess . . .

- “*Am I needed here?*”
- “*Am I welcome here?*”
- “*Is there more I can be doing?*”
- “*Is this a very private moment which I shouldn’t intrude upon?*”

There is no simple way of assessing how long you should stay with the survivor or how active you should be. It’s important to be sensitive to the clues the survivor is giving and to not be afraid to ask . . .

- “*Can I help you with that?*”
- “*Would you like me to stay with you?*”
- “*Would you like me to stay or to leave?*”

2. **The Fine Art of Hanging Around**

Often survivors are in shock and don’t know what help they need or will not need. Therefore if asked “*do you need help?*” they frequently say “*no, you can go*”.

Rather than just leaving when a survivor says “*you can go, I’m OK*” we suggest practicing the “fine art of hanging around”. Our volunteers found that if they do “hang around” they can usually find ways of being helpful and the survivors are grateful for the help.

3. **How to Practice the Fine Art of Hanging Around**

The fine art of hanging around acknowledges what the survivor has said about not needing help but finding a way of staying with the survivor in a nonintrusive way. For example you might say . . .

- “*I know you don’t need me, but how about if I stay until our brother arrives.*”
- “*OK, how about if I just wait out in the hallway.*”
- “*OK, before I leave would you like me to see if _____.*”

A Caring Demeanor

I. The importance of a Caring Demeanor

Your overall gentle, quiet caring demeanor is the most important part of being an effective helper. Survivors often don't hear what you say or see what you do, but they will sense your overall **caring presence**.

Survivors value helpers who are **quiet, calm and soothing**. They use words like gentle, angelic, humble, kind and respectful to describe qualities of helpers they appreciate.

When you are entering the life of a survivor of a tragedy, you should adopt the same quiet and respectful demeanor you would have going into a church or museum.

II. The Two Challenges for Helpers in maintaining a Caring Demeanor

- A. You might not be a quiet person by nature, or maybe when you are called to help you are not in a quiet mood.
- B. Helping survivors can be anxiety provoking, and may cause you to talk too much or to talk in a high pitched voice.

III. How to Maintain a Caring Demeanor

A. Consciously put on your caring demeanor before rushing to help.

- Before "rushing in" to help a survivor take time to take your "everyday personality" off, and put on the caring demeanor described here.
- Before helping, take time to calm yourself and to remind yourself that the person you are going to help needs your calmness and your caring presence above all else.

IV. The Caring Position

In addition to a soft voice and calming presence, the best way to communicate a caring demeanor to the survivor is by positioning yourself in a "caring position". The Caring Position can be described as . . .

- By the survivor's side.
- At the survivor's level.
- Leaning in.
- With a light touch on the survivor's arm or shoulder.
- Making eye contact.

There is a tendency for helpers to keep a distance from survivor(s) not quite knowing what to say or do. You cannot really help a survivor from a distance. He is in shock and won't even know you are there unless you get close in the caring position.

Recognize the Survivor's Source of Strength (SOS)

1. Human Beings are Resilient.

It is very important for helpers to believe that human beings are resilient and can survive the most horrific tragic events. If a helper does not have this “human beings are strong and will survive” perspective, when called upon to help he will make the mistake of “pitying” the survivor. Survivors do not need pity. They need helpers who acknowledge the awfulness of the tragedy but at the same time look for, find and reinforce their sources of strength. Almost immediately after a tragic event strikes, survivors look for something to “hold onto”, and something or somebody who will bring a sense of relief. Survivors look for a “life raft” in the storm that has entered their lives.

2. What are possible sources of strength?

Sources of strength for survivors vary from individual to individual. The helper cannot assume anything about what will give an individual survivor strength. However, there are sources of strength that are common, and that many survivors utilize. Listed below are common sources of strength. These are sources of strength you **may** see when helping an individual survivor..

- Circumstances of the tragedy (“*he died doing what he loved*”).
- What the survivor can give (organ donation, for example).
- Keeping busy (cleaning the source/making phone calls ...)
- God (“*this is God’s will*”)
- Religious/Cultural Rituals.
- Continuing an important ritual or habit (“*I’m going for a run*”, for example).
- Continuing to relate to the deceased (use of the deceased’s name, “saying goodbye” before the deceased is removed from the home, reminiscing).
- Precious articles (holding a piece of clothing, or removing jewelry, for example).
- Pets.
- Friends and family.
- Humor.

3. **How Helpers can Reinforce a Survivor's Sources of Strength.**

- A. **Listen, Listen, Listen** for a survivor's source of strength. If you listen, the survivor
- will give you clues as to what their source of strength is . . .
- Is the survivor **asking** for something or someone?
 - Is the survivor **grasping** something/someone?
 - Is the survivor **expressing** a thought that gives him strength?
- B. **Don't judge!** Whatever a survivor is doing to survive the horrible event is OK, assuming it's not dangerous.
- C. **Do Nothing!** Sometimes a survivor has found his source of strength and just needs others to stand by and respect the source of strength.
- D. **Be an advocate.** At times the helper may have to actively advocate with the survivor's support system or the emergency system to help the survivor do what will give him strength. For example, the helper may become an advocate for a survivor who wants to "say goodbye".
- E. Encourage **reminiscing**. Often a source of strength for a survivor is talking about "the life we had together".
- F. Assist the survivor add "**personal touches**" to the tragic situation. A survivor usually wants to find a way to add meaningful personal touches to his tragedy. For example . . .
- A wife may want a lock of her deceased husband's hair.
 - A husband whose deceased wife loved music may want to play her favorite music as her body is removed.

4. **Summary**

As a helper, your challenge is not only to see the survivor's pain but also his strength. If you only see the survivor's pain you will become a "pitier" and you will fail as a helper. Many times the survivor's source of strength seems trivial or silly to others. The task of the helper is to not judge the survivor's source of strength and rather to have the attitude "*I will help you do whatever you want to do right now*".