TIPS ON HOW TO WORK WITH FAMILIES WHEN UNIT TRAUMA OCCURS

In a trauma situation, it is important to validate and acknowledge individuals’ feelings, build individuals’ resilience and coping skills, and provide a supportive, safe environment. Here are tips on ways to achieve these goals when providing assistance and/or working with individuals on a one-on-one basis.

★ Be compassionate and show genuine concern. Communicate empathy, not sympathy.
★ Be comfortable with individual’s anger and intense emotions. It is an appropriate response to stress.
★ Listen patiently and nonjudgmentally. Allow individuals to talk about and vent their feelings.
★ Be patient. Resiliency is a process that takes time.
★ Allow for diversity in how people respond and cope. Accept reactions as normative.
★ Let people grieve in their own way; however refer to clergy, counseling service, mental health agency, or support group when grieving becomes unhealthy.
★ Respect religious and cultural beliefs.
★ Offer reassurance.
★ As non-mental health professionals, do not attempt to diagnose.
★ Don’t focus solely on mental health problems, build on individuals’ strengths. Don’t assume mental health problems, resilience is more common than you think.
★ Encourage self-confidence and point out individual’s strengths.
★ Provide education on normal traumatic responses. Reassure individuals that what they are experiencing is normal and they “are not going crazy.” Also help individuals to know what to expect on the road to recovery.
★ Give information so individuals can balance perceptions and cognitions with facts. Keep in mind perceptions are a significant determinant in how individuals respond. Teach cognitive coping by reframing meaning and teaching effective ways to cope with stress. Knowing how to change their behavior gives individuals (including children) a sense of mastery and control over a stressful situation.
★ Give information on how to reduce stress. Encourage families to do activities that recharge the spirit and energy and to take care of themselves (get rest, eat properly, exercise). Advise individuals not to use alcohol or drugs as a means of avoiding or numbing their feelings.
★ Encourage optimism. Encourage individuals to take a positive outlook and to believe they can survive this “rough spot.” (For example, you might say: “Things may never be the same, but they will get better, and you will feel better.”)

★ Teach communication skills to help individuals address relationship problems. Keep in mind that common traumatic stress reactions such as withdrawal can impact relationships.

★ Help families strengthen problem-solving (e.g., how to seek information and help from others) and decision-making skills. Provide information on warning signs and available resources.

★ Encourage family to return to regular routine to help regain control over their life.

★ Connect families to other people.

★ Encourage families to participate in projects that help others.

★ Encourage families to limit exposure to war-related coverage.

★ Target efforts to those most vulnerable (i.e., immobilized and traumatized) to prevent chronic and delayed reactions. Also focus on those with chronic symptoms or unhealthy functioning.

★ Do not provide same intervention to all, but tailor to needs. Keep in mind that those who are resilient may not need intervention.

★ Treat entire family and not just victim. Keep in mind that many trauma events, such as war, impact the entire family. While efforts should include a focus on children, it is vitally important to help parents cope because their reactions greatly influence children’s reactions.