QUICK GUIDE FOR SPR

This table provides guidance in choosing an SPR intervention for various post-trauma concerns.

CONCERN	PRIMARY SPR INTERVENTION	SECONDARY SPR INTERVENTION	
Having a difficult problem that I need to solve.	PROBLEM SOLVING	HEALTHY CONNECTIONSHELPFUL THINKINGLINKAGE WITH ANCILLARY SERVICES	
Having upsetting reactions to things that happen.	MANAGING REACTIONS	HEALTHY CONNECTIONSHELPFUL THINKING	
Not having enough people that care about me or can help me out.	HEALTHY CONNECTIONS	ACTIVITY SCHEDULING HELPFUL THINKING	
Not doing enough positive and pleasurable activities.	ACTIVITY SCHEDULING	PROBLEM SOLVINGHEALTHY CONNECTIONS	
Having upsetting thoughts that make me feel bad.	HELPFUL THINKING	MANAGING REACTION ACTIVITY SCHEDULING	
Having a serious physical health problem; a serious mental health condition; a serious substance abuse problem; significant current hardships and adversities.	LINKAGE WITH ANCILLARY SERVICES	 PROBLEM SOLVING HEALTHY CONNECTIONS HELPFUL THINKING 	

Referral

In cases where there is a need for referral to more specialised mental health services:

- Psychologists: A list of psychologists can be found at: www.psychology.org.au/findapsychologist
- Psychiatrists: A list of psychiatrists can be found at: $www.racgp.org. au/script content/ranz cpcomplex.cfm? section = psychiatrist_referral_directory$
- Social workers and other allied health professionals with mental health training

MANAGING REACTIONS AND UNHELPFUL THOUGHTS CAN REQUIRE A SUBSTANTIAL EFFORT FROM PROVIDERS. HERE IS MORE DETAIL ON HOW TO HELP PEOPLE IN THESE AREAS.

MANAGING REACTIONS

Teach skills to help the person manage unpleasant reactions: Review the skills below with the person and ask him/her which he/she would prefer to start with.

- Calming skills: Ask the person to breathe more slowly with normal breaths: "Take a slow breath in through the nose (try not to breathe too deeply), hold for 5 seconds and then breathe out slowly through your nose or mouth while saying a soothing word like "relax" to yourself". Ask the person to practice this for 6-8 breaths at a time every day when he/she is not upset so that he/she will be able to use it when required..
- Putting thoughts and feelings into words: Suggest that the person writes in detail about his/ her experiences and reactions. Suggest that the person write uninterrupted for 30 minutes and repeat the exercise several times once or twice a day. (NB. Some people may find this exercise too distressing, e.g., those who feel high levels of guilt about the event)
- Recognizing situations that trigger reactions: help the person identify triggers (including reminders of the disaster) that evoke distressing reactions. Strategies to help manage such situations are:
- 1) Anticipate stressful situations or reminders and prepare for them (e.g., relax beforehand, take a friend with you, plan a pleasant activity afterwards);
- 2) Use problem solving to help develop have a plan for managing stressful situations. This will be useful particularly for unexpected triggers.
- 3) After the trigger, allow time for recovery.

HELPFUL **THINKING**

Identify unhelpful thoughts

The following questions may be useful in helping people identify their unhelpful thoughts:

- o "What has been bothering you the most since the disaster?"
- o "What are you most afraid of nowadays?"
- o "What makes you feel the worst about yourself or about how your life is going?"
- o "What goes through your mind when you think about the disaster and your current situation"

Help the person see that while his or her thoughts may be fairly accurate (i.e., another disaster is likely to strike sometime in the future), they may not be helpful; it is often the unspoken assumption that he or she will not be able to handle the next disaster that is the unhelpful part of the thought.

Identify helpful thoughts

Help the person look at alternate helpful thoughts – what are other ways of looking at this? How might others think about it? What would I be thinking if I felt more in control, safer, happier?

Ask the person to imagine the situation and practice talking to himself/herself out loud, saying the helpful thoughts as a way to counter negative thoughts and emotions. Encourage the person to practice helpful thoughts on a daily basis by seeking out situations in which negative thoughts occur and then forcefully replacing them with helpful thoughts.



Skills for Psychological Recovery

KEY MESSAGES

About this brochure

This brochure is a brief reference guide to Skills for Psychological Recovery (SPR). It provides an overview of the various components of SPR and describes for whom they may be useful.

Traumatic Events

Events are those that (a) involve actual or threatened death or serious injury (real or perceived) to self or others (e.g., accidents, assault, natural disasters and wars); and (b) evoke feelings of fear, helplessness or horror. Certain events (e.g., interpersonal violence, direct life threat and events of prolonged duration) are more likely to result in a traumatic response.

Reactions to Traumatic Events

Most people recover after a traumatic event without serious problems. Some develop more severe and persistent symptoms like PTSD, depression and substance abuse.

Stepped Care

The stepped care model is a non-pathologising approach. It begins with a period of monitoring followed by the use of increasingly intensive treatments as the need for such interventions is determined. This model is resource efficient as it provides best practice care only to those who need it. It also promotes the normal recovery process.

Psychological First Aid (PFA)

In the immediate aftermath of trauma, practitioners should monitor the person's mental state and provide tailored support. This includes attending to the person's practical needs and encouraging the use of exiting coping strategies and social supports.

Skills for Psychological Recovery (SPR)

Where PFA is not sufficient, the next level - SPR - is often useful. SPR is an evidenceinformed skills-training model to help children, adolescents, adults, and families in the weeks and months after disasters and trauma. It is designed for those with low level problems that continue after the period in which PFA is utilised.

SPR aims to accelerate recovery and prevent maladaptive behaviours. It is designed to reduce ongoing distress caused by traumatic events and provide skills training to assist the person in reaching their recovery goals.

SPR focuses on a few core, empirically-derived skill sets that have been shown to help with a variety of post-trauma issues. Following an information gathering phase, SPR skills include problem solving, promoting positive activities, managing reactions, promoting helpful thinking, and building social connections.

Trauma survivors who develop more severe psychological problems should be provided with formal psychological and/or pharmacological interventions.



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The Skills for Psychological Recovery Field Operations Guide, on which this brochure is based, was developed by the National Center for PTSD in the USA and the National Child Traumatic Stress Network in the USA. This version has been modified from the original SPR Field Operations Guide to suit the needs of Australian communities by the Australian Centre for Posttraumatic Mental Health.

GATHERING INFORMATION AND PRIORITISING ASSISTANCE

GOAL

To gather information to determine need for immediate referral or referral for other services, to understand the survivor's most pressing needs and concerns, and to prioritise and plan SPR intervention strategies.

RATIONALE

In the post-disaster period, survivors may need assistance with urgent medical or mental health conditions, be faced with a range of post-disaster hardships and adversities, have concerns about safety, and experience difficulties in interpersonal and role functioning. Gathering information is an important first step in assisting survivors to identify and prioritize their current concerns in order to help them efficiently address these.

All survivors who are making a first contact or who are returning after a break in services.

STEPS

Use for:

- 1. Explain rationale for information gathering
- 2. Identifying current needs and concerns:
 It may be helpful to use the SPR Screening
 Form (see Quick Guide) to identify patients'
 needs and help them prioritise them.
- 3. Prioritise areas to address
- 4. Make an action plan: Determine whether the problem areas can be addressed by you with SPR or other intervention, or if referral to another service is needed.

BUILDING PROBLEM SOLVING SKILLS

GOAL

Help survivors to solve difficulties or problems that they are currently facing.

RATIONALE

Disasters create many difficulties and survivors often feel helpless in the face of an overwhelming number of problems. Ongoing stress and pressures to "do something" can make it hard to step back and think carefully about the best way to handle a situation. Having a systematic way to solve problems can help survivors regain feelings of control and increase their self-efficacy.

Use for:

Survivors who identify concerns about:
(1) feeling overwhelmed by multiple problems
(2) feeling helpless that they can't solve their

(3) demoralization or lack of control over their situation

(4) family members who are having difficulty solving problems

STEPS

- 1. Explain the rationale for problem solving
- 2. Encourage the person to define the problem he/she is most interested in solving. Make sure it is a single, clearly defined problem: break larger ones into manageable steps.
- 3. Decide ownership: Many people, particularly children, take on problems that are not theirs to fix. Help the person identify whether the problem is hers/his to fix. If not, help her/him choose another to work on.
- 4. Set the goal: How would the person like this issue to be? Setting a goal will help identify practical steps towards a solution.
- 5. Brainstorm possible solutions: It may be helpful to identify several solutions to the same problem; at this stage, don't try to censor ideas.
- 6. Evaluate and choose the best solutions:
 Rate each according to pros and cons. Assist
 the person in choosing options that are
 practical and achievable. Follow up at the
 next meeting to see how it has gone.

PROMOTING POSITIVE ACTIVITIES

GOAL

To help survivors plan and engage in pleasurable activities that will help them improve their mood and regain a sense of normalcy and control in their lives.

RATIONALE

Disasters often disrupt normal routines and activities that provide a sense of purpose, control, and pleasure. Helping survivors identify, schedule, and engage in constructive and pleasurable activities can help them to re-establish routines. Engaging enjoyable activities and hobbies can improve mood and restore a sense of control.

Use for:

and activities

- roblems Survivors who identify concerns about:
 - (1) Feeling down or apathetic(2) Ongoing disruption of normal life routines
 - (3) Low involvement in pleasurable or positive activities

STEPS

- 1. Explain rationale for engaging in positive
- 2. Identify and plan one or more enjoyable activity: Be sure to choose things that are easily achievable.
- 3. Schedule activity in calendar: Help the person identify when they will do the activity, how, and with whom.
- 4. Review at next meeting and problem solve if required.

MANAGING ANXIETY, GRIEF AND LOSS

GOAL

Enhance skills to manage upsetting physical, behavioural and emotional reactions to loss and trauma, as well as to on-going stress.

RATIONALE

Disaster survivors may experience a range of upsetting physical and emotional reactions, both in response to the disaster experience itself and in response to ongoing stress or life changes. As well as being distressing for the person and their loved ones, these reactions can adversely affect decision-making, relationships, daily functioning, and physical health. Learning skills to manage these reactions can help to improve health and well being, enhance interpersonal and role functioning, and reduce use of unhelpful strategies such as social withdrawal and substance abuse.

Use for:

Survivors who identify distressing physical and/or emotional reactions.

STEPS

- Explain rationale for learning how to manage distressing reactions
- 2. Identify distressing reactions and their triggers: People may be angry, sad, scared or worried. They may exhibit physical reactions like feeling tense and on edge. Try to establish what triggers these reactions: when are they at their worst or best?
- 3. Teach skills to address priority reactions:
 These may include calming skills, putting thoughts and feelings into words, and recognizing situations that trigger reactions.
 When a person can recognize these situations, he/she can anticipate them and plan how to manage them.
- 4. Create a plan to manage a reaction:

 A plan can include things they can do to prepare for trigger situations, what to do during the situation, and how to look after themselves afterwards.

More information on managing reactions is provided on the back page.

PROMOTING HELPFUL THINKING

GOAL

To help survivors take stock of what they're saying to themselves about the disaster experience and to help them identify and practice less distressing ways of thinking.

RATIONALE

Many survivors engage in negative thoughts that serve to maintain negative emotions such as fear, hopelessness, anger, anxiety, sadness, and guilt. Identifying and practicing more helpful ways of thinking can improve mood and reduce the intensity of distressing emotional and physical reactions.

Use for:

Survivors who identify concerns about: (1) distressing emotional and/or physical

(2) being overly self-critical or negative(3) difficulty addressing fears and anxiety

STEPS

- 1. Explain rationale for promoting helpful thinking
- 2. Identify unhelpful thoughts: Help the person to identify the negative thoughts that are associated with negative feelings. It may be easiest to talk about the feelings the person is experiencing and then ask about the thoughts he/she has when these feelings occur.
- 3. Identify helpful thoughts: Helpful thoughts are not the same as positive thoughts positive thinking may be just as unrealistic as negative thinking. Do not diminish the impact of the trauma or engage in discussion about whether negative thoughts are justified. Rather help the person see which thoughts are helpful and unhelpful, and to replace the negative ones with more rational alternatives.
- 4. Rehearse helpful thoughts: This gives the survivor a chance to get used to the experience of deliberately replacing unhelpful thinking with helpful thoughts. It also provides the counselor with an opportunity to see how well the survivor has understood the concept of helpful thinking.

More information on helpful thoughts is provided on back page.

REBUILDING HEALTHY SOCIAL CONNECTIONS

GOAL

To increase connections to positive relationships and community supports.

RATIONALE

Social connection is one of the most consistently identified protective factors in studies of disaster survivors. Social support from family, friends, and community resources enhances recovery after a disaster by helping survivors meet their emotional and practical needs.

Use for:

- Survivors who identify concerns about:feeling isolated or disconnected from friends or family
- disruptions with social or community networks
- lacking access to community supports or resources
- lacking people to talk to about what they are going through
- wanting to provide support to others in need

STEPS

- Explain rationale for rebuilding healthy social connections
- 2. Draw a social connections map: Help the person identify who is in her/his social network and who is easily accessible. This will help them see the 'big picture' of who they are connected to and what those connections mean to them.
- 3. Review social connections map: Discuss how those on the map will provide what kind of support (e.g., household help, giving advice, social activities). Then identify what sort of support/people are missing.
- 4.Make a social support plan: Choose one area of support to change and plan how to do this in the next couple of weeks.

SEVERE STRESS

If a person presents with severe distress at any stage, particularly if they express thoughts about self-harm or suicide, appropriate steps to ensure safety include psychiatric care or hospitalisation.

Other indicators of severe distress include severe insomnia, agitation, dissociation and social withdrawl.

Quick Guide for SPR Continued

PROBLEM AREA		HOW MUCH OF A PROBLEM?		
Physical Health	Do you have any concerns about your own or a family member's physical health?	None/low	Moderate	High
Emotional Difficulties	Do you have any concerns about how you or a family member is coping emotionally? [e.g. depressed; anxious; scared; grieving; worry; insomnia]	None/low	Moderate	High
Safety	Do you have any concerns right now or in the future about your own or your family's safety?	None/low	Moderate	High
Basic Necessities	Do you have concerns about meeting the basic necessities of daily life?	None/low	Moderate	High
Substance Use /Abuse	Do you have any concerns about your own or a family members' use of alcohol or drugs, or the overuse of prescription medications?	None/low	Moderate	High
Role Functioning	How well are you functioning in your daily life, like at home, work, or school?	None/low	Moderate	High
Interpersonal Life	How are you getting along with people, like your spouse/partner, family members, neighbors, friends, or people at work or school? [anger; withdrawal]	None/low	Moderate	High
Other Concerns	Is there anything else that you are concerned about or want to share with me? (Describe)	None/low	Moderate	High