



First Nations Health Authority  
Health through wellness

# First Responders and Trauma-Informed Care

## Tips for Providing a Trauma-informed Response during the Pandemic

Being a first responder in the best of times is a challenging role. In a pandemic, it becomes even more demanding. As the need to respond to COVID-related medical emergencies increases, we need to increase safety measures to protect ourselves. For example, we will need to wear personal protective equipment (PPE), which many people have never seen before.

Seeing first responders wearing PPE, combined with the stress and uncertainty related to the pandemic, may cause an increase in trauma responses in the people we are trying to help. Now more than ever, it's critical that health care providers and first responders provide trauma-informed care.

Being trauma-informed means being aware that the people around us may have an emotional or physical reaction to something in their environment due to their past, personal experiences. The sights, sounds and other sensations related to interactions with first responders may remind people of experiences that have threatened their lives or the lives of their loved ones. As first responders, we can't always know what could trigger a trauma response in someone else.

### **TIPS FOR PROVIDING A TRAUMA-INFORMED RESPONSE:**

- 1. Understand who you are providing service to.** Remember that many First Nations individuals have had negative experiences with the health care system or have heard the stories of loved ones who have. This is especially true for Elders and other individuals treated in Indian Hospitals. When a person re-experiences a past trauma, we refer to it as a flashback. Flashbacks can be deeply distressing because feelings of powerlessness and fear resurface. As first responders, we need to consider historical trauma in how we provide help and services to First Nations people.
- 2. Take the time to slow down and explain what you are doing.** Be client-centered and use informed consent practices. Take the time to explain what the extra gear is for, that it prevents the spread of COVID-19, and that it is for their safety, your safety, and for the safety other household members.
- 3. Recognize signs of fear and/or distress.** Pay attention to whether a person's emotional reaction seems disproportionately intense for the current situation and if those feelings persist. The individual may also show physical signs of distress similar to the signs observed in a fight, flight, or freeze response. Signs of distress may include an increased rate of breathing, shallow breaths, muscle tension or freezing, clenching of jaw or fists, dilated pupils, or non-responsiveness. If another household member (who does not need care) has had traumatizing PPE-related experiences in the past, find a comfortable space for them in the home so they won't be further exposed to the response.

- 4. Bring a traumatized person into the present moment.** If someone is having a flashback, offer them ways to return to the present moment so that they can respond to their current situation instead of reacting to a past threat. If a person is distressed, you can help to ground them in the present using these sensory grounding tips:

**SOUND:**

- Speak in a loud, audible voice with a calm, even tone. Your voice can help ground someone who is in another time during a flashback. Speak clearly, use simple language and be concise. First responders or household members can provide this help. In fact, household members may be more effective in this role as a familiar person may seem safer and less threatening.
- Help them recognize the present situation and return to it by identifying who you are, who they are, what time/day, or place you are at, and what is happening. "My name is \_\_\_\_\_, your name is \_\_\_\_\_. We are here at [location]. It is [time]. I am/this is [health care/visitor's role]. I am here to help you with [purpose of your/health care visitors visit]."
- Other grounding questions can include asking, "what year is it?", "what is your name?", "what is your favourite colour?" or you can ask them to name five things they see around them, name four things they hear if it is a busy space etc.

**TOUCH:**

- If it is easily accessible, bring the person to stand on the earth in bare feet, if possible (and if it is safe to do so). Ask others in the home or centre whether there is something comforting that the individual can hold in their hands, such as a piece of moose hide, fur, beadwork, a smooth or textured stone or another keepsake from a family member that brings comfort.

**SMELL:**

- You could help ground someone by using the scent of cedar boughs or spruce needles, pressed to release the oils and scents from the needles. Family members may want to burn or boil smudging medicines such as sage, tobacco, sweet grass and other local smudging medicines that communities use.

- 5. Connect with someone who can provide emotional or cultural support** if the person continues to experience flashbacks or other signs that they are struggling to return to their usual functioning.

- Is there somebody close by who they trust?
- Is there a peer or family member available?
- Is there a counsellor or someone with experience you can call?

**You can also use telephone or online support from the following organizations:**

**Indian Residential School Survivors Society:** 604-985-4465 or Toll-free: 1-800-721-0066

**Tsow-Tun-Le-Lum:** 1-250-268-2463 or Toll-free: 1-888-590-3123

**KUU-US Indigenous Crisis Phone Line:** 1-800-558-8717

**Hope for Wellness Indigenous Online Chat:** [www.hopeforwellness.ca](http://www.hopeforwellness.ca)