

Psychological first aid teaching and training for healthcare professionals

Its importance in the COVID-19 context

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DOI: <https://doi.org/10.36104/amc.2022.2234>

Abstract

The COVID-19 pandemic has undoubtedly made us reflect on, among other things, the evident failures of the healthcare system, including the gaps detected in undergraduate and graduate training. One of the points that must be strengthened includes teaching psychological first aid as a humanitarian support technique for people in crisis situations. As has been shown in the context of the SARS-COV-2 pandemic, there is a high psychosocial and emotional component that must be treated by the professional who has the first contact with the affected person. The importance of including psychological first aid in healthcare training, then, is for all staff responding to the emergency to be able to implement it, and not necessarily and exclusively a psychologist. (*Acta Med Colomb* 2022; 47. DOI: <https://doi.org/10.36104/amc.2022.2234>).

Keywords: COVID-19, university education, first aid, pandemic.

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Received: 19/VI/2021 Accepted: 28/III/2022

Introduction

A crisis is defined as a profound change with significant consequences which puts the progress of a matter or process at risk; in this particular case, the comprehensive health of a person directly or indirectly affected by the COVID-19 pandemic. This is why psychological first aid has become so important today, focusing on brief and immediate assistance for the person affected by this crisis, to reestablish the person's emotional, social, physical and behavioral stability. These initial interventions tend to be short and to the point, and therefore should be the priority of the first professional responder to the patient or victim, regardless of this person's training (1). Thus, it is important for all healthcare professionals, like doctors, nurses, dentists, psychologists and others to be able to provide this psychological first aid effectively.

Traditionally, these functions have been delegated to psychology or mental health professionals, the same people who often may not be present during the initial identification of the crisis. Based on the already mentioned need for all healthcare staff to be capable of providing this timely support, it is essential for universities to provide education and training on these subjects. Many authors even assert that the general population should be aware of assistance tools (2). Including psychological first aid in undergraduate and graduate health science career curricula should be considered from now on in the new educational models. University training should include a human and social perspective in which patient-centered care is the priority, with a comprehensive

and personalized focus not only on the person's physical, but also his/her mental and emotional health (3).

The current profile of teaching on psychological first aid

Most medical schools include one or two medical psychology modules in undergraduate training, which is basically aimed at basic and theoretical contents, more than at tools which the student and future professional can use in clinical practice. In addition, the same type of courses are taught on abnormal psychology and psychiatry, in which theory is emphasized and there is a lack of guidance toward interventions like psychological first aid and other adjuvant therapies. It is rare for a medical school or any health sciences department other than psychology to incorporate mental health content from an applied psychosocial setting in its courses (4). It is not surprising, then, that professionals graduating from these healthcare programs have gaps when it comes to acting on and applying interventions aimed at providing humanitarian support to people in emergencies and disasters, as can be seen with the current global health crisis.

With regard to graduate medical programs, it should be noted that teaching on psychological emergencies and how to deal with them varies and depends on the graduate program, being completely or almost completely absent in most specialties, somewhat addressed in legal medicine, bioethics and public health programs, and studied in a broader and more detailed fashion in psychiatry and emergency and

disaster medicine. However, despite these deficiencies, we assert that basic knowledge of psychological first aid should be a general education course for all healthcare professionals, similar to ordinary first aid and basic cardiopulmonary resuscitation. Medical psychology should not be underrated as a specific science integrated into healthcare practice, which, from a more comprehensive, human and scientific point of view, helps control various subjective components of the situation being faced (5).

Recognition of and intervention in psychosocial impacts

It is understandable that, faced with a new disease for which the world was not prepared, there should be a degree of inexperience in healthcare professionals regarding how to deal with the problems it causes. However, a more complete basic training in emergency medical psychology could help improve early identification of these emotional signs and their prompt intervention. All of this in order to stabilize the patients, thus avoiding short, medium and long-term deterioration of their mental health. Psychological first aid should, as in all crises, be provided by the first responders with whom the affected individual has contact. Therefore, everybody must know how to handle this type of information and skills.

In the SARS-CoV-2 pandemic, there has been a notable initial onset of fear and uncertainty in the patients, both due to the disease itself as well as its financial, work, familial, educational and security consequences, among others. Subsequently, if these symptoms exceed the person's defense mechanisms, they may become mental health problems. Anxiety, anger, insomnia, and irrational panic have also been reported, as well as the exacerbation of impulsive and risky behaviors like excessive isolation, the use and abuse of alcohol, tobacco and other substances, etc. If these reactions are not treated in time, they will also lead to more chronic disorders like posttraumatic stress, various degrees of depression and anxiety, and somatization, among others (6).

Since, most times, doctors and nurses have the first contact with people affected by these situations, these professionals must have a degree of training in preserving the patients' mental health. Only through a vision which encompasses all the problems and triggers of psychological and emotional impairment can a consciousness of change and help be obtained, which is not restricted to simply curing the disease but rather to promoting comprehensive health (7). This can only be achieved with a solid foundation during professional training, self-education and constant updating on psychological emergency topics provided by higher education institutions.

Building healthcare education programs which include psychological first aid. A constant challenge

Understanding that psychology deals with the study of subjectivity (7), the question arises: "What training should

doctors and healthcare science students receive to care for the subjective aspects of their patients?" And, since not everything to do with psychology is of interest to doctors, how should emergency mental health be included in the teaching to develop skills focused on psychological first aid?

Along with acquiring the knowledge and skills required to provide this support on the crisis frontlines, the students must develop sensitivity to their patients' subjective component. They should be aware of the importance patients assign to the adverse circumstances they are experiencing, their emotions, needs and fears, as well as their different individual methods of defense, ways of dealing with issues, and resilience (8).

Thus, we recommend that study programs developed to include psychological first aid in healthcare professions incorporate characteristics like:

- ***A diagnosis of educational needs:*** as pointed out at the beginning, most healthcare departments include psychology, abnormal psychology and psychiatry courses which, while basic, should also include the approach to psychological emergencies. Only when the educational needs are known can there be improvement, correction, and the establishment of a complete educational process.
- ***Educational strategy:*** in the indicated case, due to the emergent nature of the mental health problem caused by COVID-19, and the described gap in teaching, learning psychological first aid should be established as a priority in all healthcare areas, not just those that use it frequently.
- ***Teaching methodology:*** as in any educational environment, the best learning options must be designed and analyzed, based on clinical cases, hands-on practice, and lectures by specialists on the topic, among others. It is also important to take continuing education into account, as will be discussed next.
- ***Establishment of the educational process:*** application of the teaching on psychological first aid techniques in medical staff in training, and training sessions for already trained healthcare professionals who need a refresher on the subject.
- ***Evaluation:*** essential for verifying the success of the educational program's implementation, measuring its results and correcting or modifying deficiencies, as well as strengthening positive results (9).

Continuing education on psychological emergencies

Medical teaching is constantly evolving, adapting to the needs which arise in each time period (10). Having shown the need to monitor patients' mental health during pandemic times, some strategies which could be used by professionals in training or those who need to strengthen their knowledge are:

- Refresher courses on psychological first aid.
- Seminars on how to act in psychological emergencies.
- Courses and workshops conducted by qualified staff: psychologists, psychiatrists, emergency physicians, and paramedics, among others.
- Observation and analysis of real clinical cases.
- Review of the established clinical guidelines.

Conclusions

Psychological first aid is an important tool in emergencies which helps provide a comprehensive approach to patients' mental health and should be provided by the first healthcare professional to have contact with the affected person. In this context, it is important to begin training on the subject in undergraduate programs in all healthcare related fields. At the same time, this knowledge should be reinforced in specialty and graduate programs through continuing education. University courses should be created and established including clear guidelines on intervening in psychosocial factors emerging in the context of a pandemic since, as has been seen in recent times, it is essential for all professionals to have this knowledge. Teaching on psychological first aid should be implemented and continued in the future, as once the COVID-19 pandemic is over, there will still be emergency, disaster and crisis situations which will need to be dealt with in the same way.

References

1. **Osoño A.** Primeros auxilios psicológicos. *Int Acad. Psicol.* 2007; **15**:4-11 [consultado 02 abr 2021]. Disponible en: <https://integracion-academica.org/attachments/article/173/01%20Primeros%20Auxilios%20Psicologicos%20-%20Aosorio.pdf>
2. **Bodon M.** Intervenciones de primera respuesta en situaciones de emergencia y catástrofes: "primeros auxilios psicológicos/emocionales". *Congr Memor.* 2020; **12**: 45-51 [consultado 02 abr 2021]. Disponible en: <https://www.aacademica.org/000-007/8.pdf>
3. **Abreu L, Valdez J, Esperón R, Olivares S.** El reto de COVID-19 respecto a la responsabilidad social de las escuelas de medicina: nuevas perspectivas profesionales y humanas. *Gac Med Mex.* 2020; **156**: 311-316. DOI: 10.24875/GMM.20000306
4. **Santander J, Pinedo J, Reppeto P.** Enseñanza de Psicología Médica en las escuelas de medicina chilenas. *Rev Med Chile.* 2012; **140**: 946-951. DOI: 10.4067/S0034-98872012000700019
5. **González S, Recino U, Álvarez Y, Pérez Y.** Potencialidades de la Psicología Médica para desarrollar el aprendizaje estratégico en el currículo de Medicina. *Edu Me Centro.* 2016; **8**:7-18 [consultado 03 abr 2021]. Disponible en: <http://scielo.sld.cu/pdf/edu/v8n2/edu02116.pdf>
6. **Balluerka N, Gomez J, Hidalgo M, Gorstiaga A, Espada J, Padilla J, et al.** Las consecuencias psicológicas de la COVID-19 y el confinamiento. 1th. ed. Bilbao: Editorial Universidad del País Vasco; 2020
7. **Domínguez J, Morales F, Landeros M.** La psicología de la salud en el plan de estudio de la medicina: razones de cambio. *Rev Cubana Med Sup.* 1999; **13**: 19-27 [consultado 03 abr 2021]. Disponible en: <http://scielo.sld.cu/pdf/ems/v13n1/ems03199.pdf>
8. **De la Fuente, R.** La enseñanza de la psicología médica en la Facultad de Medicina de la UNAM. *Rev Fac Med UNAM.* 2006; **49**: 51-53 [consultado 04 abr 2021]. Disponible en: <https://www.medigraphic.com/pdfs/facmed/un-2006/un062c.pdf>
9. **Puntunet M, Domínguez A.** La educación continua y la capacitación del profesional de enfermería. *Rev Mex Enf Cardiol.* 2008; **49**: 115-117 [consultado 06 abr 2021]. Disponible en: <https://www.medigraphic.com/pdfs/enfe/en-2008/en083g.pdf>
10. **Guarnizo A.** Vicisitudes y retos pedagógicos en medio de la emergencia sanitaria. La formación médica en tiempos de COVID-19. *Edu Med.* 2021; **21**: 34-37 DOI: <https://doi.org/10.1016/j.edumed.2021.01.008>

