

Emotional support in a crisis

Being with someone who is experiencing acute emotional upset happens to most people at some time. A common feeling is wanting to help... but not being sure what to do for the best.

Being awkward and anxious around someone who is distressed doesn't help anyone much. This briefing for teachers explains how to respond calmly and positively to someone who is distressed or upset. A simple [classroom activity](#) exploring students' attitude to providing emotional support follows the briefing.

Curriculum links: PSHE

When do people need emotional support?

People become upset for any number of different reasons. Distress can be a reaction to a common but disturbing life experience – an accident, a child hurt in a playground, someone injured in traffic – or after receiving bad news. Or it could be as a result of a very exceptional event, a plane crash, train derailment, major weather event or act of violence. Or it could be a build-up of many events, causing overload and stress.

Whatever the cause of the emotional upset, the principles of helping are broadly the same. And they hold good whether you are helping a stranger in a first-aid situation, or a friend, colleague or relative.

What is the first step?

Carry out a quick but thoughtful assessment of the situation. What is happening? Are there any hazards? Notice who else is around. Are they likely to be helpful, or otherwise?

Then, crucially, check yourself. Think about what shape you are in. How have you been affected by the situation? The aim is to be calm. If you are calm, you can help others. If you aren't, you probably can't, at the moment.

If you are calm enough to help someone else, that's good. If you are not, you might look for help for yourself.

What then?

If you are going to help, introduce yourself. Say your name, your position, if relevant, and what your intentions are. For instance, "I'm Jaz, I'm a teacher, and I'm here to help."

Then calmly say what you are going to do. This might be as simple as, "I'm going to sit next to you and we can talk about the best way to help."

You can then say what you notice – which is why it is important to do the observation above first. You might say that that person seems very upset, or has fallen, or seems to be bleeding. Ask how you can help.

They may not understand, especially at first. If they seem confused or unclear, keep what you say simple and remember that you might need to repeat yourself.

Ask what has happened, how they feel, what they need.

Bear in mind that you may not be able to make the problem go away. What the person is dealing with might be very upsetting. What they want to put things right might be impossible.

You might be seen as a threat, so keep at a reasonable distance. Don't crowd their space but show that you want to help

Is a hug the best form of comfort?

No. At least, it may be for some, but certainly is not for everyone. Since you cannot know whether you might be making things worse, it is better not to risk it.

Some people think that a comforting cuddle will let someone know that you care, that you appreciate what they are going through and that you are there to help. Unfortunately, it is not that straightforward. You might make someone feel physically awkward, restricted in moving around. They might be constrained from expressing themselves or even in thinking properly. In other words, you are bringing added discomfort.

A touch of the arm might show someone you care. But don't go further than that unless someone has indicated they would like it.

Luckily, there are better ways to show someone that they are not alone.

How do you help someone who is upset?

Good listening is a very good start. It is harder, and rarer, than a lot of people think. Give people time to talk. Give them space, too – don't crowd them. Make eye contact appropriately, but don't stare. Be physically still and relaxed, not agitated or using sudden body movements. When you talk, use a calm voice. Don't shout and don't whisper. Don't interrupt.

It is best to avoid false reassurance, such as, "everything will be okay". After all, it might not be. And even if it is, that is not how the person is feeling at that moment.

Offer non-verbal encouragement – "mmm" and so on. That can indicate that you are listening, and are happy to hear what the person has to say. A good way to show you have understood is to reflect out loud on what the person has said: "so, you're very worried about that," for instance.

All the time, watch how the person is responding. Listen and learn from what they tell you about how they are feeling. Adapt your style to suit them.

Accept their response – don't argue or disagree with them. If you think something else is advisable, such as a medical check-up, calmly explain why.

What are people like in a crisis?

In an emergency the chemistry of people's bodies can change dramatically. The so-called "flight or fight" response to a threat is the sudden release of the hormone adrenaline into the bloodstream.

Oxygen to the brain and muscles is increased, to gear the body to cope with something exceptional.

This bodily state is very handy for fighting or fleeing. But it can leave a person very jumpy, tearful, angry, confused and irritable. In this state, people find it difficult to concentrate, even to understand what is going on. They might find it impossible to follow a train of thought, or to carry out an agreed plan. They might want to get away, or be very insistent on some drastic action.

For these reasons, creating a sense of safety and an atmosphere of calm is the best and most important thing to aim for.

What are things to avoid?

Here are some basic mistakes to steer clear of:

- > Don't try to jolly people up and get them to look at the funny side. They might do that later, but your task is to respect how they're feeling now and help them deal with it, not suppress it.
- > Don't say things like, "I know just how you are feeling, just the same happened to me". This isn't empathy, it is more like boasting. It is very alienating and irritating. Can you imagine anyone thinking, "Oh, now I feel a lot better, knowing that someone else was distressed and upset in the past"? It is best avoided.
- > Don't hurry the next action. Always remember that a person who is upset is vulnerable and probably not in a state for successful decision-making.

Should someone suffering shock go to hospital?

It is very unfortunate that the word shock is used in two quite distinct ways.

To the medical world, shock means that the tissues of the body are lacking oxygen. Most often this is caused by bleeding, internally or externally. This is a life-threatening condition, and a medical emergency. This is what is referred to when, after an incident, news reports say that a number of people were treated in hospital for shock.

Another everyday use of the word shock isn't physical, but emotional. When someone hears bad news, or witnesses a worrying event, blood may drain from their face, they may feel wobbly and be unable to stand. They may shake and be tearful. These are unpleasant symptoms but they are not a medical emergency. Appropriate treatment is the emotional support described in this briefing. It is often spoken slightly as "tea and sympathy" – but is a very real help. Being shocked and upset is not the medical condition of shock. An ambulance isn't the best help.

What treatment do they need?

Simply, the best treatment is what makes someone feel better, and doesn't make them worse. So keep listening, acting on what you hear, while staying alert for further risks or danger. Be aware of cues that someone's level of pain, comfort and emotional state may be changing.

Try to manage the situation with respect, privacy and dignity. Be aware of who is around and do not ask unnecessarily personal questions.

When the time seems right, you can enable a move to the next step by providing options, thoughtfully and sensitively. Avoid telling someone what to do.

Show that you have been listening by suggesting choices that match what someone has been saying. If they haven't already said so, you can gently encourage by asking who and what might help them. Having contact with supportive others, such as family and friends, can be very helpful.

You could also suggest where to get further assistance, which will depend on the circumstances. Options could include a GP, psychiatric assessments via A&E (if someone is at risk of harming themselves or others), or helplines run by professional organisations such as Childline, the Samaritans, Saneline or Women's Aid.

Do not forget your own needs. Speak to someone you trust afterwards about how you feel and what you did. Providing such support can create many familiar and unfamiliar emotions, such as sadness, anger, worry and fear. If you keep feeling distressed, see your GP.

Classroom activity

Explore students' attitude to providing emotional support with this simple activity. Before trying it, you might like to read the teacher briefing above which provides much sound advice. Note that some of the advice is counter-intuitive – people's instincts about what to do are not always, on reflection, what works best.

Display the following statements so students can read them. Ask them to select one that they personally agree with, and one that they are not so sure about, perhaps disagree with entirely. Ask them to write down an explanation of why they agree or disagree. They should also note where their opinion comes from. Is it based on personal experience, listening to parents, carers or teachers, watching others in different situations, hearing about something that happened to a friend, watching soap operas, from books or magazines or somewhere else?

- > Crying doesn't do a person any harm – it's usually other people who want them to stop.
- > If I'm feeling bad, someone telling jokes to cheer me up can help.
- > People who are upset may find it hard to think clearly and make good decisions.
- > A stranger can help someone who is upset – simply listening carefully can be a valuable help.
- > If you yourself are not calm you may not be much help to someone who is upset.
- > Anyone who is upset needs reassurance that everything will be ok.
- > The shock from sudden bad news is not the same as the medical emergency of shock.
- > A hug is always a great comfort.

After a time of individual work, share opinions and explore similarities and differences.

Credits

This briefing is based on research and development work by Dr Sarah Davidson and was written by P. J. White and Dr Sarah Davidson. It was produced in March 2009. The classroom activity was published in December 2011. It was reviewed in June 2013.

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