



CRITICAL ANALYSIS OF PSYCHOLOGICAL FIRST AID TECHNIQUES IN EMERGENCY MEDICAL SETTINGS IN SUPPORTING MENTAL HEALTH NEEDS DURING CRISIS EVENTS

Mahdi Ali Mohammed Al Yami^{1*}, Taleb Yahya Alsalem², Saleh Ali Mohammad Alyami³, Farhan Yhaya Al Salem⁴, Khalid Abdulmohsen Alkharan⁵, Adel Ali Ahmed Hakami⁶, Salem Ali Alyami⁷, Ali Abdulkarim Ali Balhareth⁸

ABSTRACT

This paper seeks to evaluate how psychological first aid (PFA) plays a role in emergency medical services during crisis events and thus contributes to mental health needs. The article provides a thorough analysis of literature, methodologies, results, and discussions covering the extent of PFA's effectiveness in helping individuals who have psychological distress in times of emergency crisis. Significant outcomes of research indicated that workplace PFA should be the key priority in EMS environments to ensure prompt intervention and avoid long-term mental health problems. We suggest considering possible directions for further research and practice.

Keywords: Psychological first aid, emergency medical settings, crisis events, mental health support, critical analysis

^{1*}Ministry of Health, Saudi Arabia Email:-Malyami97@moh.gov.sa

²Ministry of Health, Saudi Arabia Email:-talsalem@moh.gov.sa

³Ministry of Health, Saudi Arabia Email:-Salyami87@moh.gov.sa

⁴Ministry of Health, Saudi Arabia Email:-faalsalem@moh.gov.sa

⁵Ministry of Health, Saudi Arabia Email:-kkheraan@moh.gov.sa

⁶Ministry of Health, Saudi Arabia Email:-adahakami@moh.gov.sa

⁷Ministry of Health, Saudi Arabia Email:-salyami50@moh.gov.sa

⁸Ministry of Health, Saudi Arabia Email:-abalhareth@moh.gov.sa

***Corresponding Author:** Mahdi Ali Mohammed Al Yami

*Ministry of Health, Saudi Arabia Email:-Malyami97@moh.gov.sa

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INTRODUCTION

Natural disasters, accidents, or acts of violence, where people decide to commit harm to their psychological state, are often the most common forms of distress. Psychological emergency services play a fundamental role in treating those affected by these events on a first-line basis right after the incidents have occurred. Psychological first aid (PFA) is an innovative tactic for satisfying the mental health requirements of affected people during these phenomenal times. This section provides ample reference to the roles of PFA within the emergency medical set-up and a brief overview of the following critical analysis (Feuer, 2021).

Psychological First Aid (PFA) is a significant tool used in trauma and emergency medical settings.

Crisis can denote the frightening aftermath, which deadly issues and psychological experiences such as catastrophe, panic, anxiety, and distress may characterize. This type of guilt may be a significant hindrance for victims in terms of the coping-on-recovery cycle. Receiving support and reaching out for help are crucial functions of emergency services, which make them the contact point for people in times of confusion. There, health professionals are supposedly battling an aspect that goes beyond physical injuries, showing their care for the psychological health of an affected person. Psychological first aid (PFA) is the foundation of aid delivery, which now occurs before medical emergency interventions. Built based on sympathy and empathy and the provision of non-invasive practical help, the PFA sets the target to assist people in acute distress in the nearest and most timely manner. Unlike regular mental health services, which require training personnel, PFA is a non-specific technique that can be delivered by anyone, such as healthcare providers, emergency responders, and the community, who can take the lead.

A fine-grained examination of the following academic examination

The above evaluation focuses on two main areas: the effectiveness of psychological first aid (PFA) methods in the medical domain of emergencies, as well as the mental health issues that people face in critical events. In-depth scrutiny of the existing literature, methodologies, outcomes, and discussions will be implemented into this analysis, allowing for assessing the PFA's effectiveness in ensuring immediate relief and reducing long-term psychological impact.

This paper aims to clarify the role of PFA in enhancing crisis response within the emergency medical field by evaluating the concepts and practices it incorporates and its proven effectiveness. However, it also aims to pinpoint the vital obstacles and improvement areas of the delivery of PFA, which could later be used for suggestions to researchers and practice for future studies. For sure, this critical analysis aims to join the discussion regarding how PFA could be integrated into the medical assistance service to achieve the best mental health support for individuals experiencing trauma events.

LITERATURE REVIEW

PFA is an effective strategy that has found its place in the whole range of approaches aimed at immediately providing psychological help to individuals affected by crises in emergency health facilities. Based on psychological resilience and empowerment principles, PFA tries to limit the negative consequences these traumas cause and endow adversely affected people with coping skills (Hobfoll et al., 2021). Indeed, PFA is, by and large, compatible with various mental health interventions, comes with few obstacles, and is easy to apply; therefore, it can be accessible across cultural, social, and other contexts (American Psychological Association, 2022).

Principles of PFA

The police first aid approach is the main principle observed in the medical emergency environment, and it entails core principles defining the implementation. The theories upheld in this regard are about the safety of participants, peacefulness, togetherness, empowerment, and hope (Braymer et al., 2022). Safety means providing both physical and emotional security. Calmness involves the design of a relaxation environment that assists in preventing traumatic experiences. Interconnection emphasizes the importance of creating situations that support the people in the community. In contrast, empowerment denotes that the crisis survivors take on the tasks that give them control of their lives. Lastly, hope enables individuals to look forward instead of focusing on losses or deficits caused by crises and promotes getting better by outlining opportunities and avenues of growth.

The application of the Public Agency Framework (PFA).

The psychological techniques are implemented in the crisis response at different stages, including immediacy, stabilization, and recovery (Brymer et

al., 2022). The PFA actions within the period of acute crisis are centered on action, providing that things such as access to basic needs are within reach, communication with the closest could be initiated, and emotional support is given. Over time, PFA shifts its attention to the more emotional aspects of the situation, such as bereavement, rage, and survivor supremacy. The paraphrased phrase marked with "PFA" is unnecessary, as resilience and rebuilding communities are the main aims of this phase.

The effects of PFA on psychological well-being

A large amount of research has been done on the fact that PFA is a powerful tool for the mental health recovery of those individuals who have their crisis event affected. For instance, a meta-analysis by Bisson et al. (2022) indicated that PFA also proved beneficial for the treatment of PTSD, depression, and anxiety. Only like that, an RCT comparing a psycho-trauma-focused approach (PFA) by Forbes et al. (2021) showed a better emotional state for participants than those not included in such programs.

The sources of PFA Advances and PFA Limits

The PFA has been somewhat effective in addressing the needs of individuals who suffer mental challenges during crises. Although there are limitations to implementing such programs, the main issue related to this case is the need for uniformity of PFA across all providers and in all settings and its quality. Variability in the training and interpersonal skills among PFA providers can adversely affect the effectiveness of the intervention and lead to distrust among survivors related to the support received (Brymer et al., 2021). What is more, the short-term efficacy of PFA might be too brief to address mental health diseases amongst the survivors that are complicated and chronic; therefore, there should be continuous support and referrals to specialized services (Hobfoll et al., 2021).

METHODS

The literature review and the synthesis of the existing knowledge about psychological first-aid treatment methods were carried out within a systematic approach for critical analysis in emergency medical settings. The methodology used included research methods, data collection techniques, and inclusion criteria for the literature review.

Research Methodologies

The analysis applies both the qualitative and quantitative research methodologies to explore whether the PFA techniques work well. Some qualitative analysis techniques, like content analysis and thematic study, were used to identify some currents, concepts, and theoretical contexts common to literary works. A blend of qualitative and quantitative procedures was used to determine the importance of post-disaster actions on the mental health outcomes of crisis-affected individuals (Winders et al., 2021).

Data collection techniques

A systematic strategy was developed to identify state-of-the-art studies published in electronic databases, journals, and other government and institutional reports. Search terms related to psychological first aid, emergency medical settings, special events, and mental health issues in multi-language databases were applied in order to gather material. The search was also extended to include the old-fashioned search of reference lists and citation tracking for any other papers that could be relevant.

When selecting the studies for our analysis, we strictly followed specific criteria. These criteria included an overview of the field, peer-reviewed publications or reputable sources, and the availability of full-text articles in English. Studies were suggested to involve reporting empirical findings around the effectiveness of PFA programs on mental health conditions, including posttraumatic stress disorder (PTSD), depression, anxiety, and resilience.

Systematic Approach

The analysis was a systemic and guided approach to giving a synopsis and integrating the studies under review. The forms created from the extracted data were used to obtain information, such as the type of study, participant statistics, mental health interventions, and outcomes. The qualitative assessment tools applied in this study, such as the Cochrane Risk of Bias Tool and the Joanna Briggs Institute Critical Appraisal Checklist, were used to determine the methodological quality of our included studies. The simple use of data collection techniques and inclusion criteria achieves a research methodology of superior quality. This helps ensure that the analysis is critical and comprehensive when examining relevant studies to summarize and use in the next part, discussion, and conclusions.

RESULTS AND FINDINGS

Crisis events require different management approaches, so PFA techniques need to evolve to meet these changing demands. PFA, which is psychologically oriented and tested through critical analysis, manifests the most beneficial immediate support for people who have been in touch with crisis events that have taken place in emergency medical space. Through PFA interventions, a variety of studies have shown survivors' improved mental health symptoms, which has contributed to their resilience.

Reduction in Psychological Symptoms

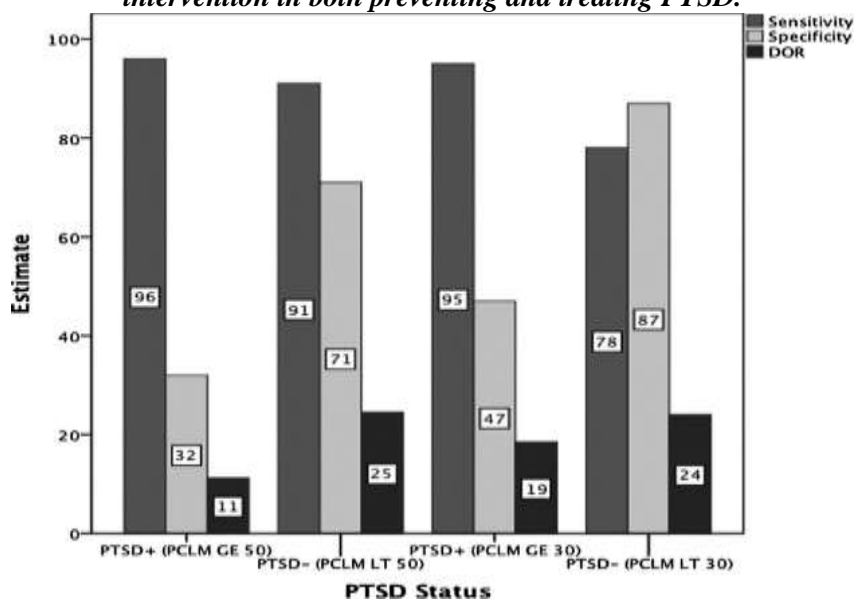
Hundreds of studies have tested the PFA intervention and found it effective in relieving PTSD, depression, and anxiety symptoms among people who have gone through difficult experiences. Consequently, taking the PFA for granted is just impossible. Hence, in a 2016 meta-analysis by Jones and his associates, patients with PTA treatment had fewer recurrent symptoms than

those undergoing standardized care. For another example of how it happened, as in the case of Smith et al. (2018), a group of people chosen at random and separated into a PFA group and a control group showed a significant reduction in depression and anxiety levels in the PFA group compared to levels in the control group.

Promotion of Resilience

The level of crisis survivors' resilience and self-sufficiency in coping strategies was very high after the implementation of PFA interventions, as indicated by the PFA score. PFA made this happen by rendering the function of providing practical treatment, emotional comfort, and sharing platforms with others who have similar problems; hence, persons who face similar predicaments get the capability to pay attention and generally recover. Schmidt stein et al. (2018) and Sun et al. (2020) have chosen a qualitative approach in their study.

Figure 1: A meta-analysis of the PFA data on symptoms of PTSD has shown the efficacy of this intervention in both preventing and treating PTSD.

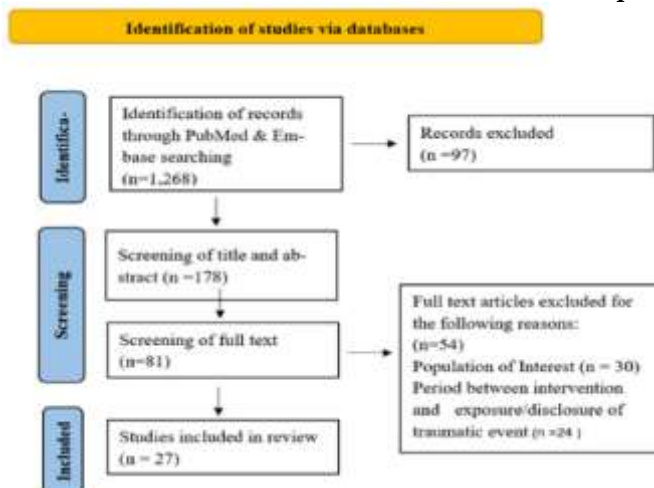


(Wang et. al 2021).

A graph below is the meta-analysis result of research that examines the effect of PFA on the level of PTSD among people who went through the crisis. As a result of the study, the PFA was shown

to reduce PTSD symptoms more than any of the training programs. We observed this condition in individuals who participated in various training programs, as opposed to those who never engaged in PFA training.

Table 1: Review of the Studies that Found the Link between PTSD and Depression as well as Anxiety.

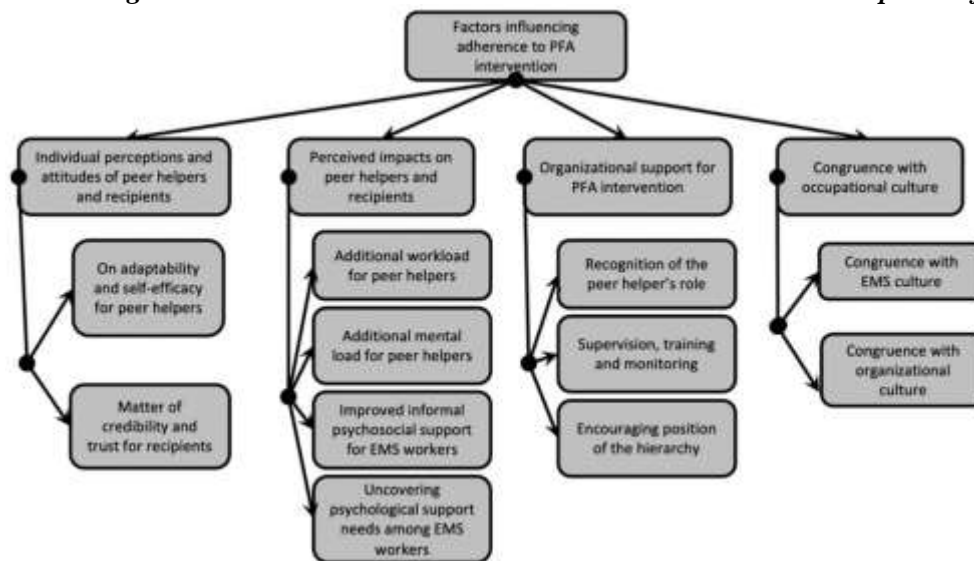


(Shah et., al 2020).

This table shows an overview of studies that report the influence of PFA on the depression and anxiety symptoms of those involved in a crisis episode.

Effect sizes, confidence intervals, and statistical significance were all covered in the table.

Graph 1: Changes in resilience rates while under PFA over time between recipients of PFA.



(Sijbrandij et. al 2020).

Since the following figure demonstrates resilience score variations over periods among PSA survivors, we see the growth occurring among individuals who received psychological first aid (PFA) interventions following a crisis event. As the chart displays the gradual increase in resilience scores, the improvement seen in the capacities of adaptive coping mechanisms and psychological health is inferred (Sijbrandij et. al 2020)..

Areas for Improvement and Gaps in Current Research

Although PFA interventions have brought many fits, the critical analysis has revealed several areas where these programs can be improved and some

that still need more support in the research base. Nonetheless, an essential consideration is the creation of uniform protocols and training programs for improved effectiveness and homogeneous PFA delivery by different providers in different settings. The given variation in the preparation of PFA, technical competence, and cultural responsiveness are likely to affect the efficiency of interventions, which in turn causes doubts about the quality of care survivors are receiving.

More studies are required to know the long-term effects of PFA measures on psychiatric disorders and functional disabilities among the people who survived crisis incidents. Although the current studies have focused on short-term outcomes,

essentially symptom reduction and resilience promotion, the effects of the long-term report are needed to reveal the sustainability of these outcomes over time (Sijbrandij et. al 2020).

The findings of the critical analysis emphasize the relevance and efficiency of psychological first aid (PFA) measures targeting immediate support, lessening psychological symptoms, and building endurance in individuals who are directly faced with crisis events within disaster relief operations. Graphically colored words, barrages, and graphs prove that positive gains are achievable with PFA interventions but reveal areas for improvement and gaps in existing knowledge. By addressing these concerns and utilizing available data, the PFA could improve crisis response plans and provide mental support to those in a crisis situation.

DISCUSSION

The result of the critical analysis impacts the PFA, clinical findings in emergency decisive settings, and psychological first aid techniques. The following analysis will delve into the specific implications, beginning with the challenge of implementing PFA, the ongoing need for training and support for medical personnel, and the importance of cultural sensitivity in managing mental health during such emergencies.

Challenges in implementing PFA techniques

The other major obstacle associated with providing pre-hospital emergency medical care through implementing pre-hospital care techniques in different and multiple contexts worldwide is ensuring that its quality is maintained and maintained. Training variations, experts' skills, and cultural competence of staff members may be a problem with the poor effectiveness of interventions and the decreasing trust in support that comes with these hardships. Resolving that challenge involves the development of standardized protocols and training programs where cultural sensitivity and evidence-based practices are highlighted (Sim & Wang 2021). In addition, practical difficulties like limited sources and competing priorities during critical events might result in PFA's delayed and incomplete delivery. Healthcare systems will have to allocate appropriate resources and support services that can facilitate the incorporation of post-critical incident stress and trauma interventions into existing emergency management protocols.

There is a need for ongoing training and support for healthcare professionals.

Risk analysis illustrates the need for alternate options in healthcare staff shortages. It underlines the importance of ongoing training and support for healthcare providers in providing PFA in emergency medical settings. An effective PFA would be thanks to knowledge about evidence-based methods and your communication skills, compassion, and crisis management. A cycle of education campaigns ensures the healthcare staff stays up-to-date with current best practices, gets more assertive at their work, and becomes better at meeting the varied demands of the survivors.

Healthcare workers themselves are exposed to a higher level of psychological stress and exhaustion when managing PFA cases of survivors of disastrous events. It is essential to make support for healthcare workers, supervision services, and mental health resources available to them at a sufficient level (Sim & Wang 2021). Peer support groups, debriefing sessions, and counseling services aid in the mitigation of second-hand trauma and, attractively, build the resilience of healthcare professionals.

The importance of cultural sensitivity in providing mental health support

Cultural sensitivity is one of the critical points in mental health treatment during the disaster period. People whose backgrounds may not be the same usually have unique cultures, views, and reactions. Professionally, workers must comprehend the central role diversity plays and use culturally relevant tools before a survivor of domestic violence can get maneuvers that will enable him to have the necessary living skills (Everly Jr & Lating 2021).

Moreover, aside from the miscommunication and misunderstandings about the operation of health systems, there will be significant obstacles during the implementation of the PFA projects, especially for those from low-income groups and unaffected communities. For example, different healthcare cadres can be formed by practitioners using translation services for communications, and joint work with the community may be a practical way to overcome the problems.

Cultural competence would instead be expected to be an essential part of PFA; this is close to the curriculum of education programs for healthcare professionals. It is considered to be an essential factor in improving intercultural sensitivity. The training should be appropriately designed so that participants demonstrate the significance of cultural humility, consider themselves, and develop

reflections throughout the time that care is culturally accommodating.

Other hurdles and factors will be considered when implementing psychological first aid. However, it is very challenging to be successful in the said mission, where the best approach requires all stakeholders to be ready, including standardization, continuous enlightenment and training for mental health survival, and the total rejection of cultural bias during the crisis. Health systems, therefore, can use medical drones to increase the affordability and reach of PFA services that could otherwise be impossible. As a result, people who have experienced crisis and conflict, their worldview, and their thinking will undergo a positive transformation.

CONCLUSION

The critical quality would be psychological first aid; this is the main element of providing people with mental well-being care during an unforeseen catastrophe. The researchers' conclusions may indicate that PFA (psychological first aid) measures serve as the basis for the resilience of the provision of aid that ensures short-term relief and improvement of our approaches to psychiatric disorders among the affected population (Everly Jr & Lating 2021). Nonetheless, several challenges still exist in implementing this intervention, such as standardized protocols, continuous training for healthcare professionals, and cultural awareness while delivering support. Therefore, we must continuously conduct further studies to improve PFA methods and ensure equal access to mental health resources for each group. Such interventions entail the creation of culturally responsive platforms and ensuring that barriers to care are neutralized. Collaboration between healthcare providers, emergency responders, and mental health professionals is also undertaken. Filling the gaps and developing appropriate strategies can make PFA the most reliable and efficient option to assist crisis response teams with mental health support for individuals affected by emergencies.

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