

PROVISIONAL VERSION

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WHO Library Cataloguing-in-Publication Data

Psychological first aid during Ebola virus disease outbreaks.

1.Crisis Intervention - methods. 2.Disease Outbreaks. 3.Haemorrhagic Fever, Ebola - psychology. 4.Adaptation, Psychological. 5.First Aid - psychology. 6.Stress Disorders, Traumatic - psychology. I.World Health Organization.

ISBN 978 92 4 154884 7 (NLM classification: WM 401)

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This document is an adaptation of the *Psychological first aid: Guide for field workers* (World Health Organization, War Trauma Foundation, World Vision International, 2011) to include relevant information to respond to Ebola virus disease outbreaks.

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Suggested citation: World Health Organization, CBM, World Vision International & UNICEF. *Psychological first aid during Ebola virus disease outbreaks* (provisional version). WHO, Geneva, September 2014.

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Psychological first aid during Ebola virus disease outbreaks

FOREWORD

Ebola virus disease outbreaks have a significant impact on the wellbeing of those affected, their family, community members and the health workers treating people with Ebola.

This guide focuses on **psychological first aid**, which involves humane, supportive and practical help to fellow human beings suffering serious crisis events. It is written for people who can help others experiencing an extremely distressing event.

This guide is an adaptation of the *Psychological first aid: Guide for field workers (World Health Organization, War Trauma Foundation, World Vision International, 2011).* It has been adapted to better respond to the challenges of Ebola virus disease outbreaks. Ebola poses specific problems for affected people (e.g., stigmatization, isolation, fear, and possible abandonment), their caregivers and responders (e.g., safety, access to updated information).

Psychological first aid has been recommended by many expert groups, including the Inter-Agency Standing Committee (IASC) and the Sphere Project. In 2009, the World Health Organization's (WHO) mental health Gap Action Programme (mhGAP) Guideline Development Group evaluated the evidence for psychological first aid and psychological debriefing. It concluded that psychological first aid, rather than psychological debriefing, should be offered to people in severe distress following recent exposure to a traumatic event.

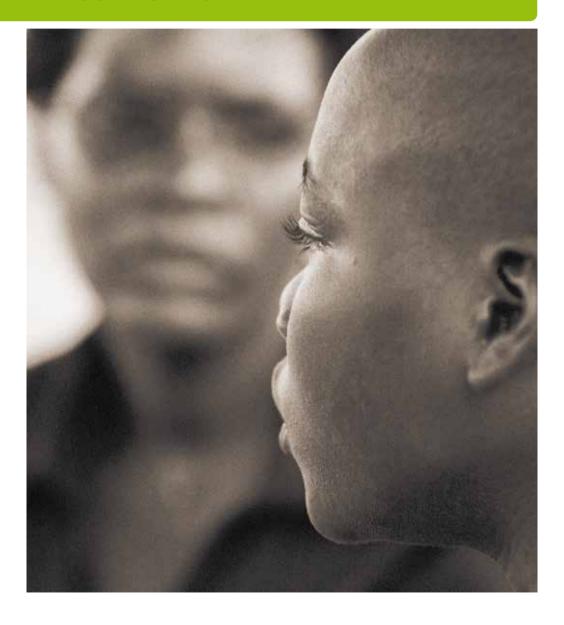
Endorsed by many international agencies, the original Psychological First Aid Guide reflects the emerging science and international consensus on how to support people in the immediate aftermath of extremely stressful events.

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INTRODUCTION

UNDERSTANDING EBOLA VIRUS DISEASE



IN THIS CHAPTER WE DISCUSS:

- A WHAT IS EBOLA VIRUS DISEASE?
- B HOW DOES IT SPREAD?
- C HOW CAN IT BE PREVENTED?



Ebola virus disease is a severe, infectious disease that can be fatal (the case fatality rate of the 2014 outbreak in West Africa is about 50%). However, health care substantially increases a person's chance of survival.

Appropriate infection prevention and control measures in treatment centres and hospitals, at community gatherings, during burial ceremonies and at home can help reduce the spread of the disease. You can protect yourself, your family and your community by following the advice on these measures below.

WHO IS AT RISK OF EBOLA VIRUS DISEASE?

A person is at risk if they have:

- » spent time with someone sick with Ebola or;
- » attended a funeral of someone who has recently died with symptoms of Ebola.

SIGNS. SYMPTOMS AND COURSE OF ILLNESS

Ebola starts suddenly with a high fever. A person with Ebola feels very tired, has a headache and aches in the body, and does not want to eat. The time from infection with the virus to the onset of symptoms is 2 to 21 days.

The person with the Ebola virus can infect others as soon as they begin to have symptoms.

Early-stage Ebola disease may be confused with other infectious diseases (e.g., malaria) because the initial symptoms are nonspecific. These symptoms include a high fever and extreme tiredness, often accompanied by appetite loss, headache, and body pain.

As the disease progresses, people begin to experience vomiting and diarrhoea.

Blood in vomit or stool is seen among severely ill patients, mostly in **later stages**, and is often followed by death within days.

In non-fatal cases, the person may improve around days 6-11 and will no longer be infectious.

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