

MENTAL HEALTH



ETIQUETTE GUIDE

EXCUSE ME, WE NEED TO TALK ABOUT
GOOD MANNERS AND WELL-BEING

MENTAL HEALTH ETIQUETTE GUIDE

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WE NEED TO TALK ABOUT
GOOD MANNERS
AND WELL-BEING

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Authors: COMON and Cruz Vermelha Portuguesa

Editing: AP PORTUGAL

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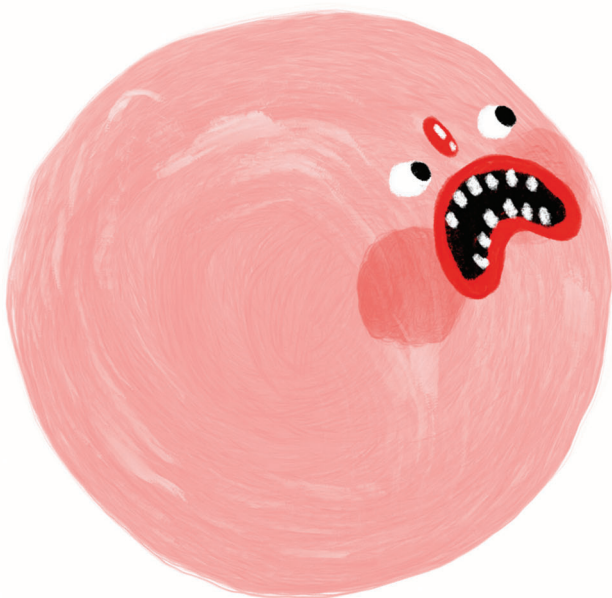
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CHAPTER 1

WHAT IS THIS





GUIDE FOR?

Welcome to our mental health etiquette guide We've all heard about good manners at the table or at social events, but what about when it comes to mental health? What are the best ways to communicate with others, offer support, and create an environment where everyone feels safe to share how they're really feeling? That's exactly what we're here to explore.

In this guide, we'll share practical tips on how to support someone going through a tough time, while also introducing an essential, but still unfamiliar, concept for many people: psychological first aid.

If the first thing that comes to mind when someone mentions first aid is bandages, plasters, and gauze, we can tell you that this in this case it's a bit different. You can't fix everything with a plaster, and our emotions are a clear example of that.

Sometimes, life throws us a curveball that leaves us unsure of what to do next. Psychological first aid is, quite simply, a set of straightforward strategies you can use during these moments of emotional crisis.

So, if you've ever found yourself not knowing what to say to a friend who was feeling down, or felt unsure about how to handle a certain situation, this guide will come in handy.

We're going to explore how small changes in the way you communicate can make a big difference, why traditional etiquette rules don't always support mental health (and can even get in the way), and how you can offer meaningful support to others.

By the end, we hope you'll feel more confident dealing with emotional challenges (both your own and other people's) and that this guide helps you build more empathetic, healthier relationships.

No, this isn't a self-help book promising quick fixes for all of life's problems, but it is a guide that will help you face them.

HOW DO SOCIAL NORMS



IMPACT OUR D MENTAL HEALTH?

CHAPTER 2

Etiquette is a set of social and behavioural rules we learn from a young age that guide how we interact with others in different situations.

It's the reason we say things like 'please' and 'thank you,' cover our mouths when we cough or sneeze (thank goodness), avoid talking with our mouths full (humanity appreciates it), or don't blast music in public spaces (more people need to read this part).

But it's also behind things like suppressing emotions or feeling guilty for putting yourself first.

Want proof? Try this quick test:

	Yes	No
I've accepted an invitation even though I really needed some time to myself.		
I've felt uncomfortable in a situation but stayed quiet because speaking up would seem rude.		
I've agreed to do a favour I didn't want to, or couldn't, just so I wouldn't come across badly.		
I've held back from reacting to a hurtful comment to avoid making things awkward.		
I've felt guilty for not replying to a message right away, even though I was busy.		

If you answered 'yes' to any of these questions, it means that, at some point in your life, you've allowed the rules of etiquette to get in the way of your well-being.

While etiquette rules can be helpful for organising our lives in society, they can also be a source of anxiety and discomfort when they affect our mental health. Don't worry, though - this doesn't mean we're encouraging bad manners.

We can define mental health as our emotional, psychological, and social well-being. It's the foundation of overall well-being and refers to a level of cognitive or emotional quality of life, or the absence of mental illness.

It involves how we think, feel, and behave in our everyday lives, as well as our ability to cope with anxiety, maintain healthy relationships, and make balanced decisions.

Having good mental health doesn't mean you're always happy and cheerful, but rather that you're able to manage your emotions and seek support when needed.

In this guide, we want to show you how, often, we harm ourselves - and others - when we focus solely on the rules of etiquette. We'll also share techniques that can make conversations about mental health simpler and more open.

You'll realise that there are small details that don't require much effort, but can make a big difference in how you interact with others. These simple changes will help reduce the social pressure you might often feel when discussing emotions or feelings.

But before we dive deeper, here's a tip: if you feel that your mental health isn't good in a good place right now, skip ahead to Chapter 10, where you'll learn some self-care techniques.

If you're not sure about how you're feeling, take the World Health Organisation's well-being test to get a better idea.

World Health Organisation (WHO) Well-being Test


Please indicate for each of the five statements which is closest to how you have been feeling over the last two weeks

During the last 2 weeks	All of the time	Most of the time	More than half of the time	Less than half of the time	Some of the time	At no time
1. I have felt cheerful and in good spirits	5	4	3	2	1	0
2. I have felt calm and relaxed	5	4	3	2	1	0
3. I have felt active and vigorous	5	4	3	2	1	0
4. I woke up feeling fresh and rested	5	4	3	2	1	0
5. My daily life has been filled with things that interest me	5	4	3	2	1	0

Score:

Calculate the sum of the values of your five answers to find your score. '0' represents the worst possible quality of life, and '25' represents the best.

If your score is below 13, or if you answered 0 or 1 to any of the 5 questions, you should read Chapter 10 of this guide or call the helpline 808 24 24 24 and ask to speak with a psychologist.



AND WHAT IS PSYCHOLOGICAL FIRST AID

CHAPTER 3

It can be daunting to think about psychological first aid. At first glance, this term may seem associated with something technical or medical, only available from someone trained in psychology or related fields. But don't worry, because this couldn't be further from the truth.



Psychological first aid is, in essence, a way to help others when they're going through emotional distress, helping them feel calm and supported. It involves offering support to help them cope with difficult moments, providing emotional and social assistance, and helping them make informed decisions.

Paying attention to people's reactions, listening with empathy, and offering practical help are all behaviours that form part of the response to emotional instability, and fortunately, they're things we all know how to do.

As in any social situation, there are some implicit and explicit rules that guide how we interact with others.

However, these rules of good manners can often become harmful, especially when they influence our comfort level in expressing emotions and feelings.

When we don't ask for help, out of fear of being a burden.

When we feel compelled to say 'yes' to certain requests to avoid seeming rude.

When we continue interacting with toxic people just for the sake of politeness.

And we could go on with many more examples, but we don't want to run out of space in the book.

But it's not just the moments when we follow the rules of good manners that harm us. There are also situations where not following these rules can affect others. See if you recognise any of these situations.

Rush hour
6:37 P.M.

Traffic is at a standstill. Tension builds up. In the distance, we realise there's been an accident. Curiosity kicks in. As we get closer to the scene, instead of just passing by naturally, we decide to stop and watch everything that's happening.

Fire zone
8:00 P.M.

A wildfire has devastated a large forest area in Portugal. Several people have lost their homes to the flames. A TV news station conducts an interview with one of these individuals, clearly in shock.

School
10:00 A.M.

We receive dozens of notifications on phones. The conversation in the WhatsApp groups seems lively, given the number of messages flooding in. What's all the fuss about? A video, filmed in a school, showing two children fighting.

These are just three of many examples of situations that disrespect the rules of interacting with others, stripping away the dignity of those involved, and potentially reinforcing the negative feelings they are experiencing.

True etiquette goes beyond following good manners or not: involves the ability to comfort and support in a respectful and discreet manner, ensuring that those who are suffering feel supported without compromising their privacy and dignity.

Now, let's take a closer look at what we should and shouldn't do when offering support in times of crisis.

Psychological first aid includes:

- Comforting someone in emotional distress and helping them feel safe and calm, in a dignified environment.
- Assessing the person's needs and concerns.
- Protecting individuals from further harm (sometimes, simply shifting the person's perspective can help).
- Providing emotional support.
- Assisting in meeting immediate basic needs, such as food, water, a blanket, or a temporary place to rest.
- Helping people access social services and support, or information about missing relatives.

Psychological first aid is not:

- Something only professionals can provide.
- A psychology session or therapy.
- Pointing out that someone doesn't 'look okay.'
- Contributing to scaremongering.
- Digging for details just to share them later with friends.
- Calling an astrologer to weigh in on the situation.
- Watching like a bystander.
- Pressuring someone to share their feelings or talk about what happened.

Psychological first aid can be applied by anyone with some basic training in the area, but there are a few key things we should all be aware of:

- How to assess a situation;
- Common patterns of reactions during a crisis;
- How to safely approach people in emotional distress;
- How to stay calm and manage overwhelming emotions (both your own and those of the person you're helping);
- How to offer emotional support and practical assistance.

It might sound like a lot, and you may be thinking, 'There's no way I can handle all that.' That's exactly why this guide exists. Keep reading - you'll likely find answers to many of your questions.

It's not always easy to understand how to apply all this in everyday life. That's why we're sharing the testimony of journalist Margarida David Cardoso. In it, Margarida recounts a moment from her professional experience - an interview that made her reflect on boundaries, empathy, and the importance of respecting someone else's emotional space.

We sit face to face in a room that's usually used for consultations, where a psychologist or psychiatrist would typically be seated across from her. I don't realize, at first, that this setting is already a poor choice. The relationship a journalist tries to build with an interviewee risks resembling a confession. Worse still, it could be mistaken for a therapeutic setting. When the topic is so intimate, how do you avoid that risk? She's just turned 18. She talks about being bullied at school, abused at home. About how an eating disorder led to multiple hospitalisations. And how abuse and abandonment pushed her toward suicidal thoughts.

A journalist interviewing someone in a moment of great vulnerability must navigate a delicate line of consent. They're constantly trying to assess whether the person

understands the public nature of the conversation and is aware of the potential impact of sharing their story. They also need to be careful not to come across as condescending. There's an ongoing effort to gauge a kind of emotional awareness: 'What you just shared is really tough. Do you think it's okay for me to include that in the story?'

'What do you most want others to understand from your experience?' Then, from that small window into someone's intimate world, the journalist must decide what to share and how to share it.

I didn't use much of the interview with her. Because I failed her, firstly, by not clearly setting the boundaries of that conversation. I slipped into the role of a friend, and I was never able to truly assess whether those fragile, painful words came with a full understanding that they would be made public. (It made her earlier sentence, one I had once taken as a compliment, feel chilling in hindsight: 'This is the first time I've ever told anyone this.' Should that moment of vulnerability really happen in front of a journalist, on the record?) Secondly, because when she began to tremble, with small, hesitant tears and her hands gripping her marked wrists, I chose to set aside any journalistic purpose that conversation might have had. Maybe parts of her story could have meant something to someone going through a similar situation - she wanted them to. But I didn't know how to fit such raw, overwhelming pain into the framework of consent. So I took the risk of being paternalistic and made the decision for her.

(I was about to leave. We'd probably never see each other again. So many journalists wonder whether there's anything fair about this lightning-fast exchange of intimate facts with someone who's just arrived and already about to go.)

The journalistic code of ethics says a journalist must not disturb someone's pain. Regardless of profession, any attempt to act with empathy should follow that same principle. But it was a few simple ideas I had read about psychological first aid that made me stop recording without hesitation in that moment. "Psychological first aid is not about asking someone to analyse what happened to them. It's not about encouraging a detailed discussion of the critical event that caused their emotional distress."

Those sentences had been underlined just a few pages back in my notebook. That interview was exactly that - a deep dive into the details of someone's suffering. That was what I had been looking for in that unequal relationship.

It wouldn't have been such an obvious decision before the class where I copied those sentences, taught by a psychologist to a group of laypeople.

In that moment, helping her feel safe and avoiding any further harm didn't seem compatible with asking her to weigh every word others might later hear. Prioritising her well-being had to come first. But that doesn't mean - and I believe this strongly - that her right, or that of anyone in a similar situation, to be heard and represented should be suppressed or restricted. For a long time, journalists have pushed back against the era when people with potentially traumatic experiences had no right to tell their own stories, when others spoke for them. The narrative of her story belongs to her. Telling it with care, balancing between condescension and the risk of deepening the wound, is a more delicate and demanding exercise than I had once realised. But it's a balance we must strive to find.

Margarida David Cardoso
Journalist

WHO NEEDS PSYCHOLOGICAL



We all go through situations and events that we perceive as stressful at some point in our lives. Whether it's losing internet connection right before an important presentation, feeling like the entire world is out to get us in traffic, or missing the alarm on the day of an exam we've been studying for weeks.

FIRST Aid?



Most of us learn to manage these challenges and accept them as part of life. However, there are times when it becomes harder to cope - especially when we're faced with highly unusual or demanding situations, or when stressful experiences start piling up over time.

CHAPTER 4

When an experience becomes overwhelming, it can lead to a psychological crisis - big or small - depending on the impact of the event, the support system available, and each person's individual capacity to cope.

Being in a crisis situation can reduce our ability to act and make decisions. This is where psychological first aid comes in, as a way to support people affected by the event, helping them regain a sense of control over their lives and reduce their distress.

To offer psychological first aid safely, we need to be prepared for the wide range of reactions people may have. After all, when we're in crisis, we often forget the so-called rules of politeness and struggle to regulate the intensity of our emotions, which can lead to unexpected or intense responses.

So be prepared, as you might have someone telling you their life story in detail, including an argument they had with their cousin in 2008, laughing uncontrollably because their brain decided that was an appropriate response to the situation, or even shouting at you when you're just trying to help.

Some examples of reactions are:

Physical reactions

Body aches, headaches, stomach pain, fatigue, difficulty falling or staying asleep, nightmares, low or high energy levels, trembling, rapid heartbeat, nausea, vomiting or diarrhoea, and changes in appetite.

Cognitive reactions

Difficulty concentrating, losing track of time, difficulty making decisions or solving problems, difficulty remembering things, feeling like they're reliving the event.

Emotional reactions

Anxiety, fear, nervousness or panic, concern that the situation might happen again, sadness and numbness, feeling disconnected and distant from others, feelings of guilt, shame, embarrassment, anger, and irritability.

Interpersonal reactions:

Isolation, feeling misunderstood, conflict with others.

Behavioural reactions:

Impulsiveness, avoiding things that remind them of the situation, not wanting to talk about it, substance or alcohol abuse.

Shall we look at a practical example?

Nuno had a car accident. The impact was strong, but he managed to get out without serious injuries. However, when he looks at the other vehicle involved, he sees the driver unconscious and trapped in the wreckage. The sound of horns, alarms, and the voices of people approaching leaves him dazed. The headlights' glare seems to blind him, and the feeling that everything is happening too fast overwhelms him. While some people call emergency services, Nuno stands by the car, unable to act, as if he's frozen.

In this case, providing psychological first aid to Nuno will help him process what happened, giving him the support he needs to manage his emotions, alleviate the initial impact, and begin the recovery process.

And what about children?

It's important to keep in mind that you may need to use psychological first aid with children, and that they will naturally have quite different reactions from adults.

Babies (up to 2 years old)

They may retain memories, images, or smells related to the events. They may show increased crying, a need to be held, irritability, or passivity.

Children (from 2 to 6 years old)

Fear of being separated from their caregivers, feelings of helplessness and lack of control. They may become more withdrawn or enter a state of denial. They may return to developmentally regressed behaviours, such as thumb-sucking, bed-wetting, or fear of the dark. They may re-enact parts of the distressing experience during play.

Children (from 6 to 10 years old)

They are more capable of understanding complex issues. They may experience feelings of guilt, failure, or anger. They may fantasise about being the 'saviour' or want to talk about the event frequently. They will seek ways to regain control. They may show regressive behaviour and refuse to speak or communicate with others.

Teenagers (from 11 to 18 years old)

They may react similarly to adults, feeling irritated, rejecting rules, or showing aggression. They may become more impulsive and engage in risky behaviour, such as alcohol or substance abuse, self-harm, and unhealthy eating habits.

As you've seen, each person reacts differently to a crisis situation. However, regardless of the reaction, one thing is certain: these moments can leave their mark.

Journalist Maria João Ruela experienced this impact first hand. In her testimony, she shares an experience that shows the emotional weight the way we approach others can have.

'Ahh! Are you limping? Did you hurt yourself?'

From time to time, I'm confronted with this question, to which there's only one possible answer, which is the one I usually give: 'I'm like this,' leaving almost always an uncomfortable situation for the person who only meant to be kind. But what alternative could I give, if I really am like this?

Over 20 years ago, I acquired this condition, affecting my left leg, and I know there's nothing more I can do. I didn't hurt myself, I didn't twist my ankle, nor do I have an ingrown nail. I was hit by a bullet that destroyed my sciatic nerve. I can't move my foot or part of my leg, which forces me to limp. I've learnt to live like this.

This fact always puts me in a more comfortable position, in front of the embarrassed person, 'don't worry, you couldn't have known' - it's also one of the responses I usually give, to unblock the situation and the conversation.

There are life events with impacts whose extent is not immediately perceived or assessed. I've always been able to cope with physical disability, I've always minimised its impact on my daily life, but it's there, it's always present, conditioning who I am and what I do.

I believe that if I had known about the concept of Psychological First Aid, as explained in this guide, at that time, emotional recovery might have happened more

quickly, by understanding how to act, how to feel calmer, or how to seek the necessary support.

In the first months, even years, after acquiring this condition, it served as a goal, if you will, as an objective to overcome. It was ambition that drove me, and I did everything I could to minimise it. Until the moment I was “discharged”, the paper signed, permanent disability acquired, making it definitive. And then?

I came to realise that I needed to find other goals, professional, academic, personal and even physical, challenging myself to go further, keeping my focus on a new goal that would distract from the previous one. Time allowed me to put things into perspective and find the best path.

It wasn't always a straightforward or obvious path. It was a journey of mentally aligning myself with my physical condition - one that today allows me to respond naturally to situations like the one I described. And it wasn't a journey I made alone.

That's why I didn't hesitate for a second when I was invited to share my experience for this guide. I believe that hearing other people's stories always help us to deal better with our own. That's how it worked for me.

Maria João Ruela

Journalist and Consultant on Social Affairs and Portuguese Communities at the Presidency of the Portuguese Republic

WHEN AND WHERE





CHAPTER 5

Now that we've talked about what psychological first aid is, you probably have a few more questions: when it should be used, who can provide it, and where it should be applied.

As a good guide, we're here to help you handle any situation, so let's clear up your doubts.

When should psychological first aid be used?

It's very simple: whenever you come across someone in need of immediate emotional support due to a crisis. Don't worry about what others might think of your help. If you feel ready, your support can make a difference.

Just remember to act with sensitivity and discretion, since everyone reacts to anxiety in their own way.

In some cases, the long-term emotional impact can be more distressing than the event itself, which is why psychological first aid can also be helpful in these situations.

Who can provide psychological first aid?

Anyone with training in the area can offer psychological first aid. Yes, even that person you're thinking of right now.

Psychological first aid doesn't rely on the expertise of specialists or psychologists, which means anyone can learn how to respond in a supportive and empathetic way to people in distress and/or emotional pain.

Where should it be provided?

You should guide the person to a place that feels safe and comfortable for both you and them. Ideally, it should be a private space, away from the prying eyes of inconvenient on-lookers, to help ensure dignity and confidentiality.

Often, just being present, listening, and offering a bit of comfort is enough to help someone feel calmer and more at ease. Cláudia Semedo's story shows how, in moments of vulnerability, your support can truly make a difference.

The first day is always special. No one knows each other yet, expectations are running high, and there's that kind of nervousness that can spark either loud laughter or a shy lowering of the eyes and a shrug of the shoulders.

Most of them have never done theatre before, and it's their first time on a stage. That's where I teach. That's where the magic happens. I often tell them that everyone should take drama classes, because they're an invitation to awaken qualities that are intrinsic to our nature, to our existence: the quality of communication, the possibility of listening to our emotions, the development of our creativity and listening skills, cooperation. Theatre practice fuels curiosity, the desire to understand others, to explore their perspectives, to step into their circumstances and, in doing so, it helps us better understand our own patterns and boundaries. It makes us more open, more flexible, and gives us back the superpower of simply being - without shields, façades, or conventions. Truth is essential to the work we do and to the level of depth we aim to reach. They know this. They feel it. And they commit to it - but truth can be frightening. Revealing our tastes, voicing our dreams, expressing our desires requires us to make choices and take responsibility for the outcomes. Growing up can be scary.

The students I teach theatre to are between 13 and 18 years old. They're groups of boys and girls going through a very specific stage of development: adolescence. Everything is intense during this phase. Crushes, moods, doubts, certainties.

On the first day of class, we play lots of games to get to know each other. Trust exercises, concentration challenges, activities to build a sense of unity, and lots of personal sharing. During one of these introductions, Rita decided to tell the group that she had a terrible relationship with her mother, that her mother's boyfriend had already harassed her, and that she was planning to ask the court to let her live solely with her father. Silence. The group welcomed the sharing and spontaneously gathered around her in a group hug. Every-

one started crying, and without warning, Rita - just 14 years old, an only child, with separated parents, a fan of anime and make-up - began to sob uncontrollably. Her sobs turned into shortness of breath, which escalated into a panic attack. I could tell from the terror in her eyes, and from her trembling, sweating body. Instinctively, I asked the others to give her some space. I spoke to her in a firm but calm and gentle tone, reminded her that she was in drama class, that she was in a safe place where nothing bad was going to happen, and that everything was going to be okay. Without realising it, I was applying psychological first aid. I kept speaking to her until I could feel her body and mind slowly calming down and reconnecting with me in that moment of shared understanding. Everything turned out well. Three years later, she's still part of the group and now sees a psychologist - a decision her parents made after that episode.

That was the first, but unfortunately not the only case. Since the pandemic, I've noticed a much greater need among students to talk about their family dynamics, to share stories of harassment and situations of violence. The kids seemed more fragile, more lost, and emotionally more unstable. At the time, I didn't know there was a support line for situations like these, and my first instinct was always to reach out to the parents—who, in many cases, were actually the source of the imbalance.

'Rita' isn't really her name. It could be Miguel, who's into anime, or Diana, who doesn't get along with her mother. But mental health issues do have a name, and they should be properly addressed.

Cláudia Semedo
Actress and presenter

HOW TO CREATE A SAFE SPACE



CHAPTER 6

Alright, you've already taken the person to a private space. So, what comes next? To help them feel more at ease with you, it's important to create a safe environment for sharing emotions.

We've all been taught, from an early age, not to share our negative thoughts with others because it wasn't considered 'appropriate.' It's important to break away from that discomfort in moments like these.

Thankfully, there are a few simple behaviours that can really help.





Stay receptive

See each moment as an opportunity to learn something new, to get to know people better, and to explore without preconceived ideas.

Foster respect

Be mindful of your choice of words and make sure to value others' opinions. Avoid making jokes, shaming, or judging someone for what they say or how they act.

Create a positive environment

Remember that you're also responsible for shaping other people's experience. It's important to listen actively, give genuine compliments, and offer encouragement generously. Kindness is contagious - and it makes any environment more welcoming.

Avoid assumptions

Treat everyone with fairness and respect, and don't make assumptions based on appearance, skin colour, ethnicity, religion, gender, age, or any other characteristic.

Respect personal space

A good way to show respect for others is to make sure everyone gets a chance to speak and isn't interrupted.

Step in when needed

If you witness any form of disrespect or discomfort, you should step in.

Creating a safe space isn't just about your surroundings, it's also about what you feel inside. In his personal account, Raminhos shares how he learned to find a place of refuge within himself to cope with difficult situations.

As I grow older - not just in years, but in understanding -I've come to believe that the first safe space must be built within ourselves. A home. Not like one of those rented flats in Lisbon, where you're constantly at the mercy of the landlord's desire to raise the rent, but a place of peace. Somewhere you can sit on the couch with a book, afternoon sunlight pouring through the window and dancing across the pages.

So how do we build this space within ourselves? With help, empathy, and compassion. By accepting that we can't control our thoughts and that they don't define us. Some studies say we have 10,000 thoughts a day, others say more, some say less. Either way... do you really think that, out of ten thousand thoughts, there won't be a lot of rubbish in there too? They come fast, unannounced, and in large numbers. It's perfectly normal for many of them to make no sense, to feel heavy, ridiculous, or limiting. They come and go. But they only gain power if we give them attention. So, just like on a quiet sunny afternoon at home, we need to just be, acknowledge, and move on. Accept that we feel uncomfortable, that we're having a dull day, that we're afraid, and still, move forward...

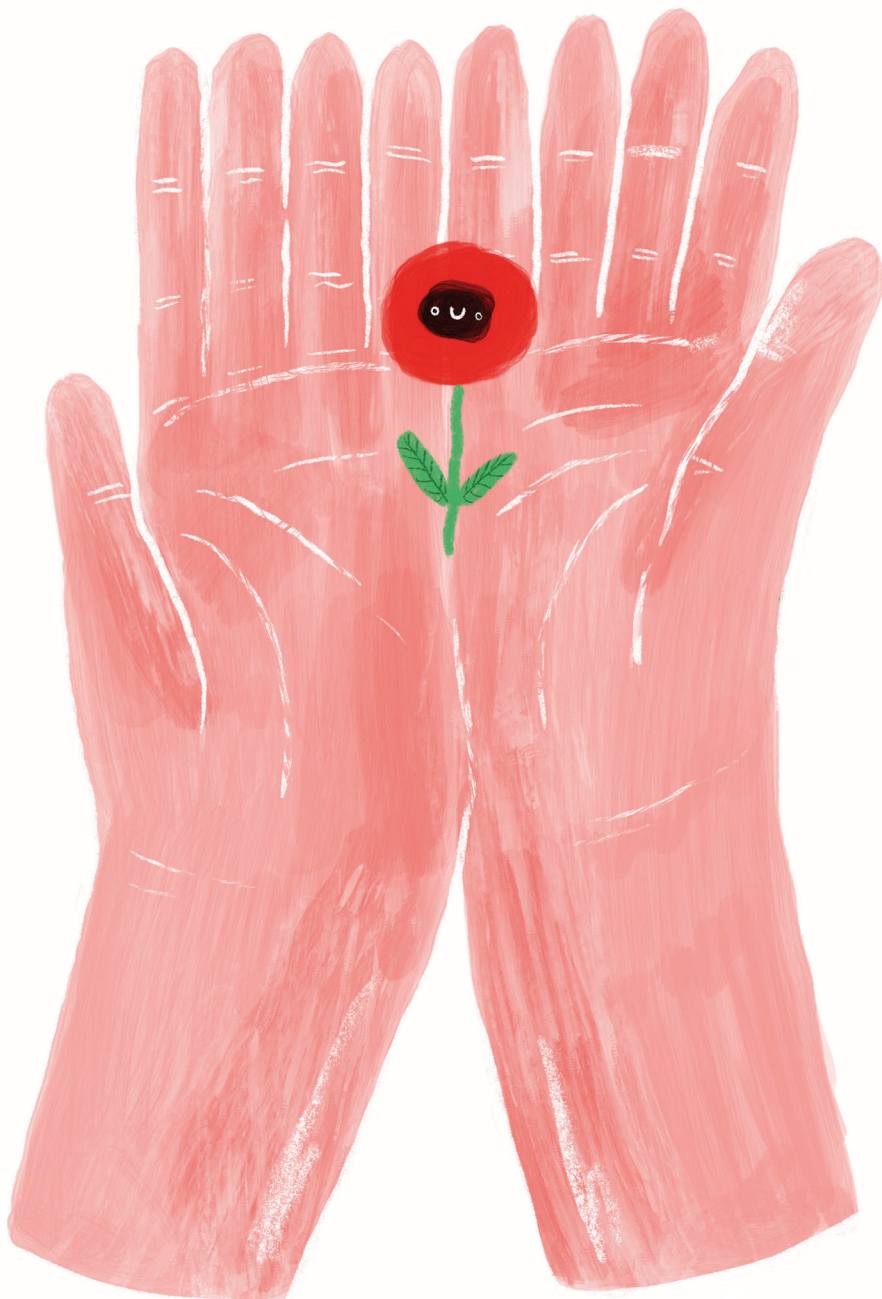
Many times, in my own head, I've found myself in places I didn't want to be, struggling to find the way back 'home.' And many times, I've made the mistake of judging myself, punishing myself, calling myself weak, or wondering how I could fall into the same trap again. We've all been there, and we often forget the simplest truth of all: we're all doing the best we can, with what we know. At every moment of our lives. We are our own first critic. And it's enough to think: if we had a

friend like that, what would we say to them? Would we call them silly, or would we tell them that sometimes it's just part of life to feel like this and that everything will be okay? I would lean toward the second option. So why don't we do that for ourselves right away? And it's when we start to create this safe space within our 'home' that all the other spaces (real or not) also become a little safer. How do we put this into practice? Many times, due to anxiety or obsessive thoughts, I find myself in places I don't like. Public spaces, parties, my mother-in-law's house... (one of these is a lie). Sometimes, I accept the challenge of staying in that uncomfortable space, letting my thoughts float, and focusing on what is really happening in the moment. Other times, I simply can't, I accept without judgement and leave, but with the awareness that I will try again, always looking for the way 'home.' But more importantly, this whole process of discovery is made through therapy, seeking help, with setbacks and progress, so that one day I might go, without worries... to my mother-in-law's house.

This same empathy, compassion, and self-awareness can be valuable in creating a safe space when others are going through difficult moments. Often, we just want to be understood, accepted, or heard. I've learned that, more than words, sometimes we can simply be there for the other person. To welcome them. To give them a hug. At most, if the surrounding environment isn't soothing, we can say: 'Come with me for a walk... we don't even need to talk.' In time, the words will come. Being there, listening, and giving space. I may not understand the person's suffering, but I can accept that it's real and that alone makes all the difference.

António Raminhos
Humourist

How



To USE PSYCHOLOGICAL FIRST AID

CHAPTER 7

The way to apply psychological first aid will depend on the situation and the person's needs. There are three types of action to consider: **look**, **listen** and **link**.

LOOK

Pay attention to the signs and understand what the situation requires and the risks involved to avoid any factors that could generate anxiety.

What should you look out for?

1. Try to understand what happened and what is happening, in a calm, attentive, and non-intrusive way.
2. Identify who needs help and determine the priorities.
3. Try to assess the safety risks of the situation. If you can't guarantee safety, then it's not appropriate to apply psychological first aid.
4. Check if the person is sick or injured. If the answer is 'yes,' you should provide physical first aid or call for help (dial 112).
5. Check if the person needs water, a place to spend the night or a few hours, clothes, or a blanket.
6. It's important to stay calm and be attentive to the verbal and non-verbal communication of the person in distress. If the person shows strong emotional reactions that put them in danger, you should refer them to specialised mental health support.

LISTEN:

Support others with active listening, empathy, and acceptance of the concerns and needs of people in emotional distress, helping them connect with appropriate help and resources.

1. Approach the person carefully, calmly and in a manner appropriate to the context. Both your behaviour and your attitude will influence people's reactions.

Introduce yourself by name, in a considerate, non-threat-

ening, and non-intrusive manner. Reinforce that you're there to help.

2. Look directly at the person, so they feel safer, and avoid using your phone while talking. Focus on what the person is saying and actively listen.

Try to be at the same physical level as the person to convey trust (for example, if the person is sitting on the floor, kneel to be at eye level).

3. Never judge the person's reactions or feelings, even if they are different from what you expected. There is no right or wrong way to feel. It's important to be friendly and understanding, even if the person's behaviour is challenging.
4. Allow the person to react in their own way and at their own pace. If someone cries or screams, don't tell them to stop or calm down. It's more effective to wait, with an open, calm, empathetic posture that conveys security.

Avoid asking too many questions about the event itself. Instead, talk about other things that are important to the person, creating a more welcoming atmosphere.

Try to distract the person from their emotional distress by involving them in activities or physically distancing them from the event to restore a sense of normality (for example, going for a short walk, moving them away from the scene, or preparing something to drink).

5. It's important to try to identify the support the person needs. However, if someone doesn't want help, you should respect that.

Empower the person to make their own decisions, and

not wait for others to make decisions for them, especially when they may feel powerless or have no control over a difficult situation.

6. Encourage the person to use healthy strategies to cope with the situation (see Chapter 9), avoiding harmful strategies (like using alcohol or drugs).
7. Pay attention to small things we do automatically out of politeness, but which may not be appropriate in these moments.

Examples:

- Don't say 'Good morning/afternoon/evening,' as the person is not having a good day. Instead, ask, 'How are you?'
- Don't ask if everything is okay, when it's clear it isn't. It's acceptable to say, 'I'm here, available for whatever you want to share.'
- Try to ask more specific questions, such as: 'How can I help?'
- Don't say that everything will be fine, as that's something you can't guarantee in the moment. You can simply assure them that you will stay present to provide support and help with whatever you can.

LINK:

Connect the person to resources, such as information, people, or services, to help them deal with the situation.

1. It's important to provide correct and relevant information about what happened: how to find family and friends, how to access essential services, and where to seek help.

This will reduce the feeling of helplessness and allow the person to make informed decisions, bringing them a greater sense of control and security.

2. Connect the person with family or friends, either in person or over the phone, but remember to ask who they would like to have with them at that moment.
3. Solve practical problems for the person:
 - Contact the person they indicated who can stay with them;
 - Provide accommodation for children;
 - Offer food, shelter, and clothing;
 - Help the person with transport to a safe place;
 - Guide the person to a hospital or other specialised support services.

And these are the three basic principles of psychological first aid, which enable you to offer effective support to those who are suffering.

These actions can make a significant difference in the recovery process. Even small gestures of attention and presence can bring comfort and security to those who need it most.

But what if, even with this support, you feel the person needs professional psychological help? What should you do?

- 1) Ignore and wait for the person to sort it out themselves
- 2) Refer the person for professional support
- 3) Tell the person to watch a motivational video on YouTube

The answer is obvious, right? So, let's learn more about the topic.

Referencing means connecting a person in emotional distress to the necessary and appropriate professional help, either by directly contacting the service or providing the contact to the person.

You should refer someone for psychological or psychiatric support if they:

- Haven't been able to sleep in the past week, seem confused and disoriented;
- Are so distressed that they cannot function normally, take care of themselves or those under their care;
- Lose control of their behaviour and act unpredictably or destructively;
- Threaten to harm themselves or others;
- Abuses drugs or alcohol.

So let's summarise all this:

What to do and not to do in situations of emotional distress

WHAT TO DO

- Show that you're there to support the person
- Give people space to make their own decisions, but don't disappear
- Ask the person directly what they need and offer practical help based on what the person has shared
- Put aside your prejudices and judgements

- Keep the door open so that people know they can receive help later
- Maintain the person's privacy and don't gossip about the situation
- Use good judgement in your approach, considering the person's culture, age, and gender

WHAT NOT TO DO

- Don't abuse your position as a helper
- Don't ask for money or favours in exchange for help
- Don't make empty promises or share false information
- Don't pretend to be an expert on the topic
- Don't force anyone to get help and don't be intrusive or aggressive
- Don't pressure people to share intimate details
- Don't compare your problems with theirs
- Don't downplay what the person is feeling
- Don't get into the motivational guru mood

But there is something very important: when you don't feel ready or able to help, ask for help. No one has to carry the world on their shoulders alone.

Psychological first aid becomes even more crucial in extreme crisis scenarios, where chaos and uncertainty take over people's lives. Marcio Gagliato, a psychologist with experience in humanitarian contexts, shares a moment when he applied these principles, showing how the right presence and support can make all the difference.

I arrived in Serbia on a rapid deployment, a quick move to respond to the humanitarian emergency unfolding before our eyes. It was 2015, the height of the migrant crisis in Europe. Borders were constantly shifting - sometimes open, sometimes about to close - and between one crossing and the next, thousands of refugees crossed the country every day.

I was sent as a senior international specialist to assess mental health needs and psychosocial support. My mission was clear: understand the psychological impact of this forced displacement and guide the best possible response. But the reality I found was overwhelming. Visiting different areas of the country, I witnessed an endless human flow - more than 5,000 refugees a day - passing through makeshift reception centres, camps, train stations, and open fields.

And all of this under a biting cold, with temperatures below -15 °C. Snow covered the fields and roads, making each step even more difficult. I saw children barefoot in the snow, with wet clothes that weren't enough for such a brutal winter. I saw mothers covering their babies with their own coats, desperately trying to protect them from the cold as they continued walking. The freezing wind cut into their faces, and the smoke from makeshift fires tried, unsuccessfully, to warm exhausted bodies.

Every glance that crossed mine carried a story of suffering. Exhausted people, marked by the weight of the journey they had undertaken, many not even knowing

where they would spend the next night. Families separated along the way, lost children, desperate parents. Fear was palpable. Every minute counted because, at any moment, the borders could close again, leaving thousands trapped in a limbo between hope and uncertainty.

And what made it all the more cruel was the mixture of welcome and hostility. There were those who reached out, volunteers and locals who offered hot tea, blankets, and a smile. But there was also a great deal of hostility, looks of distrust, harsh words, and barriers erected to prevent people from passing through. In some cities, refugees were met with closed doors and heavily armed police. I saw groups being forced to move or stopped arbitrarily, under shouts and threats, without even a moment to rest. The cold wasn't just the one from the weather - it was also the cold of indifference.

It was in this setting that I experienced one of the most defining moments of my professional life - a moment that redefined my understanding of Psychological First Aid.

While speaking with a team of volunteers, I asked about the type of intervention they could offer in such a fast-moving environment. One of them looked at me and answered without hesitation:

'Dr. Marcio, these people sometimes stay for one night, but most of the time, we only have a few minutes.' And then they added: 'These people come from such a dehumanising journey that all we can do is be a humanising presence.'

Those words had an immense weight, resonating deeply within me. I'd never heard such a powerful, dense, yet simple definition of what Psychological First Aid truly is. In contexts of forced displacement, war, and

conflict, in situations where suffering and critical stress are overwhelming, what can make a difference is not just what we say, but how we make ourselves present.

And as if reality wanted to show me, right there, what this meant in practice, we were interrupted by a refugee who arrived screaming, tense, desperately asking for help. Her husband was feeling unwell at the shelter. We rushed to the scene.

When we got there, we saw her children and, beside them, her husband... who was sleeping.

At first, confusion took over. We did a quick check and realised that the man was simply exhausted. But the woman - she was the one having a severe anxiety attack. It was impossible not to understand. If we looked at her last few days - fleeing from the war in Syria, crossing hostile borders, sleeping outdoors, carrying the fear of the future and the responsibility for her children - how could we not feel the weight of what she was carrying?

She didn't speak our language, and we didn't speak hers. The language barrier was a challenge, but not a hindrance. Skilfully, through active listening and by being truly present, we were able to ease her distress. The effort to understand spoke volumes, without the need for many words. Simply being there, offering a space where she could breathe, feel heard, and be understood, was enough.

Gradually, her expression began to shift. Her voice softened. She cried, a lot, but in that moment, she found comfort in the simple certainty that someone cared. When she finally regained control, she looked at us, and without needing to say a word, it was clear what had just happened: she had reconnected with her own strength. The same strength that had brought her this

far. The unshakable strength of protecting her children and her family. And in that moment of reconnection, she realised she still had what she needed to carry on.

I've never forgotten that story. It not only shaped my personal and professional journey, but it also became one of the most powerful examples I share in trainings and workshops around the world.

Psychological First Aid isn't about having the right answers. It's about being present in the right way. Because, in the middle of the journey, between despair and uncertainty, being a humanising presence can be the first step for someone to begin finding hope again.

Marcio Gagliato
Senior Humanitarian Affairs Specialist
Co-director of the Mental Health in Complex Emergencies course
at Fordham University - NY

WHAT PSYCHOLOGICAL FOR CHILDREN?

Psychological First Aid can also be a valuable tool for helping children cope with their own challenges, whether it's a health issue or difficulties with family or friends.

However, it's important to bear in mind that children are still learning how to express their emotions and often take their emotional cues from the adults around them. It's only natural for them not to follow the rules of etiquette imposed by society.

That's why we have to be ready for all kinds of reactions, because these will influence the way we provide Psychological First Aid.



ABOUT FIRST AID



CHAPTER 8

Some signs that show a child maybe in distress:

- They show physical symptoms like shaking, pain, or loss of appetite;
- They cry uncontrollably and can't calm down;
- They appear extremely upset or panicked;
- They're aggressive and try to hurt others;
- They cling to their caregiver and won't let go;
- They seem confused and disoriented;
- They're withdrawn, barely moving or responding;
- They hide or distance themselves from others;
- They don't speak or respond at all;
- They show intense fear, either through words or behaviour.

If you notice a child showing any of these signs, you should offer psychological first aid. However, helping children is not the same as helping adults, and there are key differences to keep in mind.

Some additional aspects you should pay attention to:

LOOK:

1. Check whether the child is alone or accompanied by others;
2. Be alert to any protection needs, such as risks of exploitation or abuse.

LISTEN:

1. Use simpler language, especially with younger children;
2. Be mindful of the child's needs and concerns - ask age-appropriate questions.

LINK:

1. Together with the child, assess what they feel they need;
2. Help them access basic necessities;
3. Share age-appropriate information;
4. Reconnect the child with their caregivers if they've been separated;
5. Support parents or caregivers in helping their children;
6. Help children move away from sources of stress or danger by creating a safe space to play or bringing them closer to their trusted adults.

In the event of danger, a simple breathing exercise can help the child ease their mind and give them a moment of calm.

Soap Bubbles

This is a simple exercise that helps children of all ages learn how to breathe deeply

Ask the child to imagine they're blowing soap bubbles. This naturally encourages them to exhale and then inhale deeply and effortlessly. For children, blowing soap bubbles is associated with fun and play, and it helps shift their focus away from worries and uncertainty.

The Importance of Supporting Children

This kind of support helps us build a future where mental health is talked about openly, without taboos or discomfort.

From the moment we, as adults, guide and correct certain behaviours in children, we're influencing how they see the world and interact with others, creating a generation with a more aware, balanced mindset.

Children have their own unique vulnerabilities, but they also have an incredible capacity for resilience, especially when they receive the right kind of support. In the following account, Arz, a specialist in psychosocial support with experience in conflict scenarios, shows how simple gestures, empathy, and presence can help children rebuild a sense of normalcy.

Working with children in humanitarian contexts isn't just about meeting basic needs; it's about being there, offering companionship, and creating a sense of normality when everything else is falling apart. My first experience in a conflict-affected area left a mark I'll never forget. Tens of thousands of displaced people crossed mountains in the dead of winter, trying to escape the violence. Children were walking barefoot. Many had been bombed and shot at as they fled. There were wounded people everywhere - adults and children, boys and girls.

There was a moment when I stopped and asked myself, 'What am I doing here?' But then I carried on, helping however I could. I gave people basic information: where they could find new clothes, where they could find shelter, where they could simply stop and breathe.

But the children were completely lost. The sense of loss was overwhelming. The loss of their favourite toys, their books, their clothes. The loss of their friends, their routines, their homes. The loss of their loved ones. So many losses, all at once, and no one had ever taught them how to cope with that.

And then, something clicked. 'I'm here to witness this. I'm here to be present. I'm here to listen.'

Together with some colleagues, who have since become lifelong friends, we negotiated the use of a community centre and opened one of the few child-focused spaces available. Everyone had a role to play, from the lady who helped with the cleaning, to the driver who greeted the children when they were picked up from the camps, to the volunteers, community members, local leaders, and even religious leaders. Everyone came together to support the children's recovery, offering basic psycho-social support, including Psychological First Aid, as well as more specialised help for those who needed it.

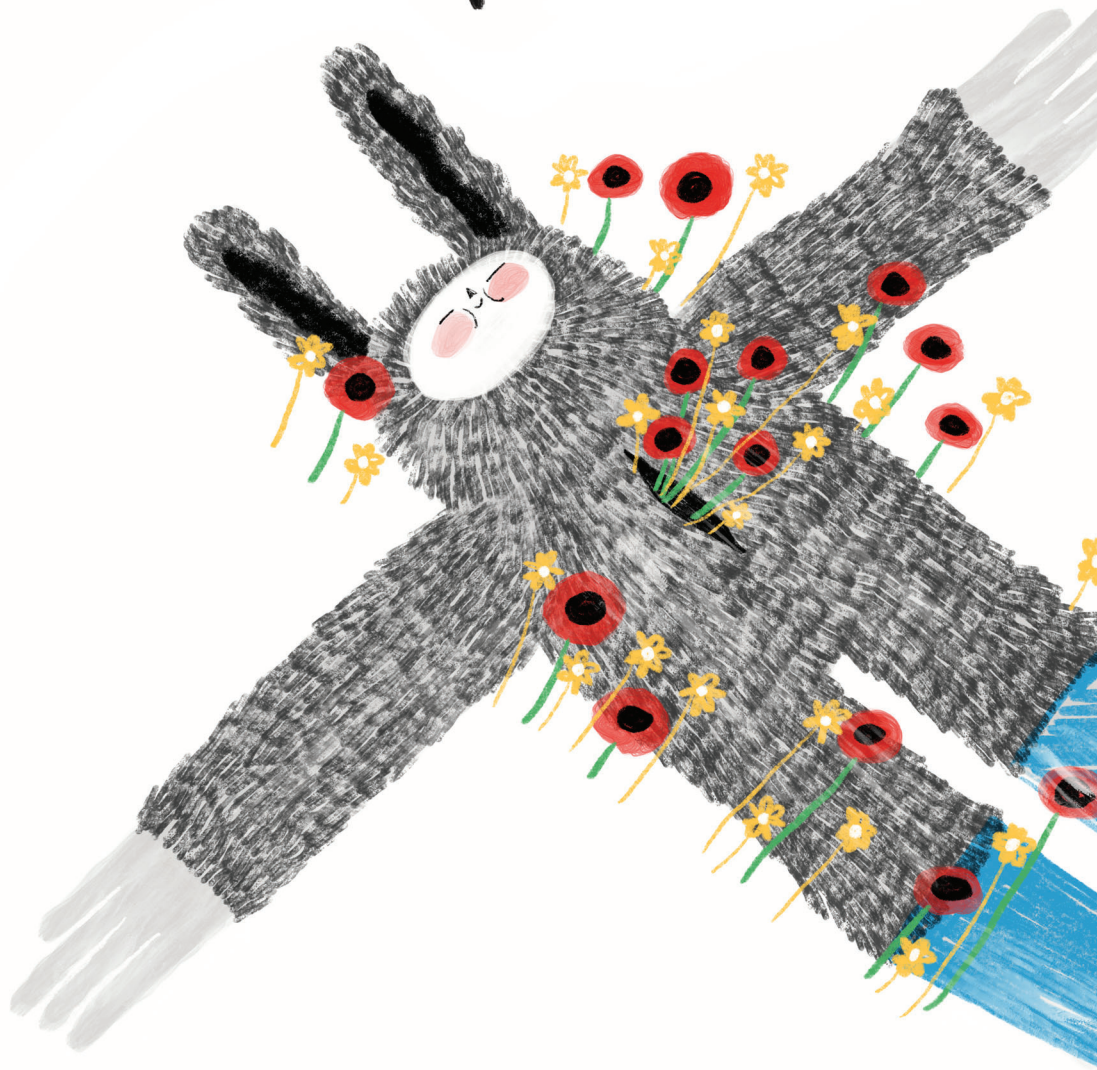
Parents entrusted us with their children for a few hours. Some children came back repeatedly, until they were stable and found a school. Others stayed just a few days before continuing their journey. But there is one thing I'm certain of: our presence gave them an alternative - they were able to play, laugh, and feel safe again, even if only for a brief moment. It may have been temporary, but I know the memory of that space will stay with them.

From this experience, I learned that even in the most difficult conditions, children find ways to hold on to life.

*And sometimes, all they need is a place where they can
simply be children again.*

Arz Stephan
MHPSS Specialist and focal point for the EU4Health
programme funded by DG Sante

WHEN LIFE TAKES





A TURN



CHAPTER 9

A disruptive life event is any unexpected or significant occurrence that drastically alters our routine, security, or emotional well-being.

It can be something difficult, like the loss of a loved one, an accident, a separation, or a financial crisis, but it can also include challenging changes, such as moving to a new city or starting a new job.

Although these moments are part of life, they can cause anxiety and uncertainty. How each person faces them depends on various factors, such as the support they receive, their resilience, and their previous experiences.

The recovery process doesn't follow a single path. For some, it may mean returning to their routine, while for others, it may involve finding a new purpose through work, relationships, or community involvement.

When we're going through a tough time, it can be hard to see how to turn things around. That's why we've put together six tools that can help:

1. Identify your priority needs

Think about what's essential for improving your well-being. Start by analysing the big picture, considering what's going well and what could be improved. After this analysis, define your priorities. Doing this exercise with someone you trust can make it easier.

It's normal to doubt whether you're capable of writing down all the challenges you're facing at the moment, but try to be patient and kind with yourself.

2. Solve problems in a more structured way

When we're overly concerned, the situation can feel overwhelming, and it might be hard to find clear solutions. Breaking down and structuring problems will help you with that.

- You can break down a large problem into smaller, more manageable ones.

- Figure out if you can solve the problem on your own or if you need help.
- Define a goal: what do you want to change, and what are the challenges you face in achieving this successfully?
- Think about ideas on how to address the issue.

3. Be active

Engaging in physical, social, or creative activities helps reduce anxiety. Adjust the intensity based on your emotional state, and maintain healthy habits like taking walks, having calls with friends, or meeting with people who are going through similar situations.

4. Manage your reactions

When you feel anxious or unwell, it's normal to have unpleasant physical and emotional reactions. How can you deal with them?

Translates thoughts and feelings into words

Writing about the situation can help you organise what feels confusing and chaotic and give you a better understanding of the situation. Just like writing, painting, ceramics, or any other manual activity can be a good outlet.

Get enough sleep

If you've been through any of these situations, then you've had sleep problems: nights spent thinking about your problems until the early hours, waking up in distress, or waking up too early and being unable to fall back asleep.

Here are some tips that might help:

- Make sure you have time to relax before going to bed.
- Follow routines that signal to your body that it's time to sleep. Avoid blue light (from monitors and screens) and prioritise reading, taking a shower, or listening to relaxing music.
- If you can't fall asleep, don't stay in bed. Get up, go to another room, and stay awake until you feel tired.
- On hot nights, sleep in a cool room, put a damp cloth on your forehead, or drink a glass of water.
- Avoid alcohol and caffeinated drinks.
- When worries start to surface, observe your thoughts, let them go, and focus on something pleasant.

Deal with anger and aggression

Anger can be helpful in some situations, but when excessive, it can increase anxiety or distress, complicate your relationships with others, and reinforce the feeling that you've lost control.

Ways to deal with anger:

- Understand what triggers your anger and pay attention to the early warning signs.
- Take a 'break,' doing something completely different - go for a walk or move to another room.
- Practise activities that help calm our body, like relaxation exercises.
- Avoid alcohol, drugs, and over-the-counter medication.

- Seek professional help if you can't break the anger pattern, or if the reaction continues or worsens.

5. Manage your thoughts

Learning to identify unpleasant thoughts and neutralise them with less worrying and more rational ones will help you manage your anxiety. Yes, we know it's easier said than done, but it's pointless to keep dwelling on something that won't resolve the issue.

Remember that your thoughts affect your feelings. So, if you think too much about what worries you, you'll create more worry. Likewise, calming thoughts promote a sense of peace.

Start by identifying the thoughts that aren't helping you and aren't useful in the moment ('My house might catch fire'). Then, identify thoughts that are actually helpful ('If that happens, I know I need to call the fire brigade'). This reorganisation will give you a greater sense of control and help you calm down.

6. Prioritise social interaction

When we're feeling down, the support of others is essential, but it can become more difficult to connect with people. Who hasn't wanted to close themselves off at home for days without speaking to anyone?

Once again, social norms of good manners influence our relationships. The fear of being a burden, losing control, or being judged can lead us to avoid social interaction. However, being around those who understand the situation, even if you don't want to talk about it at the moment, can be comforting.

Create a map of your network

Your social network includes your most important contacts, whether they're family, friends, colleagues, or health professionals. Mapping out these people can help you gain a broader view of who's around you.

Once the map is ready, ask yourself questions like: Who can you share your experiences and emotions with? Who can provide support? Who can you have fun with? Who do you want to spend more time with?

With this exercise, you'll realise there are people you want to have a closer relationship with, or people you'd rather spend less time with.

What if these tools don't help?

These suggestions can be useful for increasing your sense of control, but in particularly difficult situations, they might not be enough. If you feel these tips aren't helping, seek professional help.

When it comes to recovering from an emotional crisis, everyone moves at their own pace, with their own strengths and challenges. Rita Redshoes shares her experience with postpartum depression and shows that sometimes, asking for help is the first step towards healing.

And here we are, just the two of us, alone in this hospital room. I look at you in awe. I whisper in your ear that you're my treasure, that I'll always be here and fight off any monsters to protect you. Above all, I want to see you happy.

Your eyes remain closed, still asleep. I imagine you have no idea what the world is - honestly, neither do I. The instructions seem clear enough: you need to feed well to gain weight, pee, burp, and sleep. Supposedly, it's all about letting maternal instinct kick in. Feeding

you, keeping you clean and safe. It sounds simple, but part of me feels more like a newborn than you do. The truth is, we're both beginners - you as a human being, me as a mother.

Take it easy - I tell myself - every day, for centuries and centuries, babies are born into this world, some in unimaginable conditions, and they survive. Breathe deeply, you've got this. Tears fall down my cheeks and I think they're from emotion, from the joy that comes with this moment, the joy all mothers are supposed to feel... right?

Now, back at home, I try to return to some kind of routine. Hanging laundry, with you lying next to me in your bassinet - it's the picture of perfection. I long for the neighbours to peek out their windows and see us. I want to show you off, show them that I'm capable, that I'm a good mother.

But every time I pinch a clothespin into place, I feel a growing pressure in my chest, a tightening that makes it hard to breathe. I spend hours trying to guess what you're thinking or feeling. Cold? Hot? Bored? Hungry? I'm not sure what I'm feeling either. No. I do know how I feel. I feel distressed. What if my milk dries up? I crave nightfall - I need to sleep, my body aches with exhaustion. But night after night, my eyes barely shut, because every three hours, or less, you cry to let me know it's time to eat again. And I'm here, fully available, no matter how much my chest aches, or my back, or my soul.

Have we met before? No. As the days go by, I still don't know who you are. We're two strangers. And you don't speak, you don't say a word to calm me down. I feel ashamed. Ashamed of the thoughts that come to me. Ashamed when I look in the mirror - I don't recognize myself. Who was I before all this? I wanted you so badly.

You've been crying for over an hour. I rock you around the house, sing you the most beautiful songs I know, kiss your little head, rub your tummy, turn down the lights - and then I break down too. We both cry, I don't know if for the same reason. Are you scared too? Do you feel unsafe in my arms? You don't recognise me... I'm your mother. You cry for two more hours. I don't know how to be your mother. I feel like a stain. A shadow. It's me who needs to be held. Take me, lay me in a crib, soothe me, tell me everything will be okay.

I'm back at the hospital, but this time alone. They tell me I had a panic attack. I return home to chamomile tea. No one hugged me. I lie down next to you and whisper I'm sorry. I took longer than I should have and it's a little past time for your feed. I'm sorry.

The days blur into each other, all looking the same. I check the clock on the living room wall over and over, hoping more time has passed than I think. But the clock seems to have slowed down lately. Tissues soaked with tears, uneaten meals, unanswered messages, rushed showers, work on pause - this has become my only reality.

I feel so ungrateful. The universe granted me my wish to become a mother and blessed me with a healthy baby. So what's wrong with me?! My daughter, forgive me. This isn't how I imagined us. I'm failing you. I want to leave this place I've fallen into. I want to be here for you. But I can't. I haven't been able to. I'm not managing. I hate myself.

In the depths of despair, I wonder if there is anyone else here, on this dark side where I find myself. Is anyone out there? Are there other mothers in distress? Yes. We're here... there are still a few of us.

I pick up the phone, determined to ask for help from the place they say gives mothers a safe space. They ask me the right questions. They say wise things that calm me. I glimpse a path forward, a glimmer of hope that that maybe I was a mother from the very beginning. A good mother.

Rita Redshoes
Singer, songwriter and author

LEARN TO LOOK AFTER YOURSELF

CHAPTER 10

If you want to help others, you have to take care of yourself first. You've probably spent your life learning that to be polite, you need to follow certain rules - even if they come at your own expense.

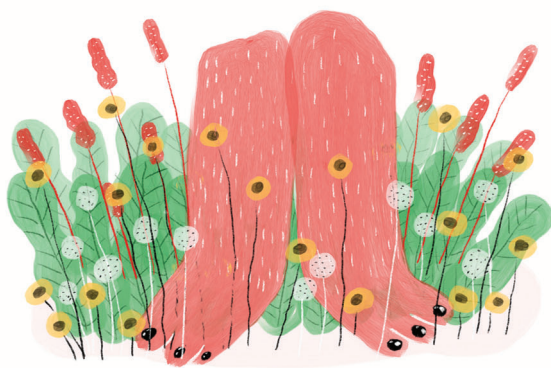
But we're here to tell you that it's okay, and actually important, not to be afraid to stand up for yourself in certain situations, for your own well-being. Whether it's at the hairdresser, where you swallow your tears instead of saying you don't like



the haircut, or when your friends keep showing endless photos from their latest holiday and all you want is to leave.

Of course, standing up for yourself doesn't automatically fix everything. There are times when we feel overwhelmed or distressed, for a variety of life circumstances, and it becomes hard to relax due to the high levels of anxiety or adrenaline in the body.

So here are some exercises that can help you relax and regulate the negative effects of anxiety, both physically and mentally. It's important to remember that not all exercises will work for everyone, but the key is to try them out and find the ones that suit your needs best.



For immediate relief in moments of high anxiety

Grounding Exercise

1. Start by identifying 5 things you can see. Focus on them and describe them mentally.
2. Find 4 sounds you can hear and describe them mentally.
3. Find 3 things you can touch and describe their touch mentally.

4. Find 2 things you can smell and describe their scent mentally.
5. Find 1 thing you can taste and describe its flavour mentally.

For when you're feeling overwhelmed

Thought Management Exercise

Intrusive thoughts are common when we're feeling overwhelmed or anxious, but it's important to learn how to set them aside.

1. Picture a sturdy box, decorated in any colours or patterns you like.
2. Add a solid lock to the box.
3. Then, place all those intrusive thoughts inside and lock it tight.
4. Visualise the box, as it can help you let go of unwanted thoughts and give your mind a break.

For when you want to calm down

Breathing Exercise

1. Sit comfortably with your back straight, shoulders relaxed, and hands resting on your lap.
2. Breathe in and out through your nose, relaxing your lips and jaw.
3. Continue for at least one minute, counting each full breath cycle - inhale and exhale.
4. Remain silent and repeat the one-minute breathing and counting cycle.

Use this exercise regularly to gradually improve your sense of well-being.

You've realised that taking care of yourself isn't selfish, but rather a balancing act. Olympic judoist Nuno Delgado knows this better than anyone. In his testimony, he explains how he found, in the practice of Mokuso meditation, a way to train not only the body but also the mind.

A judo match is often a stressful moment, especially if it takes place during a decisive moment in life. That's what happened to me when I participated in the Sydney Olympics in 2000.

There was a lot of pressure, both internally and externally, and many thoughts raced through my mind. How will it go? What will people think of me? How should I behave in interviews? What will I say if I don't win? Will I be judged?

Mokuso, as we call it in judo, became crucial in helping me cope with the stress that all of these questions created. It's a Japanese practice of silent meditation that helps clear the mind before and after training.

Before each fight, I would take a few minutes to close my eyes, breathe deeply, and connect with myself, allowing the anxiety to dissipate and mental clarity to emerge.

This practice helped me stay focused and resilient in my daily routine of long, intense training sessions, where I needed to keep my motivation levels high.

These moments of introspection helped me channel my energy into the fight, but they also provided me with a safe space to observe my feelings without judgement. I learned to handle pressure better and to remain calm in challenging situations.

Today, I have the pleasure of teaching this practice to all my students. In class, I show them that Mokuso is not just a technique, but also an art of self-care. By incorporating this practice into their routines, I hope they, too, can experience the benefits of a balanced and resilient state of mind, both in competitions and in everyday life.

Meditation and self-care have a transformative power, and exploring these resources, just as I do every day, is an essential tool that is not limited to elite champions.

Taking a few minutes each day to connect with yourself can make all the difference. Whether facing daily challenges or achieving a more balanced state of mind, meditation can be the key to cultivating resilience and clarity.

Try integrating this practice into your routine and see how it can help you navigate the pressures of life, promoting lasting well-being. Remember: every step, however small, counts in the journey of self-care.

Nuno Delgado
Olympic medallist in Judo





FINAL NOTES

CHAPTER 11

Well, we've come to the end. If you've read this far, you now know more about psychological first aid than 90% of people.

We hope that, with all this information, you feel more prepared to handle any situation with an emotional impact. And that, from now on, you realise that telling someone who is in pain or anxious to 'calm down' isn't exactly the right response

Shall we test the effect of this guide? Take the WHO well-being test again, and try to see if the way you now handle problems has influenced your emotions (for the better).

	During the last 2 weeks	All of the time	Most of the time	More than half of the time	Less than half of the time	Some of the time	At no time
1. I have felt cheerful and in good spirits	5	4	3	2	1	0	
2. I have felt calm and relaxed	5	4	3	2	1	0	
3. I have felt active and vigorous	5	4	3	2	1	0	
4. I woke up feeling fresh and rested	5	4	3	2	1	0	
5. My daily life has been filled with things that interest me	5	4	3	2	1	0	

The practical exercises you'll find in this guide are not an instruction manual, nor do they replace psychological support, but they are useful tools that you can use both for yourself and with others, helping you feel in control in unusual situations.

However, most importantly, we want you to walk away from this reading with a greater awareness of how the rules of etiquette influence your approach to mental health. We hope that now, you can adapt your thoughts according to the situation and feel more comfortable expressing your emotions and feelings.

We'll leave you with one final challenge: when you're with your friends, tell them about this guide. Who knows, maybe the next time you're together they might answer the most important question more sincerely: 'So, how are you doing?'

If you've made it this far in reading this Guide, congratulations!

You're part of the pioneering group that has had the privilege of deconstructing concepts that are often camouflaged...

Deconstructing concepts is a dynamic task. The bar is raised when it comes to topics related to well-being and mental health - not only our own but also that of the community we're part of. Add to that the special ingredient that we might call 'forgotten influence' - which is the standard of social behaviour or etiquette to which we've all been and continue to be subject... and you'll find yourself stepping up a couple of rungs on the ladder of challenges!

This Guide was intended to be an 'informal exercise on a serious subject'; in other words, to address topics related to psychological first aid with both confidence and just enough fun.

In this 'exercise', it was considered relevant to bring forward personalities who dared to expose their lived experiences, sharing moments when vulnerability touched them under the spotlight of celebrity, side by side with the more technical framework on what psychological first aid is. In this unique way, we aim to show the world that health is, indeed, the absence of both physical and mental illness.

Being healthy means feeling well and being well, with dignity, and seeing ourselves respected for who we are (from our darkest sides to those that shine the brightest!).

Offering psychological first aid is almost as natural as breathing... except we didn't know it had a "fancy name." We didn't know we could tear off and throw away certain labels, like the ones that appear when someone says, 'You're depressed' Give it a rest and come out for a drink, it'll all go away!'... True... if only life were that simple!

But it's not. As you've come to understand, we all have our own 'superpowers' - even if we're not TV superheroes. We call them 'inner resources,' and they can be incredibly useful when we're in emotional pain. Because when faced with what we thought was an insurmountable challenge, the right words at the right moment, or the memory of something we once overcame, works like a kind of magic!

We light the fireworks, throw the party, sing, and dance! Just because! Because we dared to be our truest selves and to feel freely - far from the rules of etiquette that stifle our thoughts, bruise our skin, and torment our minds.

And when we realise that healthy communication can be something simple, clear, and direct - and sometimes even silent - we know we're on the right track!

It's because of this courage to be free from preconceived ideas that we will keep walking this path... even after crossing the 'Cape of Storms': because mental health matters!

Because everyone, without any asterisk at the end of the word, has equal rights. Access to mental healthcare and specialised support, i.e. from a psychologist and/or psychiatrist, is not a luxury... even though it's still 'a scarce good.' At this point - and with each passing day, even less so - we can no longer accept how difficult and costly it is to access counselling or support services aimed at promoting well-being.

Especially when we consider that, if we all become advocates for mental health, the need for specialist consultations... decreases; the use of medication to calm us down, boost (or reduce) our appetite, help us sleep or manage fatigue drops... and we become freer! We enjoy better quality of life, and a life with more quality!

Learning to provide psychological first aid is an act of citizenship.

Being present and truly listening to someone who has gone through a dark moment... is easier than it might seem- and this Guide has shown you that.

Welcoming the feelings someone needs or wants to share with us, without having the bargaining chip of our prejudices, judgements, and values that belong to our emotional baggage - and not the other person's! -, isn't some kind of magic trick. It's something we can learn. It's simple, without being simplistic.

Just as helping someone who's 'in a dark tunnel' requires nothing more than being open-minded enough to look for the clues they give us about what they need, what worries them... we don't need to come up with magic potions, we just need to ask.

And there's something incredibly rewarding about seeing someone smile, hearing a 'thank you,' or simply crossing paths with them later and realising that they might now be the one helping us... Because we all need a little bit of that magic dust that psychological first aid spreads around.

Susana Gouveia
Psychologist & Project Manager at EU4Health
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