BACKGROUND & CONTEXT

An outcome of the COVID-19 pandemic is a change in the way people connect with one another. With in-person contact in a state of flux and/or limited, individuals and communities have had to come up with some practical approaches to staying connected.

For a person who might be feeling isolated, overwhelmed, or experiencing negative feelings related to the current situation, a care call from a friend or acquaintance can have a very positive impact.

While certain segments of the population are comfortable with digital communication (texting, email, social media, etc.), other segments of the population may find the shift to digital more difficult, particularly if they do not have internet access or if they have relied on in-person interaction.

The “Care Call” is designed to provide an intentional space for a person to share what they are experiencing in the present crisis, validate feelings that they might be experiencing, and explore resources that can help the person in their response to the crisis.

THROUGH THE STORM, TOGETHER.
WHAT IS A CARE CALL?

A care call is a scripted telephone or video call to another person which prompts the recipient of the call to:

- Feel cared for
- Think about their present situation
- Explore the feelings that might be evoked by the situation
- Consider internal and external resources that might help the person respond to the situation in a healthy manner
- Build resiliency for future crises by identifying positive coping mechanisms

WHY SHOULD YOU MAKE A CARE CALL DURING THE COVID-19 PANDEMIC OR OTHER CRISIS?

Changing travel restrictions and health recommendations have likely impacted our ability to physically connect with one another. For some, the shift in our daily lives may create an overall feeling of uncertainty. A care call via telephone or video chatting allows a person to check in on someone. It offers the person receiving the call a space to express him/herself in ways that might not otherwise be available.

The goal is to help a person know that s/he is not alone and that they are cared for.

BEFORE THE CALL: ORGANIZE YOUR RESOURCES

In certain conversations, you may encounter topics or issues that are potentially life-threatening; it’s ok if you don’t know how to answer all the questions - but it is important to take these issues seriously and to be in a position to refer the person to a professional resource.

Tip: We have included below a vetted list of key national resources and guidance notes for how to use. Keep these charts easily accessible while you are on calls, in case you need to refer to them quickly. We have also included a section for you to include local resources - please do your research on local resources available in advance of your first phone call, so that you are prepared to offer help quickly should it arise.

REMEMBER: Only make calls to persons 18 years or older.

1) The rationale, directions, and suggested script have been produced by IOCC with the input and collaboration of IOCC Frontline emotional and spiritual care providers, which include Orthodox clergy, licensed clinicians, counselors, and medical doctors.

2) Based on the principles which guide the Critical Incident Stress Debrief (CISD) component of the Critical Incident Stress Management (CISM) method.
SUICIDE AND CRISIS LIFELINE
Dial 988 or 1-800-273-TALK (8255) | 988lifeline.org
If a person reveals that they are suicidal, keep them on the line and call the National Suicide Lifeline listed in this chart or your local suicide prevention Hotline in the downloadable chart.

DOMESTIC VIOLENCE
1-800-799-7233 | TheHotline.org
If a person reveals any type of abuse (physical, sexual, or psychological) to any age group (child, teen, elderly, etc.) You should reveal that you need to report this to the proper authority for follow up. If you don’t know where to report, you may always call your local law enforcement.

MENTAL HEALTH HELP LINE
1-800-662-HELP (4357) | samhsa.gov/findhelp/national-helpline SAMHSA

SEXUAL ASSAULT HOTLINE
1-800-656-4673 (HOPE) | rainn.org
Rape, Abuse & Incest National Network (RAINN)

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<th>ISSUE</th>
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**PHASE 1: INTRODUCTION**

**CALLER GOALS & TIPS**

The goal of this part of the conversation is to identify yourself, state the goal of the call, and establish rapport.

- Remember, you are there to listen and facilitate the conversation - let them do most of the talking
- Be prepared to build trust and allow them to open up

**SUGGESTED PROMPTS**

- “Hello, I am (name) and I am calling to check in during this (COVID-19 pandemic) and see how things are going with you.”

*TIP: It is likely that the person might also ask about you. It is fine to say something like, “Well it’s been a change, but I am doing okay.” Be careful not to allow the conversation to shift to talking about yourself too much. There will be a chance to share, but you don’t want that to short-circuit their sharing.

**PHASE 2: FACTS**

**CALLER GOALS & TIPS**

The goal of this section is to allow them to give concrete information about their current situation.

- Be careful not to jump into giving solutions - listen to their story, to help them process

The types of things you are trying to find out are:

- Home living situation
- How the person is managing/has there been a change with daily activities (paying bills, cooking food, getting medications, sleeping...)
- Needs and/or concerns

**SUGGESTED PROMPTS**

- “How is your family?”
- “What are you doing to stay active?”
- “Are you alone in your house or with family?” “Are you with a caretaker?”
- “How has this affected your work situation?”
- “Have you been able to talk or communicate with your other friends?”
- “Are you able to participate in any of the activities being offered by your (church/club/organization) online?”
- “Do you need anything I can help you get?”
- “How are (lifestyle changes) affecting your life right now?”
PHASE 3: REACTIONS

CALLER GOALS & TIPS
The goal of this section is to allow the person to express how s/he is feeling.

- Give time to tell their story - don’t try to talk them out of reactions
- Normalize what they are feeling and, if possible and appropriate, share your own weakness/fears in this moment - BUT, remember, this is not about you

SUGGESTED PROMPTS
- “How do you feel about some of these changes you mentioned earlier in our conversation?”

Tip: Listen and be present. Paraphrase is an active listening technique where the listener restates what they heard from the speaker using the listener’s own words. Mirroring is another active listening technique where the listener restates what the speaker said using the speaker’s words. Both techniques demonstrate active listening, but mirroring is done if the speaker keeps repeating him/her self.

PHASE 4: TEACHING

CALLER GOALS & TIPS
The goal of this section is to explore support systems that can help them deal with their present feelings and become more resilient in the future.

- Reaffirm the normalcy of their feelings
- Move thoughts from a place of pain to a place of hope
- Encourage positivity
- Encourage the person to access other local resources

SUGGESTED PROMPTS
- “What is providing strength for you as you deal with some of the obstacles you are currently facing? In the past, what has helped you overcome obstacles?”
- “What has helped you in dealing with some of these feelings in the past?”
  - “I’m in awe, how did you have the strength to endure that moment?”
- “What are some ways you’ve been dealing with these feelings in the current COVID-19 crisis?”
  - Inventory their successful ways of dealing with this and how to build on those to increase resiliency
- “What positive surprises have you had during this crisis?”
- If you haven’t already asked - ask now, “Is there anything that I can help you with?”
CALLER GOALS & TIPS

The goals of this section are:
1) Thank them for the connection
2) Leave them hopeful
3) Encourage open lines of communication

SUGGESTED PROMPTS

- “It was really nice connecting with you today; I want to thank you for your time and sharing what you are going through. Also, I want you to know that you are not alone. Let me know if I can call you again, or feel free to call me at ____________ (give them your phone number if you feel comfortable doing so) if you need anything. Also please don’t hesitate to reach out to our local agencies that might be able to assist you.”

TIP: Give them the contact information for any agency that might be appropriate for their needs from the chart on page 3.

POSSIBLE PRAYER-ORIENTED PROMPTS

“I also want you to know I am going to be praying for you every day. As a matter of fact, would you like to close with a prayer right now?”

If appropriate, a spontaneous prayer would allow you to incorporate some of what the person mentioned on the call. You could also conclude with one of the Orthodox prayers below:

“Heavenly King, Comforter, Spirit of Truth, Who is everywhere present and fills all things. Treasury of Blessings and Giver of Life. Come and abide in us and cleanse our souls from every impurity and save us O Good One.”

“O Holy Trinity, have mercy on us. O Lord pardon our transgressions. O Master forgive us our iniquities. O Holy One visit and heal our infirmities for Your name’s sake.”

“Christ is Risen from the dead. Trampling down death by death and upon those in the tombs. Bestowing life.” (after Easter)
Listen. Do not interrupt by telling them similar things that happened to you. There might be a time for sharing your experience, but make sure the person is telling his/her story. Say things that will keep them talking.

Listen. Let them talk about what they experienced. Trauma healing requires time and opportunity to talk about it. The people affected by the current COVID-19 situation may not have had a chance to process past traumas and so do not be surprised if the conversation includes past events that were traumatic.

Listen. Listening is important because it validates what is said. This does not mean you agree it was right or wrong, only that you understand this is what the person experienced. As such, listening helps in healing and moving forward.

Be flexible – you cannot be sure what you plan to do will in fact work out.

Laugh – appreciate the person’s humor as a sign of resilience, not avoiding or denying.

Follow the order of the script – It has been designed with specific phases in mind.

Reach out to your personal support system (pastor, counselor, family, trusted friend, other professional resources) to help you process any feelings that might arise in you as you make your care calls. Active listening to others’ stories might also trigger in you difficult thoughts, feelings, and fears.

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<th><strong>DO</strong></th>
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<td>Listen.</td>
<td>Don’t think you have to “fix it” or try to fix things: you can’t.</td>
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<td>Don’t think you have to have the answers.</td>
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<td>Don’t use clichés or sugarcoat.</td>
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<td>Don’t tread on emotions: let the persons you speak with have their emotions.</td>
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<td>Don’t be the lone ranger. Knowing when YOU are getting overwhelmed is essential to your continuing health and effectiveness.</td>
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<td>Don’t hesitate to reach out to your trusted support system or other professional resources.</td>
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