

Each year, Estonian society is shocked by dramatic accidents, such as gas leaks resulting in the death of children or toddlers losing their mother due to a conflict between neighbours. However, there are many accidents that do not reach the front pages of newspapers. After such events, emotional and social support is needed by people who are directly affected, as well as their close friends and relatives.

Design thinking was used to develop the cooperation model of psychosocial first aid.

The problem we solved

Dramatic incidents, such as a shooting in an apartment building, a gas leak where a whole family loses their lives, and the suicide of a young person, affect many people in several ways. Often people need psychological, emotional, and social support, as being left without it can lead to mental health problems. Help might be required by those directly affected, but also by those who witnessed the incident, co-workers, friends, aid providers, etc.

In the Innovation Programme for the Public Sector 2021, the Estonian Social Insurance Board, Estonian Police and Border Guard Board, Võru Town Government, the Ministry of Social Affairs, and Harju County Local Government Union delved into how to jointly support those who have suffered in different crises, their close friends and relatives, witnesses or other people affected and disturbed by the events.

The results we reached after field work and interviews

During the first months we focussed on determining the needs of those needing as well as those providing help. We conducted several interviews with people who have experienced traumatic events, their friends and relatives, members of local authorities, etc. We realised quite soon that information about traumatic events does not often reach local authorities, and even if it does, people lack the know-how regarding whom and how to help. It seems natural to presume that after such events everyone who needs help receives it. The interviews, however, revealed a different truth. "It does not suffice if people are told to go and seek help and talk to someone, should they have problems." was a sentence we heard more than once. We learned that people will never actively seek help - mainly due to being ashamed or being oblivious of one's need for help, and also due to difficulties reaching adequate help. It was often mentioned that help was difficult to reach, depended on personal connections or was available only for a small circle of directly affected people, although there were also others who needed support ("help was probably offered to those who were more directly affected", "friends could have needed help"). Help should not be something people should actively seek, it should not be an (ambiguous) option, but a basic right of each individual!

It was clear that providing help was uneven and uncoordinated. Different instances were oblivious of the actions of others, not all who needed help were noticed or their needs met. The institutions with a crisis plan were generally more efficient, but in some cases the crisis plans left a lot to be desired ("A crisis plan is more like an evacuation plan.", "The plan focussed on security risks, but not on mental health risks.").

Also, providing help was a singular event or the duration was insufficient, as sometimes the need for help persisted for years. ("Help was provided for about three to four months and then it faded away). It was stressed that two to three sessions do not suffice - support has to be consistent and persistent. ("The crisis comes in waves and resurfaces, we did not receive help in the later stages.", "It was only nine months after the shock that conflicts in the organisation arose, at first it seemed that we were able to move on.")

The interviews confirmed our doubts that information about traumatic incidents does not reach the personnel of local authorities and very often the personnel lack adequate know-how as to how and for how long people affected by traumatic incidents should be helped.

As our time and capacity was limited, we selected three problems to solve.

1. How to inform the personnel of local authorities and the victim support department of the Social Insurance Board about traumatic events.
2. How to ensure that the personnel of local authorities knows how to act.
3. How to organise the cooperation of local authorities, the victim support department of Estonian Social Insurance Board, and the Estonian Police and Border Guard Board in order to jointly support everyone affected by traumatic events.

Solution: The cooperation model of psychosocial crisis aid

As a solution, we devised a cooperation model where we established the order of actions and the information exchange, so that the personnel of local authorities would have specific guidelines for reacting quickly in case they have been advised of an incident in their region.

We added a psychosocial component to the crisis plans of local authorities and devised a check-list with specific instructions as to what to do when they have received information about a traumatic event in their region. In order to facilitate efficient and swift information exchange between local authorities, The Estonian Social Insurance Board, Estonian Police and Border Guard Board, we have started using SitRep web platform that has been specifically designed for exchanging such information in real time.

Testing the cooperation model

In autumn 2021, we tested the cooperation model in Elva and Rakvere rural municipalities. Both rural municipalities displayed great interest as they are situated away from larger poles of attraction and therefore help might not be easily available. Our initial plan was to try the cooperation model for two months in case of certain incidents - accidents resulting in the death of minors. While piloting the project, no such accidents happened in these rural municipalities, but we had a chance to test the model at the joint practice/drill of Estonian Railways Ltd. and the Estonian Rescue Board, which took place in Elva.

In conclusion, it can be said that due to preparatory work, all parties were well-informed of each other's actions, which facilitated providing swift and adequate assistance.

The results of testing the project:

- The topic is relevant and the awareness of providing psychosocial aid is low.
- There should be at least one person in each region who has received thorough training in the field.

The Estonian Social Insurance Board has used the solutions found while participating in the Innovation Programme while dealing with the Ukrainian crisis.

Managing emergencies and major events requires quick access to information and a good overview of the situation. As the Estonian Social Insurance Board started using the SitRep web platform before the refugee crisis, cooperation with partner institutions was smooth and effective. It has become an important tool indispensable for crisis intervention. The cooperation model has been added to the draft bill of the Victim Support Act and a similar model has already been used in Ukrainian crisis intervention regarding psychosocial crisis aid.

Looking back at what the year with the Innovation Programme has given us, it can be said that the format of the programme and the service design approach were of considerable help. We managed to bring experts from different institutions together and initiated discussion. We worked for the same goal and were not afraid to experiment. Now our next goal is to start the next stage and implement the improved solutions in the "real world".

Project mentor: Krõõt Kroonmäe (Estonian Social Insurance Board)

Project manager: Helen Alton (Estonian Social Insurance Board)

Team members: Airi Mitendorf (Ministry of Social Affairs), Heleri Olo (Estonian Social Insurance Board), Kristel-Liis Kaunismaa (Estonian Police and Border Guard Board), Maie Liblik (Harju County Local Government Union) and Kristi Asser and Toomas Sarapuu (Võru Town Government).

1 SitRep web platform has been developed by the Ministry of Internal Affairs with the aim of ensuring efficient and swift information exchange between the state, rural municipalities and/or private legal entities responsible for emergency intervention.