



Psychological first aid

Building capacity for self-help and compassionate support in the event of accidents, assaults, or other violent experiences



Introduction

Since 1994, we at Dansk Krisekorps have provided psychological assistance to people who have experienced psychological strain in their personal or professional lives.

When a person experiences a violent event, they will often react both physically and psychologically. When you are informed of the typical reactions, it will hopefully become easier for you to accept and validate them. It is also beneficial if your family and friends are aware of typical reactions to crises.

Violent events create insecurity. Our usual methods for problem-solving are not activated, and our perception of life, and even other people, can be disconcerted. We react to this, and the reactions of the affected individual can be many or few.

It has proven to be beneficial for both the affected, their friends and relatives, as well as managers, to receive this booklet. It contributes to a mutual understanding of the fact, that it is normal to react to an abnormal situation. The booklet can provide positive responses.

The aim of the booklet is to provide knowledge about

- Crises and crisis management
- Typical reactions to violent events
- Building capacity for self-help
- Psychological first-aid and compassionate support
- When to seek professional help
- Where, and how you can receive professional help
- General information regarding crisis counselling and organizational consultancy
- Useful links

This booklet is developed and published by Dansk Krisekorps.

The 8th version is edited by Mette Nayberg, 2020.

Translation Alberte Jeppesen.

Lay-out and photo Susanne Dyrbye.

Read more about Dansk Krisekorps at: www.danskkrisekorps.dk

Duplication or reproduction of this booklet or parts thereof is, with respect to the applicable Danish laws on copyright, only permissible under specific written agreement with Dansk Krisekorps. Quotes and excerpts are only allowed with clear referencing.

Table of contents

Introduction	2
What constitutes a crisis?	4
Reactions to crises	4
Building capacity for self-help.	7
Psychological first-aid and compassionate support	8
When should you seek professional help?	10
Governmental options for help	11
Organizational options for help	12
Crisis management and organizational consultancy	13
General guidelines regarding psychological first-aid and emergency assistance in the event of employee accident or assault	14
General advice for management regarding crisis contingency planning. . .	16
A concrete proposal for the procedure during emergency events and subsequent initiatives	16

Appendix

Dansk Krisekorps	18
Contact Dansk Krisekorps	20
Dansk Erhvervpsykologi	21
Dansk Psykologhus.	21
Useful links	22
Own notes:	23

What constitutes a crisis?

Crises can be very different in their content and the progressions they can take. Most often, a crisis entails a danger or threat to a person or someone they care about. It can also be a threat of material loss. When a person is in crisis, they may feel that the way they usually handle challenges is insufficient. Many will perceive this as challenging and feel they are losing control.

There is a pattern of reactions associated with crisis situations, but a large variety of reactions exist, as well as sizeable individual differences in how a reaction is expressed. Some people find that their reactions do not correspond with their expectations, while others do not react at all. Additionally, a person's surroundings may have certain expectations of them, and their response during a crisis. This may result in the belief that one is reacting inappropriately or incorrectly, given the circumstances. Regardless of how one reacts in a crisis, it is imperative to remember, that there is no "correct" way to react, and that all reactions are normal responses to an abnormal event.

Reactions to crises

Immediate reactions

In the immediate aftermath of a crisis, a series of reactions, including shock, can be observed. One may develop feelings of dissociation, perceiving everything to be unreal, as though they are in a dream, or a bad movie. One's perception of time may be affected, as though time is standing still or flying by. Others may deny that the experience has taken place at all. Often, people in crisis, reacting to a violent event, will have difficulties understanding messages, remembering things, and concentrating. It is also not unusual to experience strong physical symptoms such as dizziness, nausea, head or stomach aches, inner unrest, and hot or cold flashes. Strong emotional outbursts such as crying may occur, but just as often no reaction, or apathy is also observed.

Some crises are associated with several successive shocks, and it can therefore be difficult to predict the course of the immediate reactions.

Subsequent reactions

In the time following the immediate reactions, reactions of psychological, physical, mental and behavioral character are typically observed. There is often overlap between these reactions, and the individual responses can be difficult to identify. At times, it is crucial to be patient and allow these reactions to occur, but it can also be important to provide oneself with breaks from the crisis/challenges.

Psychological reactions

In the time following the event, it is normal to experience feelings of powerlessness and helplessness concerning the crisis. Anxiety is also common, such as the fear of loss, or fear that the incident will repeat itself. People may experience worry and anger, but also joy and gratitude over being alive, succeeding, or receiving sufficient support.

Physical reactions

The human body reacts severely to a crisis. People are on high alert, making it difficult to relax – people may feel they are constantly on guard. The physical symptoms are similar to those encountered when experiencing stress. Additionally, flu-like symptoms may occur, such as head and stomach aches, diarrhea, a sense of unease, diffuse pains, or a general feeling of weakness and fatigue. Appetite and sleep may also be affected. Often, one will experience difficulties sleeping the first few days following the event, but this is no cause for concern. This is a normal response and is the body's way of reacting to and processing the violent experience a person has been through. It may be appropriate to consult a doctor if difficulties sleeping persist for more than 14 days, or if one is experiencing recurring nightmares.

Mental reactions

Cognition is easily impaired when in crisis: One may experience difficulties remembering, concentrating and making decisions. Many lose overview and feel lost, while others may experience an increased attention to detail that makes them feel energized and empowered. In crisis situations one's senses are often heightened, and a person may experience strong physical reactions as a result of sensory stimulation (sounds, smells and sensations). In the time following the event, it is normal to re-experience the crisis, or parts of it, in the form of flashbacks, nightmares or intrusive thoughts. After the event, certain sounds or smells may trigger strong memories about the crisis/trauma. For some, a crisis may affect the way they perceive themselves and their surroundings. As a result, they may find themselves making new decisions, or changing their life perspective.

Behavioural reactions

Crying and mood swings are clear examples of behavioural reactions. In the time following the crisis, some people will experience an inability to act and a sense of extreme physical exhaustion, while others find the need to remain active. Many may find it difficult to meet other people, and will avoid events or places in favour of isolation. Others may have a great need to socialize and repeatedly recount the event(s). Some benefit greatly from utilising their network, while others may feel that their network is unable to comprehend what has happened, and the individual's need to speak about the event(s). It is not unusual to experience changes in one's social network – both in the form of new and strengthened relationships, but also the termination of others.

There are many potential reactions, not all of which are listed here. It is important for individuals to respect their own reactions and find ways to master them. A vast majority will experience, that symptoms and the following reactions will subside as a greater comprehension and understanding of the crisis is obtained, e.g. through clarification and time to process the event(s), both individually and with friends, family and colleagues. If the reactions persist and one becomes concerned, or feels they cannot recognize themselves, it is important to seek help.



Building capacity for self-help

Accept that it is natural to react

Acknowledge all feelings, thoughts and actions, including those you find frightening or strange. The response pattern can manifest in many different ways, and there are no reactions that are more correct than others.

Share your thoughts and feelings with others

Show your vulnerability, so others do not assume you can handle everything on your own. Accept the support and care of others. If provided with the opportunity, it is beneficial to spend time with others who have shared a similar experience. It is particularly important to share your experience with those involved in the incident, as well as the people who are close to you.

Continue communicating

- even when the novelty of the event has passed. Find someone you can confide in. Every time you express your feelings verbally, parts of the experience are compartmentalized. Avoid being overly considerate of whether the people around you can handle listening to you – it is their responsibility to moderate this.

Confront the reality

- preferably with someone you know and feel safe with: Look at photographs, view the damaged or destroyed items, seek out places and people you associate with the incident, return to the place of the incident, if you have lost a loved one, see the deceased and attend the funeral. However, take the time you need, and evaluate how much you are able to manage.

Allow your surroundings to react

Allow your children and the people around you to express their thoughts and feelings - everybody will be impacted by the situation in their own way. Avoid judgement, if others react differently from you. Be respectful of the individual's reaction and thoughts.

Maintain your daily routines

Resume your work as soon as you feel you are ready. If necessary, ask for a special arrangement or "light work", to ease the hardest time. It can be a good idea to inform your colleagues of the event(s) – either personally or by mail.

Take care of yourself

New accidents - including traffic accidents – occur more frequently following violent events. People are often less attentive than usual, while driving or during other activities that require a large amount of attention.

Provide a good framework for yourself

Do things you enjoy doing, and practice self-compassion, so you ensure that you are taking care of yourself.

Do not run from the problems

When life is difficult, it is easy and tempting to use quick escapes such as self-medication, alcohol or a flurry of activities. These may be able to dull the immediate pain, but this develops a harmful strategy, that can inhibit your brain's natural processing of the events, and give rise to new problems.

Seek recreation

Constant struggle and challenge following a crisis is exhausting. Every so often, ensure that you think about something else, and engage in something enjoyable. Physical activity is recommended as it counteracts stress in the body, and may ease symptoms of insomnia. Bear in mind that it is okay to experience joy, even though a violent event has occurred.

Utilize your network

In the majority of cases family, friends and colleagues are helpful by providing compassion and support. However, if the immediate stress reaction does not subside within the first few days, you should seek professional help.

Psychological first-aid and compassionate support

Be available

Contact the victim, and remain in their company. Compassion and intimacy is in and of itself very healing.

Provide information

Provide relevant information for the victim, so they can gain an overview of what has happened. Repeat important information. Victims of crises may experience difficulties remembering what they have been told, due to general impairment of their concentration.

Active listening

Keep an open mind and accept the victim's record of the events. Listen to their accounts of what happened repeatedly. Avoid trivializing, dramatizing or diverting the victim's thoughts and experiences. Avoid using empty phrases such as "time heals all wounds" or "it isn't as bad as you think", as these are unhelpful to the victim.

Ask questions

Ask direct, concrete and elaborating questions, that help the victim process and grasp what has happened. Examples include "Try to tell me what first happened. What did you

do/think when it occurred? Who else was present? Where were you? What happened afterwards? What did you then think/do? How did you react? How are you feeling presently? What are you currently thinking about? What is going to happen now/and later? Do you need help or support?"

Avoid asking why

"Why" questions assume "because" answers. Providing explanations is difficult for the victim, as they are often very confused about what has occurred. If you are in doubt, be honest about it, and ask directly how you can help.

Do not dismiss feelings of guilt

When feelings of guilt are received with respectful attention and impartial information, it can have a calming effect. Conversely, telling the victim to be realistic, and dismissing speculations about things beyond their control, may result in the victim no longer finding it beneficial to speak to others.

Gently insist on maintaining contact

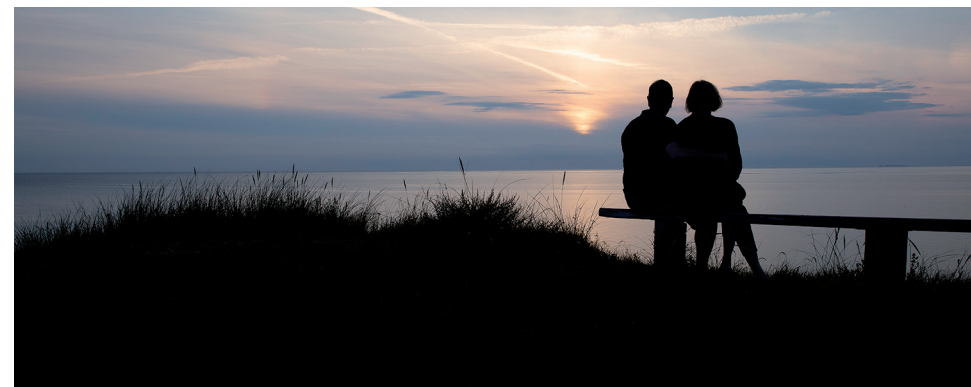
The victim may not wish to speak about the incident. If you are turned away, you can mention that talking about the incident would be beneficial for them. If they continue to decline, try again later.

Offer practical help

Help the victim with tasks of a practical nature, if they require it. The practical help should exclusively function as a support for the victim. Assuming responsibility may increase the victim's sense of helplessness.

Use your network

Remember to use your own network – it can be hard to accommodate and handle the pain and difficulty of someone else's experiences.



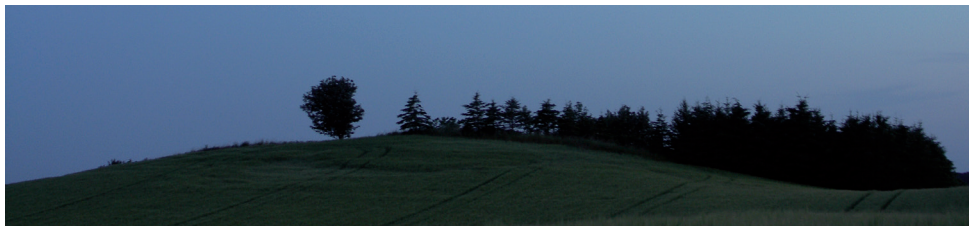
When should you seek professional help?

- If you do not have anyone to speak to about what happened.
- If you are exceedingly concerned about your condition.
- If you continue to feel unwell.
- If your family life and professional life are becoming increasingly negatively affected.
- If you are experiencing sexual difficulties, insomnia or persistent nightmares.
- If you are continually troubled by feelings of self-blame and guilt.
- If you are becoming increasingly irritable, losing your temper, and experiencing problems concentrating.
- If you are feeling increasingly indifferent towards yourself and your surroundings.
- If you feel the need to be constantly active, to avoid confronting your feelings.
- If you develop physical symptoms.
- If you are developing a constant consumption of alcohol or medication.

The quality, magnitude and duration of the reaction following a violent experience, varies from person to person. You may experience your reaction intensify, due to previously suppressed experiences resurfacing during the present difficulties.

A general indicator of the requirement for professional help is if you find your reactions are enduring or intensifying.

Your reactions are not a sign of weakness. If you continually experience significant burdens in your daily life following the event, you should seek professional help.



Governmental options for help

You can be referred to a psychologist if your practitioner assesses you as belonging to one of the following groups, thereby qualifying you for economic assistance from public healthcare:

1. Victims of robbery, violence and sexual assault.
2. Victims of traffic and other accidents.
3. Relatives of those suffering serious mental illness.
4. Persons suffering from severely debilitating illness.
5. Relatives to those suffering from severely debilitating illness.
6. Relatives of recently deceased persons (including involuntary miscarriage/ stillbirth after the 19th week of pregnancy).
7. Persons who have attempted suicide.
8. Women having undergone induced abortion after the 12th week of pregnancy.
9. Persons who, before the age of 18, have been victims of incest or other sexual assaults.
10. Persons above the age of 18 with mild to moderate depression.
11. Persons above the age of 18 with mild to moderate anxiety, including mild to moderate OCD.

Referral to a psychologist must be issued within 6 to 12 months following the event. The subsidy covers 60% of the psychologist's fee.

Members of the health insurance Danmark, can receive additional financial support for psychological aid.

Psychiatric treatment is free when referred by a physician.

Visit www.sundhed.dk for any changes.

Organizational options for help

If your employer is a customer of Dansk Krisekorps, the following offers for crisis counselling are also available:

- Psychological first-aid for the affected employees, provided by a psychologist (see intranet, contact your nearest manager or contact person).
- Crisis counselling for employees and management, in emergency situations, as well as consultancy for follow-up initiatives.

Or, depending on the specific agreement with Dansk Krisekorps, the following assistance for self-help:

- Consultancy for management regarding establishing a crisis contingency plan.
- Courses, workshops, and lectures for employees on psychological first-aid and collegial support.



Crisis management and organizational consultancy

In the event of a violent incident, it is important that the following steps are initiated:

1. The organization must act

In the event of an accident or assault, the responsible manager and the colleagues must know how to act. Developing a clear contingency plan for the workplace ensures this. The victim and others affected by the event, should never personally have to pursue the help, simply because our ability to assess what we need is impaired in a crisis.

2. External assistance must arrive promptly

It is essential for victims to have received their first meeting with the psychologist as soon as possible following the accident/situation. The initial meeting provides the psychologist and the victim(s) the chance to determine what help is required. The psychological first aid will consist of practical, psychological and organizational support, to mobilize both individual and group resources.

3. Help must be brief and effective – building capacity for self-help

The individual must be prepared for four to seven hours of therapy. Variations may occur, with both fewer or more hours, depending on what the situation requires. Crisis therapy aims to provide quick and effective treatment. The support provided focuses on the events that have occurred and looks to the future. The assistance builds capacity for self-help and draws on the resources already available to the individual, the group/organization, and the management.

Most arrangements will be made between the person from the organization establishing contact with Dansk Krisekorps, the victim(s) and the designated psychologist.

4. Aggregation of experiences

It is essential for the organization's development and the individual employee's sense of security, that they learn from the incident. This can be provided by establishing a written procedure, that clarifies preventative measures, and courses of action if a similar situation arises. Everyone must be informed of the procedure.

5. The psychologist collaborates with the manager and/or contact person

The designated psychologist collaborates with your organization and management, providing recommendations regarding the victim's subsequent work situation. This could include temporary "light" work, optimizing support from the manager and/or contact person, facilitating internal communication and exchange of experiences following the event, as well as which security procedures may require modification.

General guidelines regarding psychological first-aid and emergency assistance in the event of employee accident or assault

E.g. Explosions, fire, chemical spills etc.
E.g. Assault, robbery, theft, treats of violence etc.

Immediately

1. Relocate the affected employee(s) to a safe place with no disturbances. Ensure that no-one is alone, even at home.
2. Accept the reactions of affected employee(s) – they are normal in such situations.
3. Inquire what happened, how the employee(s) is/are currently feeling, and monitor reactions.
4. Contact appropriate authorities e.g. police.
5. Contact Dansk Krisekorps on our emergency hotline:

Emergency hotline: +45 7022 7610

The on-duty psychologist must have information about who is involved, what has happened, the state of the involved and their symptoms. Additionally, information about the time and place at which accident/assault occurred, and the name and phone number of the responsible contact-person must be provided. Dansk Krisekorps will then establish contact with the crisis psychologist.

6. Explain to the affected employees that an arrangement has been made with a crisis psychologist and that this is a completely normal procedure in events such as these.

Subsequently:

7. The nearest manager or contact-person must support the involved employees so that nobody feels at fault. For example, the psychologist and the manager/contact-person may make an arrangement with the employee, that involves temporarily modified working conditions.
8. Ensure that a report of the damages is written and that the employees' doctors are contacted.
9. Following the accident/assault, the nearest manager or contact-person monitors the well-being of the affected employee(s).
10. The psychologist co-operates with the nearest manager or contact-person collecting accounts and experiences in order to evaluate if the current rules and safety procedures are sufficient, or if new ones need to be developed.
11. If after six months there are enduring signs of impact and/or psychological signs, such as a deadlocked crisis reaction, it is important that additional psychological support is made available to the employee.
12. For at least a year following the event, the nearest manager or contact-person must show interest in the mental and physical well-being of the affected employees.



General advice for management regarding crisis contingency planning

Fundamental questions for management/contact persons when establishing a contingency plan, to ensure utilization of resources in the crisis process:

1. What should happen when a crisis occurs?
2. What are the rights and obligations of the individual employee?
3. Who is responsible for what must happen, and how will the help be provided?
4. How will you follow up on both an individual and organizational level?
5. Does the event entail changes in behavior, regulations, knowledge as well as understanding?
6. How, and how much of the above will be communicated?

A concrete proposal for the procedure during emergency events and subsequent initiatives

Before a colleague suffers a crisis, the following must be clarified and communicated to everyone in the organization:

1. When does the organization offer crisis assistance?
2. Who is/are the contact person(s) responsible for:
 - o Contacting Dansk Krisekorps, and thereby a psychologist, as well as police or medical assistance if relevant.
 - o Planning a temporary reduction of the workload for the victim, as well as support for close colleagues.
 - o Keeping an eye on the victim in the time following the incident.
 - o Informing the organization of what has occurred, in part to prevent rumors.
 - o If relevant, notifying authorities and/or safety representatives.
3. What colleagues can expect currently, and in the long term.
4. Where employees can access information regarding crisis assistance, and where to find information and contact details about the responsible managers/contact persons.
5. Where, how often, and how the current safety protocol is evaluated.

When you or a colleague suffer a crisis, the following procedure must be initiated:

1. Immediately contact the closest colleagues and the responsible contact person - the victim(s) must not be left alone.
2. Ensure that the affected parties are brought to a calm place;
 - o Show compassion and listen.
 - o Accept the various emotional reactions
 - o Never leave the victim(s) to assess what courses of action should be taken.
3. The contact person or manager contacts Dansk Krisekorps and requests psychological assistance. If relevant, they may also contact police or medical services.
4. Everyone involved in the event remains on-site until there is reached an agreement with the psychologist, on what is to be the following course of action.
5. The victim(s) must not be alone for the first 24 hours if a course of action has not been initiated or decided upon.
6. The day after the incident, the victim(s), the contact person and the manager – ideally in consultation with the psychologist – draw up a light work schedule for the following week. After the first week, those involved should evaluate this schedule.
7. Inform all employees in the organization or department of the event, and ensure them that what happened, and the people involved, are being taken care of.



Dansk Krisekorps

- Emergency crisis counselling
- Psychological counselling
- Short-term therapy
- Stress management
- Conflict management
- Contingency plans
- Crisis communication
- Courses on psychological first-aid



Dansk Krisekorps A/S is a nationwide company with more than 500 associated psychologists, owned by the psychologists Mette Nayberg and Morten Holler

Dansk Krisekorps currently provide acute crisis counselling, psychological consultation, short-term therapy and help for handling stress. We facilitate communication in crisis situations, and step in as consultants when developing contingency plans. We organize courses in psychological first-aid, and are called upon when groups or departments experience conflicts and difficulties cooperating. We solve consultancy tasks for private companies as well as public organizations.

Our services and interventions are selected based on many years of experience gathered from interdisciplinary fields of organizational and psychological knowledge.

The psychologists in Dansk Krisekorps are selected based on their qualifications as organizational psychologists as well as their supplementary training in therapeutic, and crisis, disaster and trauma psychology.

For both owners and management, it is important that the psychologists in Dansk Krisekorps are highly qualified. In collaboration with relevant professionals, we develop and implement courses for the psychologists, and supervise them when solving tasks. The management participates in international conferences and international supplementary training.

Dansk Krisekorps also has specialists for international assignments.

Our vision for Dansk Krisekorps

To be the group of psychologists in Denmark, where the customer is provided with the best service for price in crisis counselling, short-term therapy, and stress reduction, as well as resolving conflicts and difficulties co-operating. Our ambition is to supply new knowledge to the area, and develop new and effective forms of work and intervention.

As contractor, Dansk Krisekorps fundamental principles are

- We provide a 24-hour hotline, staffed by psychologists.
- The customer only pays for actual services.
- The confrontation charge for acute services is consistent regardless of the time of day the psychologist is contacted.
- We only employ psychologists with experience within both organizational and therapeutic fields.
- We provide short-term emergency assistance in crisis situations.
- We provide short-term therapy, when this service is relevant.
- We provide coaching at the request of the customer.
- We have expert knowledge and many years of experience solving difficulties in cooperation and conflicts. Tasks of this nature are solved on a consultancy basis through our Dansk Erhvervspsykologi division.
- We are constantly working to ensure an efficient and adaptable relationship with our client, and are open to requests regarding changes in services or methods of collaboration.
- We provide our customers aggregated information about their organization, if specified in their agreement with us.
- We always collaborate with the customer regarding the solution of tasks.
- We can assist in the prevention of accidents, assaults, treats, as well as occupational stress via development of informational material, intranet and contingency plans.
- We hold preventive lectures, workshops and training courses.
- We collect data, generate new knowledge, as well as develop new, more effective, means of intervention to be implemented in potential crisis scenarios.

Contact Dansk Krisekorps

If you wish to make use of one, or several of the services provided, please contact Dansk Krisekorps.

Dansk Krisekorps - office

Tlf. +45 7022 7612 - weekdays 8.00-20.00

Dansk Krisekorps - alarm

Tlf. + 45 7022 7610 - 24-hour hotline

Division Zealand (Sjælland) Vordingborggade 89
2100 København Ø

Division Jutland (Jylland) Ole Rømersgade 42
8000 Aarhus C

Division Funen (Fyn) Agerhatten 16c, Indg.2
5220 Odense SØ

e-mail: krisekorps@danskerhvervpsykologi.dk

Web: www.danskkrisekorps.dk



Dansk Erhvervpsykologi dansk erhvervpsykologi

- Test and career development
- Strategic skill-development
- Developmental and preventive management
- Innovation and dynamic management
- Coaching and management consultancy
- Courses and teambuilding
- Stress prevention
- Supervision



Over an experience of more than 25 years we have accumulated a vast array of knowledge and experiences within psychology and tangential fields. For this reason, we have chosen to prospectively focus on two areas of business: an organizational area, and a crisis related area.

Dansk Psykologhus



- Conducting psychological counselling for Dansk Krisekorps
- Solving tasks for Dansk Erhvervpsykologi
- Psychological coaching and development
- Training and supervision of psychologists
- Developing the transdisciplinary intersections within psychology



Our experts within the two areas of business, are accustomed to collaborating with a transdisciplinary approach, to ensure our customers are provided with best conditions. The tasks are solved in our psychological offices, placed strategically across Denmark.

Read more about the areas of business on our websites:

- www.danskerhvervpsykologi.dk
- www.danskkrisekorps.dk
- www.danskspsykologhus.dk

Useful links

The following links can be searched for the information you need, at your leisure:

Anxiety Union (Angstforeningen)

Provides insight into and understanding regarding: anxiety - stress - phobias.

www.angstforeningen.dk

Depression Union (Depressions Foreningen)

Learn more about depression, support groups, theme nights, research and media.

www.depressionsforeningen.dk

Danish Cancer Society (Foreningen Kræftens Bekæmpelse)

Read about available help and how to request it, if you or a loved one are suffering from cancer.

www.cancer.dk

The National Association for Families Affected by Suicide (Landsforeningen for efterladte)

Read about available help and how to request it, if a loved one has committed suicide.

www.efterladte.dk

The Psychiatric Foundation (Psykiatrifonden)

Find information regarding depression, causes, treatments, among other things. Read personal stories by those affected by depression, as well as referral to more information about depression.

www.psykiatrifonden.dk

National Board of Health (Sundhedsstyrelsen)

Information about the areas the authorities are occupied with, that affect most people, as well as examples of concrete actions.

www.sst.dk

Online Health Services (Sundhedsvæsenet på nettet)

Gain quick and easy access to the information you require as a patient, relative or employee in the Danish National Health Service.

www.sundhed.dk

Stress Union

Find information and support.

www.stressforeningen.dk

LifeLine (Livslinien)

If you are in crisis, or experiencing suicidal thoughts, tell someone. Consider calling

LifeLine (Livslinien).

www.livslinien.dk

Child Helpline (Børnetelefonen)

You are not alone. They are ready to help you at the child helpline. They provide anonymous counselling for everything, ranging from lovelife, to loneliness, to domestic abuse.

Own notes:

Your psychologist :

Telephone number:



Additional copies of this booklet can be ordered from Dansk Krisekorps at:

krisekorps@danskerhvervpsykologi.dk

The price is DKK 50,00 per booklet + VAT and shipping .

Edition 2020, version 8