

**DEPARTMENT OF HUMAN SERVICES CRITICAL INCIDENT
STRESS MANAGEMENT SERVICE**

**CRITICAL INCIDENT STRESS
MANAGEMENT AND
DEMOBILISATION RESOURCE
GUIDE.**

CRITICAL INCIDENT STRESS

Critical incident stress is a term developed to describe the reactions to work experiences of unusual and disturbing intensity. The response is more severe than that for general stress, since it follows from the specific threats of the disaster experience. They are usually not totally beyond the expectations people may have of their life or work, but still involve a threat or demand, which disrupts the ability to assimilate the experience.

The experience is too intense, complex or goes on too long and as a result, some elements of the experience cannot be taken in. These may be aspects that are genuinely less important, although they may only be unimportant at the time, but prove to be crucial in forming a later judgement about the adequacy of decisions or actions.

But since these aspects are not properly registered at the time, they cannot be assimilated, and in the same way as undigested food may cause problems, they are responsible for the development of symptoms and difficulties as time passes. Critical incident stress can be seen as resulting from the failure to integrate all aspects of the situation so that a comprehensive judgement can be made and the emotions and experiences have a secure meaning framework within which to be resolved.

It is usual for people who have been through a critical incident to have only an incomplete idea of the whole situation and their role in it. The lacking experience tends to generate emotional responses which are often not only inappropriate, but wrong when the full understanding is achieved. At each point of the integrative process, the lacking information will cause additional confusion, misjudgements or false conclusions. Thus the effects continue to ramify and develop as time goes by. The full symptoms are likely, therefore only to develop over a period of time.

CAUSES OF CRITICAL INCIDENT STRESS

Critical incident stress is related to experiences that occur within a context where there is some expectation or some resources available to the person to modify the impact. Where these are not present, the possibility of trauma should always be considered.

Any of the following situations may give rise to critical incident stress:

- Abnormally intense or distressing experiences
- Too much for too long
- Accumulation of small stresses
- Accumulation of past stress experiences
- Lack of time out or rest and recreation
- Exhaustion of emotional reserves
- Working alone or lacking in support
- Failure
- Too much to be assimilated
- Too great a work load
- Conflicts and management problems
- Ambiguous roles and accountability; organisational confusion.
- Personal preoccupations and conflicts
- Interpersonal conflict or competition
- Responsibility without authority.

COMMON INDICATORS OF CRITICAL INCIDENT STRESS:

Some of the following signs may be exhibited by people immediately after the event, or may appear after a delay of days or sometimes weeks. They usually last a few days, but in severe incidents or individual cases may persist for weeks or months.

PHYSICAL: Increased arousal, which may persist, restlessness, fatigue.

BEHAVIOURAL: Avoidance of reminders of the incident, inability to stop talking about it or detach from the event, wanting to engage in avoidance activity.

MENTAL: Flashbacks, can't stop thinking about or re-experiencing the events. Distract self to avoid thinking or remembering events.

EMOTIONAL: Fear or recurrence, of mental pressure (feel as if going mad, cracking up.) Lack of feeling, numbness, guilt, feeling helpless, inappropriate emotions, such as laughter, jokes. Delayed emotional reactions.

SOCIAL: Avoid people, feel threatened, wanting contact and reassurance. Excessive talking about events, or need for support, poor relationships with others involved in the incident.

EXISTENTIAL: Loss of commitment to job, work satisfaction, purpose, motivation, career plan. Sense of self, the meaning of life, and values may change. General review of career can result in the loss of attachment of job or new direction.

CHARACTERISTICS OF CRITICAL INCIDENT STRESS

- Reserves are used up
- People perform well but at a cost to self
- Function inefficiently more effort for less work
- Tend to keep going until the job is done then collapse
- Become run down and exhausted of nervous energy
- Recovery may be slow - need to recharge reserves
- Stress causing lifestyle which perpetuates stress
- Eventually "burnout"

In critical incident stress are that the experience is central and leads to a general preoccupation with it. Many other symptoms result from the attempt to digest or block it out. But the people can usually continue to do their work, even though not as well and at great cost to themselves. Sometimes the effects cannot be seen until after the work is completed. Most people suffering from it are likely to recover in time, although many will suffer considerably and other life problems may become confused with the critical incident stress to create complex problems which may not resolve easily.

RECOVERY FROM CRITICAL INCIDENT STRESS:

Recovery from critical incident stress is speeded up if the reactions are recognised and people are taught the meaning of their symptoms and helped to take steps to look after themselves, particularly of being able to go over the experiences so that they can sort them out and assimilate the missed elements. Usually they have the skills to work things out once they are clear about it. However, some of the symptoms encourage them to withdraw from those who may help them and not recognise what is happening.

Some people are able to accommodate to stress, but this may be at the expense of important parts of their life. After a period of time they may develop blunted emotions, chronic alert states, changed expectations for life (pessimism, bitterness), they may become antisocial, stop talking and interacting, narrow their scope of life and abandon the wish for happiness. These people often remain in their work and may have very harsh expectations of others. They may appear to lack sensitivity to the needs of their employees and the people they are there to help.

In living with stress, there is a gradual use of reserves of emotional physical and psychological energy and there may be a gradual reduction in effectiveness as fatigue and exhaustion set in. It is slow to develop and may accumulate from previously unassimilated experiences, or from a succession of demands, that though not great individually, do not allow for recovery and so collectively form a critical incident stress situation. This is called cumulative stress.

Another form is where there may be a level of demand which can be managed adequately for a time, but lack of recreation may mean there is not enough opportunity for recovery and assimilation and so the stress, though not so great remains constant. In time, this leads to serious problems of chronic stress. In this case, the person may continue to function effectively, especially if they are within their skills and develop health problems, such as ulcer, digestive problems, and skin conditions. Some may be fatal, such as heart attack or cancer. If this goes on too long burn out may occur, when recovery is unlikely to occur, since the person will have lost the motivation to do the work and suffered long term changes in their attitudes and values, often involving bitterness and pessimism which prevent them working effectively at all.

Recovery requires lifestyle changes, emotional and social support, rest and recreation and assimilation time. This may involve light duties, health care, diet, and exercise. Debriefing and counselling to identify needs and feelings, get it all in perspective and plan recovery process may also assist recovery.

DIRECT INTERVENTION

A number of direct interventions can be used to prevent, treat or minimise critical incident stress reactions. Critical incident stress interventions consist of:

- 1 Peer Support consultations conducted by peer support team members.
- 2 Demobilisation: conducted by managers.
- 3 Defusing: conducted by debriefer or peer to assist manager.
- 4 Debriefing: conducted by two debriefers.

- 5 Follow-up sessions for groups or individuals.
- 6 Pre-incident education.
- 7 Consultation to management.

INDIVIDUAL PEER SUPPORT:

Individual consultations offered by peer support team members are the first contact for many sub-critical incidents. They often include distressing or disturbing encounters with clients, interpersonal conflict, overload, conflict with management and other work or non-work related anxieties. Usually they take place in the immediate environment of the work and are of limited duration (most are about 10-20 minutes). They offer immediate, informal contact that is effective in interrupting stress responses and initiating constructive coping strategies or problem solving.

Peer support sessions need to recognise the crisis nature of the contact, and principles of crisis interventions are likely to be helpful. However, it is also likely that there will be a wide range of problems referred and so some other principles are helpful in thinking about the consultations.

Peer Support Consultations:

1. Listen and allow the person to talk himself or herself out; use this time to consider whether they are describing an emotional crisis, critical incident stress or other problem. The most important element of the intervention is to allow their emotional arousal to reduce through communicating in a supportive, empathic relationship.
2. It is usually best only to begin problem solving when they are calmer and can think more rationally. This may even need to happen on a subsequent occasion. A good rule of thumb is also not to try and solve every problem, or even the most pressing one. The distressed person will feel better if they can see how to deal with *one* of their problems. This gives them hope for the other problems.
3. Another important rule is not to try and do too much. When they calm down or get over the immediate crisis, it is likely that they will be able to think of a lot of things to do themselves. It may be that your best contribution is to help them get into a more constructive state of mind in which they can think for themselves.
4. Finally, encourage them to take time before acting to allow them to consider all alternatives. This is most likely to happen if they feel there is some possible solution. The peer's role is often to assist with gaining perspective, giving encouragement and emotional support from someone who is or has been in a similar position.
5. Try to ensure that they make some simple decision or agreement that will improve some aspect of their situation before the end of the consultation.

Individual consultations are also an essential component of group debriefings and follow up services. Not everything can be expressed or resolved within group sessions. After a group session, there may be issues which individuals need to express privately, and follow up is often based on the fact that the group session has resolved some more general matters and this has allowed individuals to begin to identify those which are pertinent to them personally. In the peer support context, the consultations are usually informal, at short notice and the person seeking it is likely to be distressed or agitated. In these cases, the aim may be provide immediate support and assessment for the most appropriate referral. However, it is also likely that in many instances, people may only require short-term support and some assistance to think clearly.

A number of principles in conducting a support consultation can be found in discussions of active listening or communication skills. The first point is that expressing emotions and experiences in words organises and clarifies them. This often allows the person to take a different view of things and make some new connections that open up new solutions. When asking people to express themselves, concentrate on understanding it as well as possible. Anything the listener does not understand or which seems unclear can only be so because the speakers are not expressing themselves clearly. This is because they are not clear about it in their own mind. Therefore anything done to clarify it for the listener will provide a framework for speakers to clarify what is not yet clear in their own mind. The important guideline is: *conduct the conversation, ask questions and make statements to ensure that you are quite clear about what is being said and what is driving the person to bring up the experiences they do.* Such a strategy will ensure that at the end of the conversation, the speaker will have clarified much that was previously unclear. Also remember that when a person is in a state of high emotion, asking them to express this in words will gradually reduce the intensity, even if they have to say the same thing a number of times.

OTHER INTERVENTIONS.

In order to provide a comparative overview of the main interventions, the following table summarises the circumstances in which they may be used, the stages or format of the sessions and some general indication of the possible time frame for each section of the sessions. However, these times are only a general indication and the important consideration is that the conductor pays careful attention to the needs to the group. Evaluation of debriefings show that participants feel that the session does not meet their needs if the conductor follows the prescribed format too rigidly, without allowing people time to express what they want to say, or if on the other hand, the session is too unstructured and they are not able to see its purpose and direction. Conductors need to consider the needs of the group as it develops during the session in relation to the requirement for effective integration.

	DEMOBILISATION	DEFUSING	DEBRIEFING
AIM	Terminate incident, resume normality.	Reduce arousal, resolve conflicts, initiate rest.	Account of incident, initiate recovery, mobilise resources
USE	All Critical Incidents	Distress, arousal, complexity, unusual.	CIS, complex, ambiguous, team effects.
WHEN	Before end of shift.	Within 12 hours.	Within 3-7 days.
WHOM	Manager, any responsible person.	Trained peer, debriefer.	Debriefing team.

The stages in these three interventions are analogous, but not equivalent, since the task of each is different. There may be specific issues that need to be attended to in Demobilisations or Defusings, and these may require departure from the sequence, however, the structure of the sessions has proven a reliable and safe structure for the sessions.

	DEMOBILISATION STAGES	DEFUSING STAGES	DEBRIEFING STAGES
1	GATHER the staff [2 mins]	INTRODUCTION [2 mins]	INTRODUCTION & RULES [5 mins]
2	SUMMARISE: so everyone knows everything [5 mins]	FACTS: as much detail as available. [10 mins]	FACTS: 1 st Telling [20 mins] 2 nd Telling [70 mins]
3	QUESTIONS & ISSUES [10 mins]	DISCUSSION: what is on their minds now. [15 mins]	THOUGHTS: during and since the incident [30 mins]
4	ARRANGEMENTS for next 24 hours [5 mins]	ARRANGEMENTS for next few days [10 mins]	REACTIONS: during and since the incident. [20 mins]
5	STRESS INFORMATION [5 mins]	STRESS INFORMATION [5 mins]	SYMPTOMS: Inventory [15 mins]
6	IMMEDIATE NEEDS for next 24 hours [2 mins]	IMMEDIATE NEEDS for next few days [5 mins]	STRESS EDUCATION & ADVICE [15 mins]
7	PROBLEM SOLVING [2 mins]	PROBLEM SOLVING [5 mins]	PROBLEM SOLVING [5 mins]

These interventions are discussed in more detail below.

DEMOBILISATION

Demobilisations are conducted by the manager or any other person with a position of responsibility and will usually take the place of a defusing if a trained debriefer is not available. They also may be performed when a defusing cannot be conducted for some time. If a defusing is to be done it should be conducted before the people leave the workplace or within 12 hours of the event. A Demobilisation is intended to ensure that participants in the incident have the opportunity to reverse the sense of emergency and arousal that has been a consequence of their mobilisation for the emergency. It also ensures that social support is initiated and communication about the events is commenced, and immediate needs are identified and met.

Step 1. Gather the People. A meeting is called of all those involved or likely to be affected. The manager informs them that an event has occurred and the meeting is to ensure that everyone understands what has happened and to make arrangements for the next period of time. This meeting fits into normal management arrangements.

- Step 2. *Summarise the events.*** The most informed person provides a consistent account of the events with as much detail as is available and indicates, clearly where there is detail or information lacking. Arrangements to ensure that this will be obtained if possible are made.
- Step 3. *Questions and issues of concern are discussed.*** A short period of time is allowed for the participants to clarify or discuss what has happened. This is also the time when the implication of the events may be considered.
- Step 4. *Arrangements for the next period of time are made.*** Under the manager's guidance the implication of the incident on the work place are considered and appropriate arrangements made to relieve staff of concerns about possible conflicts between the demands of their work and their recovery needs.
- Step 5. *Stress information is provided.*** People are informed that this is a critical incident and as such will cause stress reactions, which are normal and are no indication of their adequacy for the job they are doing. On the contrary they are an indication of the healthy commitment to their job. Printed pamphlets are provided to ensure that people can consider the possible reaction and share the information with their family members. Advice is given for the management of the reactions.
- Step 6. *Immediate needs are considered.*** These involve going home, whether those living alone wish to arrange support, notification of family members, management of the media or other possible exposure of participants to unwanted scrutiny.
- Step 7. *Problem solving.*** This is a short final phase to ensure that final arrangements are made and that any issues identified in the course of the defusing are referred for appropriate follow up.

DEFUSING.

This consists of a structured session held before workers leave the scene or within 12 hours of the event and should be conducted by a trained manager or a member of the CISM Service team. It aims to: Bring the experience of the incident to a conclusion, allow opportunity to express immediate concerns, provide immediate support and give available information, inform staff of likely further action and follow up arrangements, assess needs and reactions, start the individual's and group's recovery processes, give information on acute stress responses and advise what to do until next contact. These are summarised below:

- Step 1. *Call the meeting.*** It is important that the manager or other responsible person calls the workers together before they leave the scene and the purpose of the meeting is briefly outlined to them.
- Step 2. *Review the events.*** The manager or other person most suitable recounts the events, ensuring that all present are clear on the details as far as they are available.
- Step 3. *Questions and concerns.*** People are then invited to raise concerns or ask questions and the defuser works with them to ensure that they are clarified as much as is possible in the circumstances. This may mean correcting misperceptions, clarifying events and exploring causes. It may also extend to concerns that cannot be settled but can be documented for later follow up.

- Step 4. *Discussion of reactions.*** The defuser asks for people to describe dominant reactions. These are normalised and explained in relation to the events where possible.
- Step 5. *Advice and information.*** The defuser provides advice on self-care and information (written if possible) on critical incident stress.
- Step 6. *What to do next and current needs.*** People's current needs are considered and arrangements are made for safe return home and return to work.
- Step 7. *Follow up arrangements.*** Arrangements are made for debriefing, follow up sessions or provision of additional information about the events when available.

Defusings should be held daily at the end of each shift, end of a sojourn, change of stage or pace of the recovery, or when new issues arise. The defusing should include an operational review, what people have been doing, the impact on thoughts and feelings, problems and issues to be identified, problem solving and feedback, follow up arrangements.

PREVENTION AND MANAGEMENT OF STRESS

The most effective way of managing stress is to prevent it where possible, minimise it when it is inevitable and provide direct help when it has caused difficulties.

PREPARATION:

People need preparation for the stresses mentioned by training them to recognise their manifestation and techniques to manage them. This has been called stress inoculation. Personal stress management skills allow them to manage their workloads and take the time and other assistance they need to prevent the build up of problems. Training in crisis, critical stress, and traumatic stress enables them to recognise and treat it early and prevent it developing further.

MANAGEMENT:

People give of themselves and perform beyond the call of duty and do the work that is required. But this needs to be recognised by management or they become very vulnerable to feeling discounted and devalued. This seriously reduces their stress tolerance capacity. Insensitive management causes bitterness and pessimism and disillusionment that last a long time and may alter careers. The management structure is the framework for the decisions which give the work its meaning. Management problems and inefficiencies and stresses take precedence over work content problems and carry the emotions so that the actual experiences-are not easily assimilated. Management can make people feel:

useful	useless
supported	isolated
effective	ineffective
meaningful	meaningless
valuable	useless
important	irrelevant

PREVENTATIVE MANAGEMENT STRATEGIES:

- Ensure that adequate support is provided
- Working in teams
- Rotate through high and low demand tasks
- Limit exposure to stressful situations, eg. contact with victims.

- Provide regular time out when this has occurred.
- Good communication
- Access to managers so workers feel listened to and have needs recognised.
- Good training, preparation and supervision.
- Defusing and Debriefing
- 2-way management information flow, regular input and allow workers to talk so they can hear

STRATEGIES FOR MANAGING REACTIONS:

When workers have reacted to their experiences, a number of management strategies will assist them:

- Limit the incident's duration when possible.
- Manage worker's departure from the scene, or from work at the end of the day or shift.
- Re-establish personal functions: work, family, personal management
- Resume as much normality as possible when appropriate.
- Reconstitute support networks
- Confirm their right to be affected and to have symptoms and the availability of assistance
- Provide information about reactions
- Provide information on time scale of recovery and long term responses
- Sensitise support systems to needs of affected workers.

SUPPORT STRATEGIES

Workers need to feel themselves a part of a supportive community that will provide them with acceptance, common language and values to share their experiences so they can be assimilated.

For this they need:

- **Supportive Management**, which includes a caring and valuing attitude, plenty of information (including information that there is no information). Ensure that staff feel they are being heard, give them regular feedback and symbolic recognition and thanks.
- **Access to peers and social networks** so they can share experiences, communication, have the leisure to do this, obtain some enjoyment, allow them to compare their experiences with others so it can be evaluated. Create and maintain communication channels, promote free exchange of information.
- **Access to family and loved ones** and other personal support networks.

Support allows the individual to feel the experience is not carried alone. It involves a sense of belonging, understanding, empathy and acceptance. It needs to be provided throughout the system and from all levels of which staff are accountable.

TECHNIQUE OF SUPPORT:

- Support starts immediately and continues indefinitely.
- Talk to affected people about the event and its repercussions not about personal responses until offered.

- Show solidarity, express valuing, affirmation appreciation, not sympathy unless part of the intimate personal support system.
- Do things to be with the affected person, e.g. invite for coffee, but be sensitive to the need to be alone.
- Inform other staff what happened so the same story does not have to be endlessly repeated.
- Provide practical backup for routine responsibilities.
- Convent affected group to inform that the incident and their responses are officially recognised and supported.
- Accept and respect reactions
- Invite other teams to show support
- Provide information and update without having to be asked.
- Quash rumours, scapegoating, splits etc., and protect affected people from over exposure.
- Respect different support systems, eg. Personal, professional, family, management, and preserve these boundaries.

Social support provides the basis for the social system in which the digestion and assimilation of experiences can occur. This system "buffers" people against the effects of stress. Good support increases the capacity to cope and provides a basis for learning. Avoid isolation, long shifts without leisure and enjoyment, impossible tasks, lack of feed back, lack of peers.

GUIDELINES FOR COPING WITH STRESSED PEOPLE.

Stressed people are likely to let out their frustrations on when they have the opportunity to express themselves safely. This may mean they become angry with whomever comes along, especially those who are trying to assist them, because there may be no one else that the can safely do it to.

Typical reactions are to:

- Get angry and blame helpers for things they have no control over.
- Burst into tears, get very upset when helped or when they don't get what they want.
- Get frustrated and angry because help is too little, too late, or not what the need most.
- Not want to talk to helpers or not stop talking about what that has happened.
- Be confused, can't think or answer questions clearly and are frustrating to deal with.
- Forget to do simple things or that someone else has done things for them.
- Treat helpers as though they are making things worse
- Be unable to understand what organisation the helper comes from.

These are normal but take time to go away after the crisis.

STRATEGIES FOR SUPPORTING STRESSED PEOPLE:

Some simple strategies help to stop the reactions. Listen to them for a while, let them know what they are saying is important, give any information possible and help with practical needs. Also:

- Don't take things personally. Think of it as a message about how they feel, and not about oneself.
- Assess what they need, they may be confused or not be able to express it.
- Help them regain control by making even small decisions about themselves (eg, "would you like me to do it now or shall I come back later?").
- If they are emotionally distressed, allow time for them to settle down.
- Don't try to talk them out of their feelings unless you are sure that it will be OK. It may be better to just empathise with it.
- If they are crying or distressed with anger or other emotion, wait with them quietly with confidence that the worst of the storm will soon pass and they will be ready to talk again.
- Confirm they have good reason to be upset, it is normal and will pass.
- Help them recover their composure.
- Listen respectfully to everything they say, show it is important, even if for the moment you are not clear on its relevance.
- Encourage them to think about whom else they can get support from.
- Tell them it is healthy to be upset, unhealthy to suppress it.
- Remind them to take care of themselves; accidents are more likely under stress.

GUIDELINES FOR HELPFUL LISTENING:

Letting people talk is one of the best ways for them to calm down and start thinking more logically. It is difficult to remain in the same emotional state at the same time as expressing yourself about it. However, if there has been a long build up it may take time and they may often need to express the same ideas many times before they can move on. This can be considered as though each expression carries only a fraction of the emotional energy associated with the issues and so they need to repeat enough times before the tension decreases enough. Discharging the tension is not only a matter of their expression, but also of being heard, understood and empathised with. This gives the feeling that the tension has recognised by the hearer. Hence the listener has an important role in making the communication work.

You can do a lot to help people talk things out without saying too much yourself. The following guidelines have been found to be helpful:

1. Look directly at the person speaking to you, without staring at them.
2. Give them your undivided attention and indicate your interest in what they are saying.
3. Avoid interrupting. Remember that your suggestions and advice will not be helpful until they want them, and this will not be until they have discharged the tension within them.
3. Ask questions occasionally or rephrase what they are saying to make sure you understand what they mean and they know this.
4. Don't judge or give opinions, let the person say what they want to say. It is what they say that will be of help to them more than what you say.
5. Don't tell people what they should think or feel. Rather try to understand why they think and feel the way they do. It is up to them to change this when they have justification to.
6. Make sure know why a question is being asked before answering it. While it is important to give information and advice when it is asked, stressed people often are not clear about what they need.

People are more likely to get things in proportion after they have expressed their feelings. What they are saying is what they feel at that moment. They will probably feel different by the end of the conversation.

ADVICE ON MANAGING STRESS

Chronic stress: The following suggestions may be of assistance for people suffering from chronic stress:

1. Allow *time for recovery*; respect your body's timing; don't pre-judge how long you may need nor force the pace, let your feelings tell you what you need.
2. You may need time to *re-supply your reserves* before you actually start to feel better.
3. Actively *attend to your physical needs*; watch over and care for your health; don't postpone what you should do to look after yourself.
4. Develop *routine and rhythm* to life that takes account of your needs, takes pressure of decision-making and helps you through periods of apathy or lack of motivation.
5. Take regular, non-stressful exercise (eg. walking, swimming, cycling, jogging) alternating with periods of *planned, deliberate relaxation* (eg. progressive muscle relaxation exercises, meditation, baths, yoga, breathing exercises).
6. *Do something enjoyable every day*, be nice to yourself - you deserve it, pleasure is the best antidote to stress.
7. Spend time on a regular basis to *reflect and take stock* of what has changed, how you are recovering; write down what you find out or talk about it with someone you trust, keep track of yourself.
8. Think carefully about *food, drink and diet*. Eat regular, balanced meals emphasising protein and complex carbohydrates; minimise fats, sugar, alcohol, caffeine, chocolate, tobacco as much as possible; these prolong and complicate the stress response.
9. Take *plenty of rest*; allow your body to come down off the high performance it has been used to. You may not realise how much you need it till you actually do it.
10. Spend *time with people who understand* what you have been doing or are supportive of you; get a perspective on your experience by comparing it with others who have been through something similar.

Critical Incident Stress. The following suggestions may help people who have experienced a sudden critical incident:

1. *Accept that you have been through a highly stressful experience*, things will be different for a while and you will have strong reactions; acceptance is the first stage of recovery.
2. *Allow time for the memories, dreams or flashbacks to fade*; when they intrude, give them attention and then put them aside, don't try to fight or suppress them, confronting the reality bit by bit helps come to terms with it.
3. If *memory, concentration and planning* are affected, use aids, write things down and do things in short bursts.
4. It is normal to have changing moods after critical incidents, *respect your emotions* even if they are not normal for you; feeling bad usually passes quite soon, tolerate it and see what it means rather than take it away with distractions or numb it by alcohol or other means, these only make it worse by stopping real resolution, which will come in time.
5. If emotions are unstable, try to *plan the day* so that you are not overstimulated or exposed to upsetting or unhelpful stimuli.
6. If sleep is affected, *plan for quality rather than quantity of sleep*, wind down at night and spend time preparing to go to sleep; arrange to take catnaps during the day.
7. *Find people you trust to talk to* about the event and your reactions; talking helps to defuse feelings and make sense of things and builds bridges with others.
8. *Take extra care of yourself*, critical incident stress makes people more susceptible to infections, accidents, emotional decisions or mistakes.
9. *Adjust your lifestyle to your needs* as they are *now* and don't just do things out of habit or because you planned them some time ago if they no longer feel appropriate.
10. *Avoid making important life decisions* until you're recovery is well in hand and you can be objective; but *make as many small decisions* on a day to day basis to ensure you have control over your life.

Assistance from Family and Friends: The person's support networks may be unfamiliar with what is helpful after stressful events. The following advice can be given as a basis:

1. *Spend time with the stressed person*, without judging or demanding, their recovery will occur in its own time.
2. *Offer support and a listening ear*, talking is one of the best things they can do to work things out; but they will may need to go over things many more times than normal.
3. *Help with practical tasks and chores*, this enables more of their energy and time to be given to the recovery process.
4. *Give them time, space and patience*; don't take it personally if at times they are irritable, bad tempered or want to be alone. These are a natural part of the stress response and will pass as they recover.
5. *Don't try to talk them out of their reactions*, minimise the event or say things like "you're lucky it wasn't worse," "pull yourself together," "how do you think it was for me" or try to get them to look on the bright side;

stressed people need to concentrate on themselves at first; they will feel supported if you let them know you are concerned, want to help and are trying to understand. They will see your viewpoint as they recover.

When to seek additional help: Sometimes it is important to provide some guidelines for people to know when their own recovery activity requires additional help. Personal recovery may need to be supported by specialist knowledge to ensure that the stress does not linger unnecessarily or lead to other health problems. Stress problems respond rapidly with professional advice and information. Indications for this are:

1. If recovery has stalled or does not seem to be proceeding;
2. If physical or other symptoms are causing concern;
3. If there is no one to talk to or relationships are being affected by the stress;
4. If there is emotional numbness, depression or continuing anxiety.

PSYCHOLOGICAL FIRST AID AFTER TRAUMA.

Disaster or trauma involves massive emotion and unexpected experiences that may lead to *traumatic stress*. People directly involved and bystanders are likely to be affected. Reactions can be intense and take time to resolve. Immediate assistance reduces the problems. People can be helped to look after themselves.

Trauma overloads the mind and emotions and may cause immediate or delayed reactions. It destroys normal expectations and confidence in predicability, and personal safety. It may cause confusion and disorientation, as people do not know what to do with themselves in such an unusual situation. They may be reluctant to leave the scene, feel locked into it or attached to the people involved. It is important not to tell them what to do without first trying to understand what they need.

People not knowing what is happening to them and whether the reactions they experience are normal or abnormal; all severely aggravate their problems. Some people feel foolish and ashamed of themselves, and may be finding themselves expressing uncontrolled emotion in public for the first time in their lives.

THE ROLE OF THE PSYCHOLOGICAL FIRST AIDER

First aiders can help by listening, supporting, giving information and helping with practical needs. Give clear, simple guidance as soon as possible and restore confidence so people can begin their own personal recovery processes. People need information about their reactions, and to understand what is happening and simple advice about how to help themselves through it.

- Look to see what people want and need. They may not be able to express it. If necessary inform managers who may not be aware of their needs and advocate on their behalf.
- Help them feel in control of themselves by letting them make whatever decisions possible about their own welfare.
- If they are distressed, provide comfort and companionship. Do not reassure or talk them out of their feelings, but offer them calm, confident empathy.
- Confirm they have good reason to be upset, it is normal and the current distress will pass, but be sure that the situation is not minimised in any way.
- Help them recover their composure in their own way and their own time. Often it is best to sit quietly with them till the emotion subsides.
- Listen respectfully to everything they say and indicate it is important and you wish to understand them.

- If dazed or shocked, gently give advice about what to do to look after themselves and where to go next. Ask them to tell you what they need, concentrate on simple needs first, eg drink, warmth, family members,
- Help people to find their companions as quickly as possible and encourage them to stay together. Encourage them to support each other.
- Advise them to take time to settle down before they leave, and not to rush away till they are ready, or until there are others to meet or take care of them.

GENERAL ADVICE:

The following general advice will help to minimise the impact of traumatic stress:

- Recognise you have had a distressing experience and you will react to it. Do not try to talk yourself out of it or see it as weakness.
- Stay close to other understanding people for support.
- Talk and think about what happened; blocking it out will make it worse. It is healthy to be upset, but unhealthy to suppress it.
- Be careful on the way home, concentration may be impaired, accidents are more likely.
- Take time out to recover over the next few days and watch your reactions so you know how to look after yourself.
- You may take time to calm down afterwards, do things to help yourself to relax and unwind.
- If you are numb and switched off, try to involve yourself in some of the simple routines of life to get going again.

UNHELPFUL WAYS OF RELATING TO AFFECTED PEOPLE

The following are likely to make things worse for people in traumatic stress. Wherever you see this happening try to assist in gaining better understanding for their needs, offer support to the affected people or report it to anyone whom you think may be able to assist the situation:

- Ordering them around or telling them to do things without explaining why
- Telling them not to worry, that it could have been worse, others are worse off or they are lucky it wasn't worse
- Talking down to them
- Not listening to them
- Reassuring them that everything is all right when it is not
- Taking their anger or other emotions personally
- Separating them from those they are with
- Getting sentimental or excited with them
- Not giving them privacy or independence when they need it

LOOKING AFTER YOURSELF

Dealing with distressed people can be exhausting. Providing support requires self-care and opportunities to unwind. To do good work and provide quality help it is important to:

- Take regular breaks
- Stop when you have had enough
- Talk about the day before you go home if it has been difficult
- Take care to avoid accidents if you are preoccupied by what you have heard
- Make sure you look after yourself and get proper rest
- Spend some time doing things you enjoy with people you like when off duty
- Get plenty of rest and sleep
- Take exercise to relax
- Eat well and regularly