

THE COUNSELING TEAM INTERNATIONAL

San Bernardino

1881 Business Center Drive, Suite 11
San Bernardino, CA 92408
Phone: (909) 884-0133
Fax: (909) 384-0734

Satellite Offices:

*Claremont, Corona, Palm Springs,
San Diego (3), Temecula, Victorville
and West Covina*

POST TRAUMA INFORMATION FOR FIRE SERVICE PERSONNEL

Handout #1: PROCESS

- a. Denial
- b. Anger/Hostility
- c. Guilt/Bargaining
- d. Withdrawal/Depression
- e. Accepting/Gradual Testing and Re-testing

Handout #2: FEELINGS

- a. Emotional Numbing
- b. Isolation
- c. Intrusive Thoughts/Flashbacks
- d. Sleep Disturbance
- e. Anxiety and Fear
- f. Loss of Interest/Burnout
- g. Re-consideration

Handout #3: HOW TO PSYCHOLOGICALLY SURVIVE

- a. Available Employee Support Services
- b. Critical Incident Debriefing
- c. Ability to Vent Fears
- d. Tell the Department your Needs
- e. Be Aware of Performance
- f. Re-referral if Problems Continue

PROCESS

Being involved in a traumatic situation, regardless whether or not it was a shooting, suicide, stabbing, traffic collision, or etc., produces feelings equal in intensity and similar reactions to those which an actual death of a loved one can cause.

These reactions are:

INITIAL DENIAL - That the traumatic incident took place, "this couldn't have happened to me", and produces at first a retreat into a fantasy life where it never happened. Many feel that the event happened in slow motion. After the traumatic incident it took them quite a few moments to realize what happened.

HOSTILITY AND ANGER - Which can be non-directed (just mad that it happened), or directed toward the person who caused you to be involved in the traumatic incident. This hostility is short-lived, but returns several times during the adaptation process.

FEELINGS OF GUILT/BARGAINING - Internalized or projected, over things you did or didn't do (wishing the traffic accident didn't occur), or things you might have done differently during the traumatic incident. Fear of loss of job is also common.

WITHDRAWAL/DEPRESSION - From those happenings too painful to cope with. The depression lasts the longest and may go on for weeks or months in degrees. The length of time depends on your basic personality, the type of traumatic incident, how the department deals with the incident, the availability and use of employee support services, and the handling of the incident by the media.

GRADUAL TESTING AND RE-TESTING REALITY - To feel out the possibility of being able to cope with future situations that are similar. This leads to final ACCEPTANCE, acknowledging that this incident happened and that you have survived. The pattern ends with an eventual letting go from the influence of the past experience so that a new part of your life can begin.

NOT ALL OF THESE REACTIONS ARE EXPERIENCED BY EVERYONE, AND NOT NECESSARILY IN THIS ORDER, ALTHOUGH THIS IS THE MOST COMMON FORM OF REACTION TO A TRAUMATIC INCIDENT. SOME FEELINGS MAY RETURN, USUALLY ANGER AND RESENTMENT, BUT NOT TO A DEBILITATING DEGREE AFTER THE FINAL ACCEPTANCE.

FEELINGS

The feelings involved after a traumatic incident consist of seven basic reactions. These are:

EMOTIONAL NUMBING – Fire Service Personnel distance themselves from the incident and make an effort not to feel anything. They almost deny having an emotional component, and therefore give the appearance that they are in a state of shock. They usually say, however, that they are in control and are having no problems dealing with the situation.

ISOLATION - They experience the feeling of being alone and that no one else knows what they are going through. They may experience irritability and agitation, and may again deny that anything is wrong.

INTRUSIVE THOUGHTS/FLASHBACKS - They will relive the event in their minds, over and over again. If it continues, they begin to wonder or question whether they have complete control of their thoughts. This can change their final outlook, for better or worse.

SLEEP DISTURBANCES - Disturbances that can result from a traumatic incident include inability to sleep, nightmares and waking in a cold sweat. In the nightmares, the theme is fear or guilt. Guilt is common in 95% of traumatic incidents to varying degrees. This guilt can be translated into anger or depression.

ANXIETY & FEAR - The fear most commonly felt is that of returning to the exact job duties as before.

LOSS OF INTEREST/BURNOUT - Loss of interest in work is difficulty in returning to it. Mundane activities suddenly become boring.

RE-CONSIDERATION - Re-evaluation of each person's value system, goals and status is often the final step that determines the person's abilities to cope and how he will continue his future activities. Some consider giving up their current careers. They may also re-evaluate their marital situation. Some make a stronger commitment and others get divorced.

HOW TO PSYCHOLOGICALLY SURVIVE

AVAILABLE EMPLOYEE SUPPORT SERVICES - Have available employee support services immediately, before the Fire Service Personnel go home. On-call counselors are ideal. This allows them to verbalize their feelings and concerns while they are still fresh, and in an atmosphere that is "safe".

CRITICAL INCIDENT DEBRIEFING - Many times they can relate to a group of their peers with whom they can share their experiences. The Counselor will arrange this debriefing, which allows the ventilation process to occur.

ABILITY TO VENT FEARS - The opportunity and ability to talk to their peers and/or family members about their feelings is very important. It prevents hiding negative feelings.

TELL YOUR DEPARTMENT YOUR NEEDS - Let the department know what you would like to do: You may wish to take a few days off, work light duty for a short time, take a sick leave or vacation.

BE AWARE OF PERFORMANCE - When Fire Service Personnel are on the job doing light duty after a traumatic incident, it is important to be aware of his/her performance and his/her feelings about it. They should examine their feelings; identify those parts of their job that can cause anxiety and then work on alleviating that anxiety.

RE-REFERRAL IF PROBLEMS CONTINUE - If the initial debriefing does not completely ease the tension and help the Fire Service Personnel return to productive duty, re-referral to the same source, or to another source may be necessary, this is usually provided through the Employee Support Services provided by the department. Counseling may also be needed for the family members, so they can also work on their feelings.

RESEARCHED AND ADMINISTERED BY:

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