

How Co-workers Can Be Supportive

What can you do when a co-worker is either the victim of or witness to a traumatic event? You may feel awkward or embarrassed. You may have your own feelings about the event that are difficult to resolve. Most of all, you may simply feel you don't know what to say. The following tips may help you formulate a response that shows your co-worker that you care and want to be supportive.

Acknowledge the event. Pretending that nothing happened may seem like the easiest thing to do, but it won't help the affected individual recover. You may want to acknowledge the event with a small ritual like sending flowers or making a donation. Don't ask questions; Just listen. Asking detailed questions about what happened usually comes across as ghoulish and intrusive. If your co-worker wants to talk about the event, just listen. He/she may repeat the details many times and this is a part of the healing process. If they are not yet ready to talk about the event, don't push it; just be available when they are ready.

Offer long-term emotional support. It takes longer to recover from trauma and grief than most people realize. A year might seem like enough time to "get over it", yet the first anniversary is often a difficult time for people.

Be involved in the re-entry process. When your co-worker returns to work, you may have natural concerns about his/her ability to work, how they will look, or whether they will want to talk about the event, If appropriate get involved in planning for your coworkers return to work.

Offer practical support. Instead of the catch all phrase "If there is anything I can do..." offer to do specific things such as give rides to and from work, run errands, or pick up part of their workload for a while (check with the boss first).

Watch for signs of abnormal reactions. Behavior that would usually be considered strange may be quite normal at a time like this- irrational anger, crying spells, fluctuating moods, etc. If your co-worker seems to be seriously disturbed, or symptoms go on for many weeks and they are not in counseling, the manager or EAP counselor may need to get involved.

What to say: Would you like to talk about it? This must be very painful for you. Don't worry about work while you are gone, we will take care of things for you. We are glad to have you back.

What not to say: I understand how you feel. (You may think you do, but to a victim their pain is unique.) What happened? You will feel better if you talk about it. (That may or may not be true, they may not be ready to talk yet.) When this happened to me.... (Even if you had a similar experience the person may need to talk about his/her experience rather than listen to yours.) If they ask about your experience share only what they want to know about it and then listen again.

THE EMERGENCY SERVICE WORKER PROFILE

Selective Obsessive-Compulsive Traits

- ✓ Second-guessing, 20/20 hindsight
- ✓ Ruminating, running over the incident again and again in his/her mind
- ✓ Able to go on auto-pilot or rescue mode (this is adaptive in crisis but destructive in relationships); requires narrow, selective focus
- ✓ Guilt-proneness
- ✓ Strong perfectionist traits
- ✓ Likes things neat and orderly

Need for Control

- ✓ Thought and action preferred to feelings, at least at times; feeling may at times seem “out of control”
- ✓ Hyper-independent; “I can handle it”

Action-Oriented

- ✓ May tend to exist in “human-doing” mode (as opposed to “human-being”)
- ✓ Somewhat impatient (as the vulture says, Patience, my ass, let’s kill something)
- ✓ Like immediate gratification, make their own fun, love gadgets
- ✓ Take care of the crisis now, worry about the consequences later

Risk-Takers

- ✓ Thrill seeking (“rehearsal” for crisis mode), high need for stimulation
- ✓ Easily bored
- ✓ Sometimes described as “John Wayne” or “James Bond” types

Highly-Dedicated

- ✓ Need to be needed
- ✓ Family oriented; has 2 “families”: one at home and another at work, and at times they conflict
- ✓ Rescuers (whether you want to be rescued or not)

Histrionic Style

- ✓ See the world through their own eyes, sometimes exclusively (“my way or the wrong way”), may shut off empathy at times; don’t confuse me with facts”
- ✓ Comfort at the center of attention, e.g. In the public eye
- ✓ Able to tolerate high degrees of external stress

CISM Debriefings, trainings, and other activities may be scheduled by contacting the Utah CISM Team, <http://www.utcism.org>, P.O. Box 142004, Salt Lake City, UT 84114 or at (801) 779-2865.

POST INCIDENT REACTIONS

After exposure to intense, unusual, or abnormal emergency service event (a critical incident), some individuals experience reactions that are out of the ordinary for them. This is not an uncommon experience. The event may create a stress response which can result in a disruption of physical and psychological processes. These reactions are normal. Often these reactions appear immediately after the event, but they may appear hours, weeks, or months later. Some of the most common reactions reported after involvement with a critical incident include:

PHYSICAL	EMOTIONAL
nausea intestinal upset fatigue rapid heart rate chest pain difficulty breathing shock symptoms muscle cramps headaches chills	anxiety grief guilt denial fear depression panic apprehension disturbed thinking
COGNITIVE	BEHAVIORAL
memory problems poor attention nightmares intrusive images hyper-alertness loss of orientation poor problem solving poor decisions sleep disturbance	withdrawal restlessness emotional outbursts increased alcohol consumption avoidance change in speech change in appetite increased startle reflex blaming others

This is not an inclusive list. Some individuals exposed to the same event may not suffer any effects and this is a normal reaction also. While these reactions can be alarming and unsettling, it is important to remember that these are normal reactions and that you are not unique to the experience.

THINGS YOU CAN DO TO HELP YOURSELF WHEN YOU ARE EXPERIENCING EMOTIONAL STRESS

Some practical, common sense suggestions . . . that work

It's Normal

- Remember you are having normal human reactions, just like others under similar stress. *You are not "crazy" or having a nervous breakdown*
- Give yourself permission to feel bad. Like the flu emotional stress has to run its course
- Unwanted thoughts, dreams, flashbacks are normal too. Accept them as part of healing. They should decrease over time, and in most ways they are adaptive and healing.

Stay in touch with others

- Don't isolate yourself
- Talk it out with people. Talk is a very healing medicine
- Allow supportive people to assist you
- Reach out to people who care-family, friends, clergy, counselors

Stay Active

- Maintain a normal, active and productive schedule; modify as necessary
- Physical exercise (within your normal limits) is one of the best ways to reduce stress
- Do things that you enjoy

Help Others (It will help you too)

- Realize that those around you are also under stress
- Assist family members who are experiencing stress, also
- And friends . . . How are they doing? Helping them helps you

Take Care of Yourself

- Exercise regularly (within your limits) to burn away stress chemicals
- Avoid stressful situations for a while
- Have some relaxing times
- Don't abuse alcohol or drugs. This can hinder and delay recovery
- Eat well-balanced, regular meals (even if you don't feel like it)
- Get plenty of rest; remember that sleep disturbance is common, too
- Avoid hazardous activities . . . there is an increase likelihood of accidents
- Delay making major life decisions until your stress level lowers (symptoms decrease significantly)