

Critical Incident Stress

Tragedies, deaths, serious injuries, hostage situations, and threatening situations - these events are known as "Critical Incidents." People who respond to emergencies encounter highly stressful events almost every day. Sometimes an event is so traumatic or overwhelming that emergency responders may experience significant stress reactions.

The Critical Incident Stress Debriefing (CISD) process is specifically designed to prevent or mitigate the development of post-traumatic stress among emergency services professions.

Critical Incident Stress Management (CISM) represents an integrated "system" of interventions which is designed to prevent and/or mitigate the adverse psychological reactions that so often accompany emergency services, public safety, and disaster response functions. CISM interventions are especially directed towards the mitigation of post-traumatic stress reactions.

Recognizing Critical Incident Stress

Critical incidents may produce a wide range of stress symptoms, which may appear immediately at the scene, a few hours later or within days of the incident. Stress symptoms usually occur in four different categories: Cognitive (thinking), Physical (body), Emotional (feelings) and Behavioural (actions). The more symptoms experienced, the more powerful the stress reaction. The longer the symptoms persist, the more potential there is for lasting harm. The following is only a sample of stress symptoms that can show up after a critical incident.

Cognitive poor concentration, memory problems, poor attention span, difficulty making decisions, slowed problem solving, difficulties with calculations	Physical muscle tremors, chest pain, gastro-intestinal distress, difficulty breathing, headaches, elevated blood pressure
Emotional guilt, grief, depression, anxiety/fear, loss of emotional control, feeling lost/overwhelmed	Behavioural excessive silence, sleep disturbances, unusual behaviours, changes in eating habits, withdrawal from contact, changes in work habits



Stress Survival Suggestions:

When emergency personnel experience significant stress from a critical incident, the following steps may help to reduce the stress until the incident is over or until a trained CISM team is located.

- Limit exposure to sights, sounds and odours
- Provide an immediate rest break of at least 15 minutes
- Have a friend stay with the distressed person
- Provide fluids, non-alcoholic and non-caffeinated
- Provide foods low in salt, sugar and fat
- Allow the person to talk about the experience
- Do not rush the person to return to work
- Protect the person from bystanders and the media
- Reassure the person that the stress experience is normal; most people recover very well from stress
- Show appreciation for the person's work
- Do nothing to embarrass the person
- Help the person make decisions

Physical*	Cognitive	Emotional	Behavioural
chills	confusion	fear	withdrawal
thirst	nightmares	guilt	antisocial acts
fatigue	uncertainty	grief	inability to rest
nausea	hyper-vigilance	panic	intensified pacing
fainting	suspiciousness	denial	erratic movements
twitches	intrusive images	anxiety	change in social activity
vomiting	blaming someone	agitation	change in speech
			patterns
dizziness	poor problem solving	irritability	loss or increase of
			appetite
weakness	poor abstract thinking	depression	hyper-alert to
			environment

SIGNS AND SYMPTOMS OF CRITICAL INCIDENT STRESS



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chest pain	poor attention/decisions	intense anger	increased alcohol consumption
headaches	Poor concentration/memory disorientation of time, place or person	apprehension	change in usual communications
elevated BP	difficulty identifying objects or people, heightened or lowered alertness	emotional shock	
rapid heart rate	increased or decreased awareness of surroundings	emotional outbursts	
muscle tremors		feeling overwhelmed	
grinding of teeth		loss of emotional control	
shock symptoms		inappropriate emotional response	
visual difficulties			
profuse sweating			
difficulty breathing			

*Any of these symptoms may indicate the need for medical evaluation. When in doubt, contact a physician.

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THINGS TO TRY:

FOR YOURSELF:

- WITHIN THE FIRST 24 48 HOURS periods of appropriate physical exercise, alternated with relaxation will alleviate some of the physical reactions.
- Structure your time keep busy.
- You're normal and having normal reactions don't label yourself crazy.



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- Talk to people talk is the most healing medicine.
- Be aware of numbing the pain with overuse of drugs or alcohol, you don't need to complicate this with a substance abuse problem.
- Reach out people do care.
- Maintain as normal a schedule as possible.
- Spend time with others.
- Help your co-workers as much as possible by sharing feelings and checking out how they are doing.
- Give yourself permission to feel rotten and share your feelings with others.
- Keep a journal, write your way through those sleepless hours.
- Do things that feel good to you.
- Realize those around you are under stress.
- Don't make any big life changes.
- Do make as many daily decisions as possible which will give you a feeling of control over your life, i.e., if someone asks you what you want to eat answer them even
- if you're not sure.
- Get plenty of rest.
- Reoccurring thoughts, dreams or flashbacks are normal don't try to fight them they'll decrease over time and become less painful.
- Eat well-balanced and regular meals (even if you don't feel like it).

FOR FAMILY MEMBERS & FRIENDS

- Listen carefully.
- Spend time with the traumatized person.
- Offer your assistance and a listening ear if they have not asked for help.
- Reassure them that they are safe.
- Help them with everyday tasks like cleaning, cooking, caring for the family, minding children.
- Give them some private time.
- Don't take their anger or other feelings personally.
- Don't tell them that they are "lucky it wasn't worse" traumatized people are not consoled by those statements. Instead, tell them that you are sorry such an event has occurred and you want to understand and assist them.