

Northern Illinois Critical Incident Stress Management Team

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Critical Incident / Traumatic Events Information

If you are reviewing this, **you have probably experienced a traumatic event** (an injury, loss of a loved one or coworker, a serious threat, or an unusually overwhelming emotional experience). Even though the event may be completed, you may now be experiencing or may experience later some strong emotional, cognitive, behavioral, spiritual or physical reactions. It is very common, in fact - quite normal, for people to experience some form of emotional after shocks when they have passed through a horrible event.

Sometimes the emotional after shocks (or Critical Incident Stress - CIS) appear immediately after the traumatic event. Other times they may appear a few hours or even a few days later. In some cases, weeks or months may pass before the stress reactions appear. Individual people respond in different ways and in different time frames.

The signs and symptoms of a stress reaction may last a few days, a few weeks or a few months. On occasion a longer duration may unfold itself depending on the severity of the traumatic event (and any pre-existent or cumulative traumatic history). With understanding and support of loved ones the stress reactions usually pass more quickly. Occasionally the traumatic event is so painful that professional assistance from an experienced counselor may be necessary. This does *not* imply craziness or weakness. It simply indicates that the particular traumatic event(s) was just too powerful for one person to manage or process all of the issues by themselves.

Our NICISM Team would like to share with you some of the common signs and symptoms of stress *reactions*. A variety of some of these issues may become evident in an individual or within a specific group of individuals who have responded together through an incident. This is an incomplete list but it may help in *focusing some of your own issues* as we educate ourselves together. We all learn from each other as we support each other.

<u>Physical</u>	Thinking/Cognitive	<u>Emotional</u>	<u>Behavioral</u>	<u>Spiritual</u>
Nausea	Slower thought process	Anxiety	Changes in activity	Questioning God
Upset stomach	Difficulty making decisions	Fear	Speech pattern changes	Doubting your faith
Tremors (hands)	Difficulty in problem solving	Guilt	Withdraw into oneself	Resist fellowship
Profuse sweats	Confusion	Grief	Emotional outbursts	Stop prayer activity
Chills	Disorientation (place/time)	Depression	Suspiciousness	Doubting God
Diarrhea	Difficulty calculating	Sadness	Loss/Increase appetite	Ceasing worship
Dizziness	Difficulty concentrating	Feeling lost	Alcohol consumption	Rejecting your faith
Chest tightness	Memory problem (short/long)	Feeling abandoned	Inability to rest or relax	Spiritually numb
Rapid heart	Difficult to name familiar item	Feeling isolated	Antisocial actions	Where was God?
Fast breathing	Seeing an event over& over	Worry about others	Nonspecific body pains	Leaving the church
Headaches	Distressing dreams	Wanting to hide	Hyper-alert to settings	Blaming of God
Sleep problems	Poor attention span (lower)	Limited contacts	Startle reflex intensified	Faulting the creator
Fatigue	Blaming	Intense anger	Pacing	Spiritual shut-down
Grinding teeth	Hyper-vigilant	Irritability	Erratic movements	Avoiding devotions
Visual difficulty	Increase/decrease alertness	Numb all over	Changes in sex life	Anxiety re: "beliefs"
Thirst	Offense/Defensive self review	Denial/Uncertainty	Harsh with family	How can God let?
Twitching	Overwhelmed normal routine	Apprehension	Relational difficulties	Over zealousness
Exhaustion	Drawing nothing but blanks	Devoid of feelings	Regressive activities	Issues: faith& hope

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What Can Help

Some of the following suggestions may help alleviate the pain associated with a traumatic event. These are not complete listings but many of these helpful hints may be beneficial for you to try or at least consider. Symptoms described below that remain severe or that last longer than six to eight weeks may suggest and indicate that the traumatized person may need the assistance and support of professional counseling and or pastoral care.

For Yourself:

- Try to rest a bit more
- Contact friends, reach out, spend time with others
- Have someone stay with you for at least a few hours
- Share with a trusted friend
- Understand that recurring thoughts, dreams or flashbacks are normal; Don't try to fight them they'll decrease over time and will become less painful
- Maintain as normal a schedule as possible
- Eat well balanced and regular meals (even when you don't feel like it)
- Try to keep a reasonable level of activity
- Try to experience the healing salve of laughter
- Seek trusted fellowship first the rest will follow!
- Re-establish a normal schedule as soon as possible
- Express you feelings as they arise honestly!
- Talk to people who love you
- Find a good counselor if the feelings become pro-longed or too intense
- Within the first 24-48 hours, periods of strenuous exercise, alternated with relaxation will alleviate some of the physical
- reactions
- Structure your time keep busy within reason
- You're normal and having normal reactions to overwhelming events don't label yourself "crazy"
- Talk to people. Talk can be a most healing medicine
- Be aware of numbing the pain with overuse of any drugs or alcohol
- Help your coworkers as much as possible by sharing feelings and checking how they themselves are doing
- Don't be afraid of silence. Companionship can be experienced as a form of support even when people say nothing.
- Give yourself permission to feel rotten and share *your* feelings with others. Often times it just takes one person to open up in front of others before they too share many similar feelings. Take a chance.
- Consider keeping a journal. Write your way into and 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 or purchases
- Do make as many daily decisions as possible. This will give you a feeling of control over your own life and help you move forward again



For Family Members & Friends

- Listen carefully
- Offer your assistance and a listening ear even if they have not asked for help
- Reassure them that they are safe
- Help them with everyday tasks like cleaning, caring for the family or preparing a meal
- 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 a lot worse".... traumatized people are not really consoled by those statements. Instead, share with them thatyou are sorry such an event has occurred and you want to understand and assist them
- Create an environment that feels safe to share in if the person chooses to talk about aspects of an incident that has happened; being careful not to force an issue.
- Keep "curious" questions for your own self satisfaction in the appropriate place. A later time might be more beneficial to everyone involved
- Don't try to analyze the behaviors that may become apparent.
- Acceptance and support are two key elements of providing comfort.
- Be sensitive to the fact that pre-established routines sometimes help reorient the individual to prior functioning levels.
- Don't be in to much of a hurry to make major schedule changes on someone else's behalf
- Appreciate that another person's physical presence, even though nothing is said, can be comforting
- Don't be afraid of silence. Companionship can be experienced as a form of support when people are silent together
- A sensitive touch, a caring embrace or someone to sit quietly beside may also be supportive as individuals sift through some of their own issues
- Understand that each person's trauma is individual.
- People experience trauma and cope with it's aftermath in different ways. Respect this.
- Encourage spontaneity
- Respect alternative perspectives and perhaps a new way of doing things that may serve to empower those most impacted by a traumatic event
- Protect from intrusions, mass media and sensationalists

