

Risk Management: The **Traumatic** Aftermath

Dr. Will Marling



Credit: Kennedy News and Media

The **Traumatic** Aftermath

What are your processes and protocols for addressing the **traumatic** impact on **clients, staff** and **responders (including YOU)** in the aftermath of a critical incident?

Caveats

- Some of this discussion may provoke you.
- I might use 'morgue humor.'
- If you disagree, please say it. Don't wait for the evaluation (though you can say it there, too).

Trauma

“I did live in Washington for a time and learned that a lack of knowledge about a subject is no impediment to talking about it.”

Neil Armstrong

“Experiencing trauma does not make you an expert in supporting it, just in experiencing it.”

Will Marling

Goal

This training is designed to give participants tools for effective engagement of traumatized people.

Victim Relations

A deliberate and equipped engagement process that builds mutually beneficial relationships amidst organizations (and individuals) with those who may or have experienced trauma, loss and/or harm.

Objectives of this workshop

ACTION ITEMS

Reinforce that—

Trust matters:
Show benevolence and competence

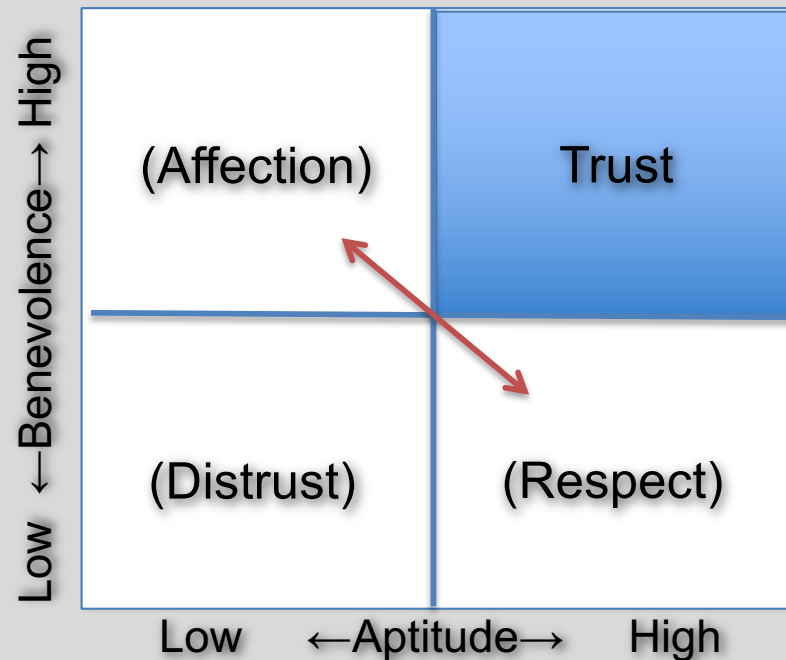
Awareness is required:
Learn two diagnostic tools

Protocol is expected:
Use three mitigation techniques

Self Care is essential:
Implement three behaviors

Trust Matters: Trust, Respect and Affection

**The extent to which
I believe you care
(Benevolence)**



**The extent to which I believe you
are capable (Competence)**

Awareness is Required

Something is traumatic because it is...

Unexpected, out of control

Beyond one's capacity to respond

Could not be prevented

Awareness is Required

- Trauma for victims is commonly related to **loss** and perception of **potential loss** (e.g., near miss)
- Timely response to victims recognizes **cohesion** to an incident and/or **cohesion** to a loss
- Effective processes for victims **affirm** control *and* cohesion (where possible)

Awareness is Required

Two diagnostic tools:

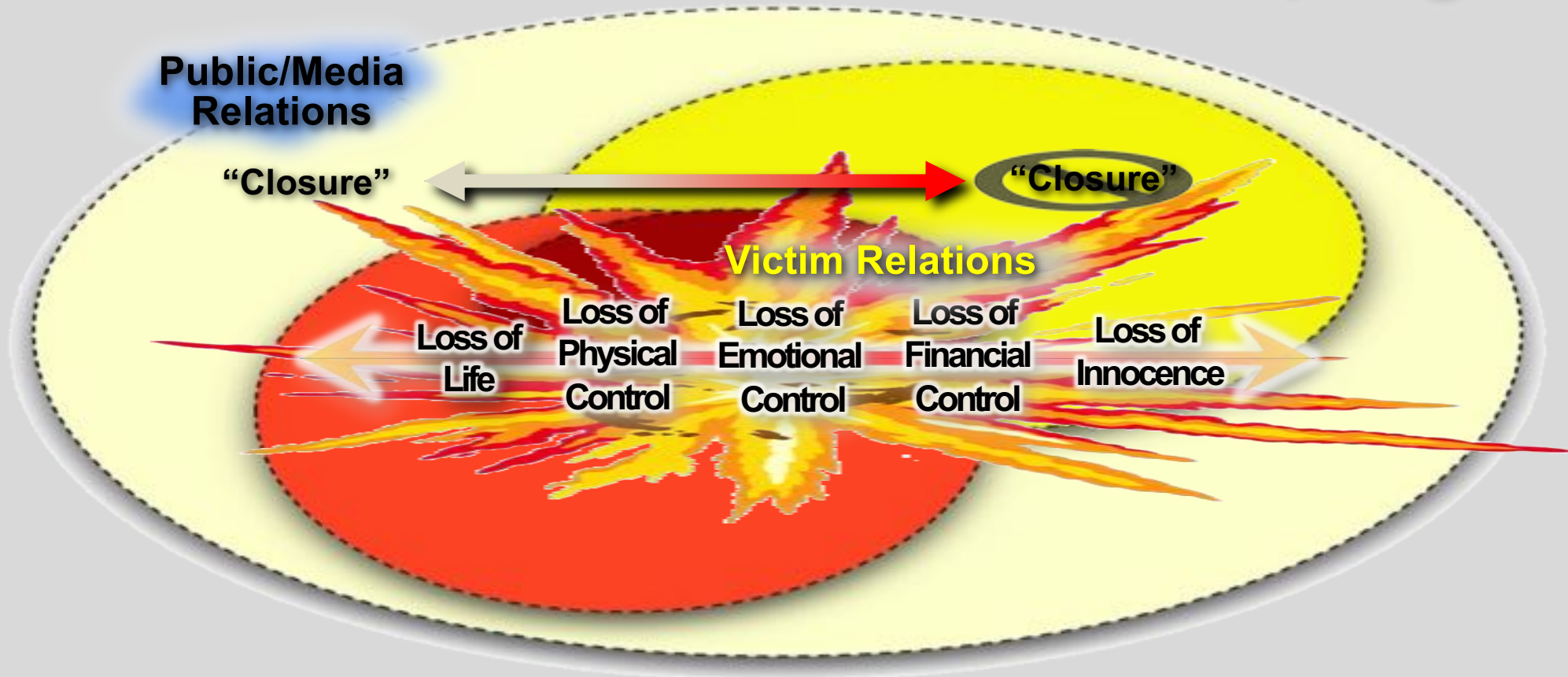
Control and Cohesion

Awareness: Control [dis]Continuity

Loss of Financial Control Loss of Physical Control Loss of Life Loss of Emotional Control Loss of Innocence

Key: We cannot fully discern for others the impact of their particular loss(es).

Awareness: Cohesion Grouping



Key: ALL responders are in at least one Cohesion Group.

Protocol is Expected

Three mitigation techniques:

Promote **Safety** and **Security***

Facilitate **Ventilation** and **Validation***

Provide **Prediction** and **Preparation***

**Basic Community Crisis Response Team Training, National Organization for Victim Assistance, 4th Edition, 2009.*

Five Essential Elements of Immediate and Mid-Term Mass Trauma Intervention: Empirical Evidence

Stevan E. Hobfoll, Patricia Watson, Carl C. Bell, Richard A. Bryant, Melissa J. Brymer, Matthew J. Friedman, Merle Friedman, Berthold P.R. Gersons, Joop T.V.M de Jong, Christopher M. Layne, Shira Maguen, Yuval Neria, Ann E. Norwood, Robert S. Pynoos, Dori Reissman, Josef I. Ruzek, Arieh Y. Shalev, Zahava Solomon, Alan M. Steinberg, and Robert J. Ursano

Five Essential Elements: 1) a sense of safety, 2) calming, 3) a sense of self- and community efficacy, 4) connectedness, and 5) hope.

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Examples of what NOT to say/do!

- 1) Sense of safety: “At least you’re not dead.”
- 2) Calming: “Just calm down!”
- 3) Self- and community efficacy: “Just think about the less fortunate.”
- 4) Connectedness: “You’ve got a lot of friends.”
- 5) Hope: “Things will get better.”

Promote Safety and Security

Using cohesion groupings (where possible)—

Discuss/Provide Safety **needs**: Basics

Recognize Security **perceptions**: We tend to believe what we perceive.

Facilitate Ventilation & Validation

Using cohesion groupings (where possible)—

Promote permission to express **reactions** and **concerns**—appropriate facts (NOT a ‘debrief’)

*“What were/are your **reactions** to this situation?”*

Never: *“How do you feel?” or “How are you feeling?”*

Acknowledge reactions as common-nearly all are!

*“This is a **common** reaction to an uncommon situation (i.e., it is new to the person).”*

Provide Prediction & Preparation

Using cohesion groupings (where possible)—

A common question after a traumatic incident:

What will happen next?

Inquire about the immediate **future**

Ask: “What kinds of things do you think will be helpful in the future?”

Educate on **resources** (do you have a list?)



Self Care is Essential

What is Self Care?

- Monitoring your exposure to **trauma**
- Taking action to mitigate impact of exposure

How many **trauma** **R**adiation **A**bsorbed **D**oses
can you absorb, Risk Manager?



Essential Self Care Behaviors



Insulating Behaviors-keep out

Purifying Behaviors-take out!

Endurance Behaviors-stay out!



ENDURANCE



Self Care: **Insulating** Behaviors

Immediately *prior* to exposure

- Incremental goals* (e.g., “I’ll follow my checklist.”)
- Mental rehearsal* (e.g., “I’ve prepared for this.”)
- Positive Self-talk* (e.g., “I **CAN** do this.”)
- Controlled breathing* (e.g., “Take deep breathes.”)

*Seal Team candidate research

Self Care: **Purifying** Behaviors

Immediately *following* exposure

- Safety: Order your little kingdom
- Security: Comforting sights, sounds & smells
- Ventilation: Acknowledge challenges
- Validation: Review the good work
- Prediction: Engage humor/express emotion
- Preparation: Transition to off-duty

Self Care: **Endurance** Behaviors

- Safety: Physical and emotional rest AND activity
- Security: Limit exposures to essential trauma only
- Ventilation: Humor, laughter and emotional expression
- Validation: Relational, spiritual & emotional connections
- Prediction: Training and education
- Preparation: Training, education & evaluation

Where's the fit?

What's your crisis management *aftermath* plan?

Trust: Benevolence and competence?

Awareness: Diagnostic tools?

Protocol: Competent mitigation techniques?

Self Care: Healthy behaviors?



Thank you!

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