

#### Promoting wellness and recovery

Mike DeWine, Governor Lori Criss, Director

# Crisis Awareness January 23, 2020 Ashland County Ohio Sheriff's Annex

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#### Assume Best Intent...

When we talk about stress and trauma, we can be reminded of events from our own lives that may cause discomfort, feelings of anxiety or other emotions.

Please assume that if there is anything you see or hear that causes you concern or uneasiness, it was not meant to and the only intent is to share information in an open and honest fashion to save lives.

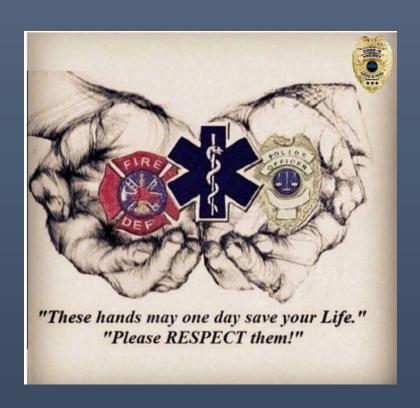


# Crisis & Addiction Awareness 2020

There is no one who wouldn't help another person who was in danger. We will rush to face the threat, but when it comes to the mental well-being of our personnel, we would rather do almost anything else than ask what they need.

Sometimes, the emotional aftershocks (or stress reactions) appear immediately after a traumatic or critical incident. However, sometimes they may take hours or days to appear, or weeks and months.



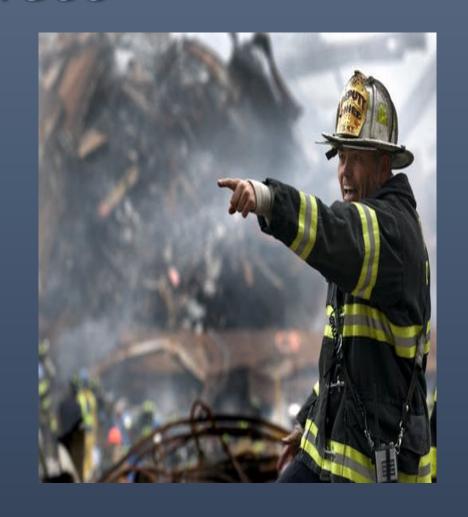


Secondary or vicarious
traumatization is "generally
defined as experiencing similar
symptoms to trauma victims as a
result of indirect traumatic
exposure via close contact with
the survivors."

Source: Brooks et al., 2015

SAMHSA, The Dialog, Volume 14, Issue 1, 2018

Repeated exposure to traumatic events can lead to first responders experiencing symptoms similar to those of the actually involved in the initial incident.





Signs and symptoms may last a few days but can last weeks and months.

They are as unique as the person experiencing them.

Two people, involved in the same incident, <u>WILL</u> react differently.

Sometimes the reaction is so severe or lifealtering, it takes an intervention from a trained counselor or mental health professional.

Sometimes it may become unhealthy coping mechanisms or behaviors.

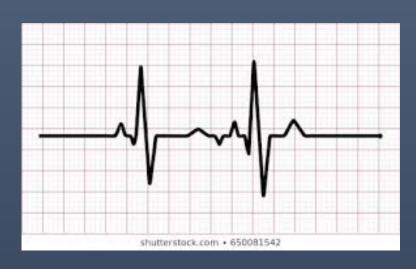
However, many times, having someone simply ask how they are doing can assist a person more than we know.



Signs and Signals of a stress reaction:

#### **Physical**

- Fatigue/Exhaustion
- Nausea/Vomiting
- Fainting
- Sleep difficulties
- Elevated blood pressure/heart rate



- Grinding of teeth
- Weakness or dizziness
- Profuse sweating or chills

If the person is experiencing chest pains or difficulty breathing, get medical attention <u>IMMEDIATELY</u>.

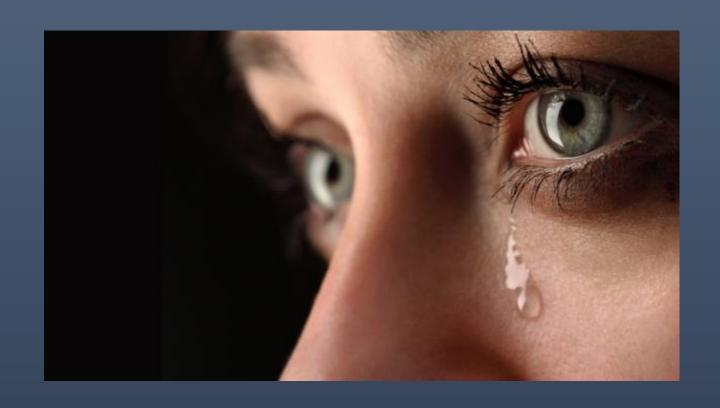
#### **Cognitive**

- Confusion
- Poor attention span
- Inability to make decisions
- Heightened or lowered alertness
- Poor concentration/memory issues
- Flashbacks
- Disturbed thinking/nightmares/intrusive images



#### **Emotional**

- Anxiety
- Guilt
- Grief
- Denial
- Fear
- Feeling of panic
- Uncertainty



- Loss of emotional control
- Depression
- Inappropriate emotional response
- Agitation
- Apprehension
- Feeling overwhelmed
- Intense anger
- Hypersensitivity



#### Behavioral



- Change in societal perception
- Loss or increase in appetite
- Withdrawal
- Emotional outbursts
- Suspiciousness
- Change in usual communication skills

- Inability to rest
- Startle reflex
- Hyper alert to environment
- Change in sexual behavior
- Antisocial acts
- Alcohol consumption



#### **Spiritual**



- Anger at God or higher power
- Loss of faith
- Over-reliance on faith
- Questioning one's ability to forgive or be forgiven
- Change in sense of self, own abilities

The American
Psychiatric Society
defines PTSD as:

Exposure to **actual** or **threatened** death, serious injury or sexual violation

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Posttraumatic Star Veterans Subject Nightmares Star Avoidance Subject Avoidance Subject Subjec
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Exposure must result from one or more of the following scenarios, in which the individual:

- Directly experiences the traumatic event
- Witnesses the traumatic event in person
- Learns that the traumatic event occurred to a close family member or close friend (with actual or threatened death being violent or accidental)

Experiences first-hand repeated or extreme exposure to aversive details of the traumatic event (not through media, pictures, television or movies unless work-related)



The disturbance, regardless of its trigger, causes clinically significant distress or impairment in the individual's social interactions, capacity to work or other important areas of functioning. It is not the physical result of another medical condition, medication, drugs or alcohol

- This is a <u>specific</u> diagnosis, by a licensed clinician. This cannot be self-diagnosed or diagnosed by anyone other than a mental health professional.
- You can suffer from the effects of stress or a traumatic incident and <u>NOT</u> have PTSD.



# Helpful Coping Strategies

- Spend time with others
- Helpful for co-workers who were involved in the same incident, to share experience
- Let yourself have bad days or hours It's OK
- Journal if it helps get things out
- Do things you enjoy. It's not only OK to be happy, smile and laugh, it's imperative!!!
- You are not the only one feeling stress from the event; family, friends and co-workers



# How can family and friends help?

- Listen best thing they can do
- Spend time with the person. They don't REALLY want to be alone all of the time
- Reassure them that they are safe
- Help with tasks around the house but don't take over
- Give them some personal time but be available if they want company
- Their anger, fear, and frustration may not be directed at you, personally

# Negative Coping Strategies

- What is the most common negative coping mechanism?
  - Alcohol use WHY?
  - Drug use WHY?
- What did we hear in the past after an incident?
  - "Suck it up!" and/or "have a drink"
  - "This is the job..."
  - "We don't talk about it..."



# Helpful Coping Strategies

- Don't make major life decisions (i.e. relationships, buy a car/bike/boat, sell or buy a house, etc.)
- Do make smaller life decisions (i.e. what to eat, what to wear, when to go to work, etc.)
- Rest!!!
- Reoccurring thoughts, dreams or flashbacks are a normal reaction.
   Don't fight it, let the mind process the event
- Do the best you can to eat a healthy and well balanced diet

# Helpful Coping Strategies

- Exercise (In moderation, based on previous levels of exercise)
- Structure your "free" time
- Accept the event has changed your "old normal" and know that there will be a "new normal," and that you have survived "new normal" your whole life...
- Talk, talk, talk
- Avoid self-medication with drugs or alcohol
- Let people help you



# Contact Information

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