

Colexio Oficial
de Psicoloxía
de Galicia

SELF-CARE GUIDE FOR FIRST RESPONDERS IN CRITICAL SITUATIONS

If you have recently been affected
by a critical incident,
this guide can help you understand
the possible reactions that you may have afterwards.

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Colexio Oficial de Psicoloxía de Galicia

MOST COMMON
REACTIONS

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INFORMATION

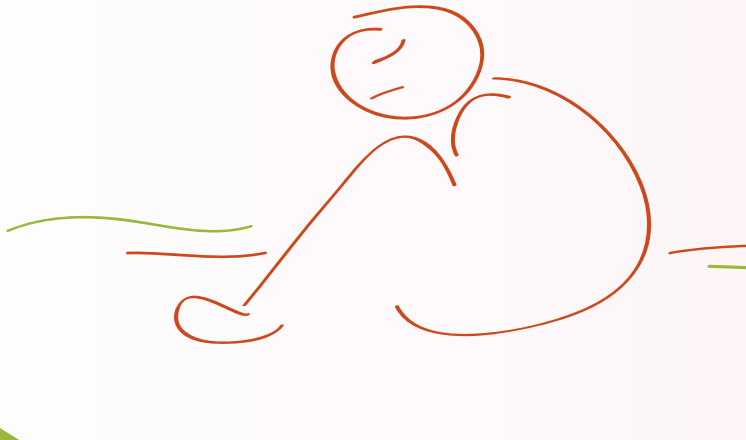
CRITICAL SITUATION

A **critical incident** is a potentially traumatic event: a disaster, an accident with many casualties, an attack or any unexpected situation which exposes us to extreme stress.

Although we, emergency first responders, usually work well in this kind of situations, we are also vulnerable to what we experience during our intervention.

Intervening in a critical incident may affect us emotionally and psychologically.

It is only normal that our intervention in this kind of unusual situations makes us have different kinds of reactions.



BEHAVIOURS

- An increase or decrease in activity.
- Feeling more sensitive, feeling like crying...
- Sleeping too little or too much, having nightmares or not having a restful sleep.
- Changes in your eating habits.
- Irresponsible behaviours: driving very fast, taking too much medicine, too many drugs or drinking too much alcohol.
- Personal, social and/or professional relationships conflict or deterioration.
- Trying to avoid situations or people that remind you of what happened.
- An overprotective attitude.

OTHER REACTIONS

- Attention, concentration or memory problems.
- Feeling disorientated.
- Recurrent thoughts related to the accident.
- Changes in the way you see the world, the others and yourself.
- Problems making decisions.

FEELINGS

- Sadness, anger, irritability, feeling guilty, embarrassment, frustration, anxiety, fear, apathy, lack of self-confidence...
- Problems feeling.
- Feeling invulnerable.
- Being constantly worried about what can happen.
- Feeling lost, desolate.

PHYSICAL SENSATIONS

- Headaches, nausea and vomiting.
- Stomach upset.
- Tremors, breathing problems, rapid heartbeat, tachycardia...
- Chills and/or sweating.
- Fatigue and/or weakness: frequent infections and diseases, hair loss.
- Muscle tension.
- Menstrual cycle changes.

INDIVIDUAL RECOMMENDATIONS

Before the critical incident:

- Take part in different training courses to acquire skills so you can manage in these situations and know about:
 - › the procedure to follow at the different emergency stages,
 - › the possible effects of a critical incident,
 - › the reactions you may have during the intervention.
- Know what your role and duties are.
- Evaluate if you are living a stressful moment (if you have lost someone or something, if you are having a child...).
- Take constant and general care of your health.
- Keep your social and professional support network.

During the critical incident

- Focus on your job and hold your attention on it: “My job is...”, “I’m responsible for...”, “The most important thing now is...”
- Be aware of your reactions and evaluate if you can continue working properly or if you should ask your colleagues, superiors, etc. for help.

After the critical incident

- Allow yourself to feel, express yourself and share your emotions.
- Ask for help if you need it.
- Let other people be with you.
- Get back to your daily hygiene, sleep and eating routines: get enough sleep, try to eat something at all meals even though you are not hungry...
- Keep yourself active, set small goals, plan activities in order of importance, divide your time, have a life as organised as possible, exercise moderately, practise relaxation techniques...
- Deal with things that you can really solve.
- Avoid self-medication, taking drugs or drinking too much alcohol. If you are under regular medical treatment, please contact your health centre.
- Give yourself time to reflect before making any important decision in order to see things from a different point of view.



GROUP RECOMMENDATIONS

Before the incident

- Gather as much information as possible about the incident so as to have a general idea about what you may find when you get there (who, what, how, where, what means...).

During the incident

- Respect the intervention shifts. Organise short shifts for highly stressful jobs.
- Meet all the physiological needs and provide rest breaks.
- Rely on your colleagues.
- If first responders seem to be emotionally upset (they experience anxiety, discomfort...), it is advisable to go with them somewhere where there is no critical stimulation (visual, olfactory, hearing...) and help them recover before getting back to work.
- Reinforce first responders' effort during their work, especially in those more emotionally painful tasks.



After the incident (emotional release)

Once the intervention finishes, it is advisable for each first response team to look as soon as possible for the appropriate space to have a short group meeting where information and support is given and where members can talk about their feelings and experiences in order to favour emotional release.

The aim of this meeting is to talk about what happened and what they lived, give support to your colleagues, normalise all the reactions, stimulate communication and foster recovery.

This is also a space to identify those who may need additional help.



RISK FACTORS

There are some factors which can increase the chances of experiencing any of the abovementioned reactions. These can be personal, situational, organisational...

PERSONAL FACTORS

- A moment in life (the loss of someone or something, a newborn, job loss, a divorce, a chronic disease...) which may interfere with the intervention.
- Having a history of mental health illnesses or any psychological malfunction when the incident occurs.
- Emotional instability, low self-esteem, low assertiveness.
- Lack of mechanisms for coping with stress. Low frustration tolerance.
- Lack of self-confidence, lack of experience.
- Lack of social support: friends, family, colleagues...
- Poor physical condition. Very physically demanding efforts.
- Cumulative effects from previous critical incidents. You have not got over other critical incidents.
- Too much responsibility. Perfectionism.
- Having unrealistic expectations at the interventions: idealising your assistance, minimising the results by feeling more helpless...
- Being injured during the intervention and, therefore, taken away from the site a situation which can make you feel frustrated and guilty.
- Being out for strong sensations, immediate reward and risky activities.

INCIDENT RELATED FACTORS

- Lack of information about the incident.
- The kind of incident (technology incidents are more stressful than natural ones).
- The time of the day (responses are usually slower and more confused at night).
- The length, intensity and magnitude of the disaster.
- A high number of victims. The state of the victims.
- Finding dead children. Finding people you know among the victims.
- Identifying yourself with a victim (age, nationality...).
- A first responder fellow dies or is seriously injured.
- Being part of the first teams arriving at the site of the disaster.
- An increase in emotional stress due to the presence of the media or onlookers at the scene.

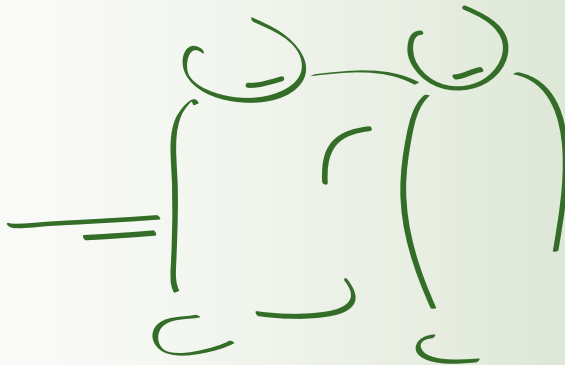
ORGANISATIONAL FACTORS

- Failing to inform about the incident.
- Lack of the appropriate equipment.
- Occupational stress: the need to perform many tasks properly and fast.
- Having to do something for which you have not been trained.
- A job requiring a great physical and psychological effort for a long time and in bad conditions.
- Job interference: when teams from different institutions work together, or when there is rivalry and all try to impose their style or procedures or get the media attention.
- Task ambiguity: confused orders, lack of leadership.
- Labour disputes.
- Inadequate reward: when society does not acknowledge your work properly.
- When your superiors do not appreciate your work.

REMEMBER

After going through emotionally painful situations, we must bear in mind that:

- Our reactions are normal, what is not normal is the unusual and disproportionate situation which we have just lived.
- Unexpected events of great magnitude with serious consequences can affect even the most trained people. We are human.
- In most cases, these reactions are usually lower in a few days and we get back to our normal activity.



Allow yourself to express your emotions and feel upset for what you have just lived

WHEN SHOULD YOU ASK FOR HELP?

If after a reasonable time (4-8 weeks) the intensity of your reactions is not lower, it has increased or it makes it very difficult for you to carry on with your social or professional life, or any other important part of your life, you should seriously consider the possibility of asking for both psychological and medical professional help.

USEFUL INFORMATION

YOU CAN CONTACT THE GIPCE CALLING:



WEB SITES:

www.copgalicia.es
www.cuadernosdecrisis.com
www.psicosocial.net
www.psicosocialyemergencias.com
www.proteccioncivil.org
www.cruzroja.es

READING LIST:

Parada Torres, E.: *Intervención psicológica inmediata con intervinientes. El psicólogo, herramienta esencial y preventiva en la intervención en emergencias*, www.infocop.es

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D. L.: C 1280-2015

R. X. P. I.: 03/2015/10

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