



6th Annual CFDLS – Session 3

APPENDIX

D&I Crisis Response:
Picking Up the Pieces (Being Pro-Active)

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May 2, 2017



2017 CENTRAL FLORIDA
DIVERSITY LEARNING SERIES

IN THE WAKE OF TRAUMA: TIPS FOR RECOVERY

Traumatic stress takes a toll on mental and physical health. Making time to rest and relax will help bring your mind and body back into balance. As you go through the process of recovery it can be reassuring to know your feelings, thoughts and experiences are normal responses to an abnormal event. If after several days you find you are having trouble functioning and the activities of daily life are overwhelming, don't hesitate to seek help.

Students may call the ERAU Counseling Center at 386-226-6035. Faculty and staff may contact the EAP at 1-800-272-7252.

- // Whether or not you were directly affected by the traumatic event, it is normal to feel anxious about your own safety, to picture the event in your own mind and to wonder how you would react in a similar emergency.
- // People react to trauma in different ways. Some may become irritable or depressed, others lose sleep or have nightmares and others may deny their feelings or simply "blank out" the event. There is no "right" or "wrong" way to feel after experiencing trauma.
- // While it may feel better to pretend the event did not happen, in the long run it is best to be honest about your feelings and to allow yourself to acknowledge the sense of loss and uncertainty.
- // It is important to realize that while things may seem off balance for a while, your life will return to normal.
- // It is important to talk with someone about your sorrow, anger and other emotions, even though it may be difficult to get started.
- // You may feel most comfortable talking about your feelings with friends, family, a co-worker, professor, counselor or a pastor. The important thing is to share your feelings with someone you trust. If you don't have someone to confide in, call 1-800-272-TALK for someone who will listen.
- // It is common to be angry at people who have caused great pain. This desire comes from our outrage for the innocent victims. It is important to understand that it is futile to respond with more violence. Nothing good is accomplished by hateful language or actions.
- // While you will remember the event, the painful feelings will decrease over time and you will come to understand that, in learning to cope with tragedy, you have gained strength, adaptability and self-reliance.



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For more information, please visit erau.edu/db/counseling
or call 386-226-6035, Monday - Friday, 8am - 5pm.



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IN THE WAKE OF TRAUMA: COMMON REACTIONS

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PHYSICAL REACTIONS

- // Shock
- // Fatigue
- // Nausea
- // Sleep difficulties
- // Dizziness
- // Headaches
- // Loss of appetite

COGNITIVE REACTIONS

- // Confusion
- // Hypervigilance
- // Memory problems
- // Lack of concentration
- // Feeling disoriented
- // Poor decision-making
- // Poor problem-solving
- // Intrusive thoughts and images

EMOTIONAL REACTIONS

- // Fear
- // Guilt
- // Grief
- // Panic
- // Anger
- // Denial
- // Anxiety
- // Sadness
- // Helplessness
- // Irritability
- // Depression
- // Apprehension

BEHAVIORAL REACTIONS

- // Agitation, restlessness
- // Emotional outbursts
- // Lack of interest in everyday activities
- // Avoidance of others
- // Excessive busyness
- // Impaired work and/or academic performance
- // Decreased personal hygiene
- // Substance abuse

TIPS FOR COPING

- // Talk about it. Talking with others will help you realize that you are not alone in your feelings.
- // Limit media exposure. Take breaks from watching and/or reading news coverage of the event.
- // Avoid excess. Avoid using alcohol, drugs, caffeine and tobacco products as a way of dealing with stress.
- // Resume routines. Getting back to your daily routines can be a good method for regaining a sense of control.
- // Take care of yourself. Taking good physical care of yourself with rest, exercise and healthy eating will help your body to deal with stress. Do activities that you enjoy and find relaxing.
- // Get involved. Engaging in positive activities like group discussions and candlelight vigils can help promote comfort and healing.



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IN THE WAKE OF TRAUMA: TIPS FOR HELPING FRIENDS AND FAMILY

After a traumatic event, it is natural to want to help someone you love and care about feel better. The period that follows trauma is not an easy time. There is nothing you can say or do to make the person's pain and distress disappear. Healing comes with time, rest and support. This tip sheet provides some suggestions on how you can be helpful.

DO:

- // **Acknowledge their distress.** Use statements like, *"This is such a difficult time for you"* or *"Sometimes it's hard to see beyond this."*
- // **Ask leading questions.** Ask questions like, *"How can I be helpful?"*, *"How are you doing today?"* or *"What would be helpful to talk about?"*
- // **Show you understand.** Paraphrase what you hear. Try saying something like, *"It sounds like..."*, *"You seem really..."*, *"It's really hard when..."*
- // **Offer practical support.** If possible, go the store for them, help them with household tasks, offer to care for pets or send a care package of useful items.
- // **Make sure they have other support.** If you aren't available to talk, make sure there is someone else they can connect with.
- // **Try to put yourself in their shoes.** Don't interrupt them, don't offer examples from your life and don't talk about yourself.
- // **Encourage them to delay making any major life decisions.** *Help them brainstorm alternatives that meet immediate needs.*
- // **Suggest they take one thing at a time.** Remind them that this is not the time to multi-task. Encourage them to do one thing at a time.

DON'T:

- // **Don't take it personally.** They may be crabby, impatient and irritable. These reactions are common after a trauma.
- // **Don't use general phrases or platitudes.** Don't say, *"Look on the bright side,"* or *"There's always a silver lining."*
- // **Don't insist they immediately seek professional help.** Not everyone who experiences a trauma needs professional help. But if needed, it will be more effective when they choose it.
- // **Don't tell them how they should feel.** Everyone's response is different.
- // **Don't offer simple reassurances.** Avoid saying, *"I know how you feel,"* or *"You'll be okay,"* or *"It will be fine soon."*
- // **Don't be impatient with them.** It can take months or even longer to recover from a traumatic event. Don't tell them to *"get over it."*
- // **Don't judge them.** Being accepting helps put things in context. Just be there for them.



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Defusing Script

INTRODUCTION

- Thank you for taking time to participate...
- The aim of this session is to lessen the effect of detrimental stress stemming from this event. Our desire is to have all of you return to pre-incident functionability.
- We would encourage all of those people involved in the event to contribute to the discussion, though it is not mandatory. You may provide a “piece” of the puzzle that someone has and that may help them. In turn, you may have a question about the event that someone may provide clarity about.
- Studies show that when a person has been through a critical incident, they tend to have a better post-incident return to normalcy when allowed to talk and discuss the event in this structured format. Many times these sessions prevent a person from having to seek further mental health support.
- Please keep these few *GROUND RULES* in mind: Anything shared should be considered confidential—we don't share what was said outside this circle of participants (CISM Team or victims); let all have the freedom to share their view, even if it is different from your own; this is not an analysis/critique/PIA of this event; please silence any electronics.
- Our team will remain on site to answer questions, provide assistance to further meetings or care, and to lend support.

EXPLORATION

- Now we would like to hear from you...please give us your name, and if you would tell us your assignment/job/task while at the scene of the event.
- Describe, if you would, your thoughts and memories that are prominent about the event. Include your senses—what you saw, heard, smelled and felt—as you recollect those moments when you realized the gravity of the event.
- It is not mandatory that you share...if you'd rather not, please just say so.

INFORMATION

- When a person runs into this type of event, it's not unusual for them to experience intrusive thoughts and dreams, different moods, uncharacteristic emotions, loss of energy, and minor or delayed shock.
- What you've shared are normal thoughts that normal people experience when exposed to an abnormal event.
- We've shared some of our initial thoughts and reactions to this event—that is a good first step. Some other things that help is keeping to your daily routine, avoiding excessive alcohol and caffeine, eat healthy foods, get plenty of good rest, pass up situations that are stressful, if possible, spend time around familiar and comforting people and things, and try to do a bit of light exercise even if you initially don't feel like it.
- We've brought some more information for you to have and to share with your loved ones at home. We will stay and answer questions after we dismiss...



Intervention Follow-up Checklist

Individual:

- Did I hear the concerns of the person?
- Were there questions that went unanswered?
- Were there questions that triggered more emotions/reactions than others?
- Did I offer CISM education well?
- Is there need for follow up? Did I set up another meeting or referral?

Group: (use during post-intervention Team meeting)

- Did the Leader facilitate participation?
- Were the Ground Rules presented and followed?
- Were there things that should have been said?
- Were there things that should *not* have been said (by Team or participants)?
- Was CISM information delivered properly and thoroughly?
- What do you think went well? What went poorly?
- Anything you would do differently?
- Assign follow-up contacts and referrals to the Team
- Last thing: Ask each Team member what they are going to do for their stress from this intervention...

When referring (“red flagging”) individuals, it is crucial that you proceed carefully...this is a very personal, and therefore, vulnerable time in their life. Only take the next step with *their* permission, whether it is follow-up phone calls, additional meetings, or referrals to mental health professionals. When referring to MHPs, be sure you have good knowledge and confidence in those professionals—are they the best match for that individual?

Are all members of the Team stepping up to participate? Or is it always the same people volunteering (or *being* volunteered...) for the Lead position? Each Team member should be able to Lead or present education information. This will make your Team stronger, if they rotate the key roles.