NORMAL POST INCIDENT STRESS SYMPTOMS AND HOW TO COPE WITH THEM

As a correctional employee, we understand that we have a very difficult job. However, being victimized is not “just part of the job”. Personal safety should be a priority both in our personal lives as well as in the workplace. In response to the Departments commitment to provide services to staff who have experienced a traumatic event, critical incident or may have been assaulted, threatened or battered in the workplace, the Office of Victim and Survivor Rights Services is providing this information to assist staff members when they have experienced such an event.

Some of the stress symptoms that individuals may experience after traumatic incidents are listed below. These symptoms can be physical, cognitive, emotional or behavioral. They are best seen as normal reactions to unusual circumstances. Having symptoms of stress means your mind and body are going through some adjustments or trying to recover normal responses. 80-85% of those individuals exposed to critical incident will show a noticeable symptom within 24 hours. 50% of those above will be affected after three or more weeks. Symptoms will be more marked in relationship to the severity of the incident. Additionally, some studies indicate that 87% of the individuals who are provided immediate intervention through critical incident stress debriefing and peer support will not need long term counseling.

The signs and symptoms may last a few days, weeks or months, based on the severity of the traumatic event. With understanding and support from peers, management and loved ones, the reactions usually pass more quickly. Occasionally, professional assistance from a counselor may be necessary. This does not mean the individual is weak, but indicates this person will need additional support.

**TENSION**: Physical and emotional tension, being excessively hyper, unable to relax or sit still for very long, muscle tremors or twitches.

**NAUSEA, VOMITING OR OTHER GASTROINTESTINAL UPSET**: Especially during or immediately after the incident.

**BODY TEMPERATURE REGULATION**: Profuse sweating or chills at unusual times

**SLEEP DISTURBANCES**: Either the inability to fall asleep, disruptive dreams or nightmares or waking up earlier than usual.

**FATIGUE**: Always tired. No pep or energy.

**INTRUSIVE THOUGHT AND MEMORIES**: Thinking about the incident or some recurring memory associated with the incident when you don’t want to.

**NEGATIVE FEELINGS/CRYING**: Unpleasant feeling that may come without warning, such a profound sadness, helplessness, fear, anxiety, anger, rage, discouragement, frustration or depression.

**A FEELING OF VULNERABILITY OR LACK OF CONTROL**: Feeling exposed to threat, not in control of one’s life anymore or paranoia.

**INTERPERSONAL PROBLEMS**: increased irritability, insensitivity, blaming others, wanting distance instead of closeness.

**INTERPERSONAL PROBLEMS WITH ALCOHOL OR DRUGS**: “Self-medication” can be a symptom of stress.

**COMPULSIVE BEHAVIOR**: Increased problems such as compulsive eating or other compulsive behaviors.

**A VAGUE FEELING OF SELF-BLAME**: Usually this fixes on some particular aspect of the incident. A sense of having lost self-value or diminished self-esteem. “I could have done this or should have done that.”
The following are some procedures that have been used successfully to cope with stress. Some may work for you while others may not. Use these procedures on a trial basis. Stick with the ones that seem to work best for you.

EXPRESSING FEELINGS: Share your thoughts and feelings with someone you trust, even though it may be painful to do so. Make sure the other person understands you’re not asking for a solution to your feelings, just an opportunity to express how you feel.

FACING THE PAIN: Painful and fearful thought or memories come back when you don’t want them to. That’s normal, but our first reaction is to keep this from happening. If we allow the thoughts or memories to come back, we can release some of the tension that is making them occur. You can even say to yourself, “Okay that’s enough!” Gradually you will gain more control over these intrusive thoughts and feelings. Once you learn to deal with them, they will eventually subside.

DREAMS AND NIGHTMARES: Nightmares are a very common reaction to traumatic stress. These symptoms are necessary to regain emotional balance and they usually disappear after a couple of weeks. Although they can never be controlled completely, some people have learned to diminish nightmares by deliberately thinking about the trauma sometime before they go to sleep and then saying to themselves, “Okay, that’s enough, I’m going to dream about something else.” If you are having trouble sleeping, try reading or watching television. Insomnia will probably resolve in a few days.

RECOGNIZING SELF-BLAME AND SURVIVOR’S GUILT: It is normal to feel some blame just for surviving a traumatic incident, especially if other people were killed or severely injured. Recognize this for what it is: an irrational thought. It is okay to have survived.

CHANGING THE MEMORY: Remember that what is upsetting you after a traumatic incident is not the incident itself, but your memory of it. If it is a memory, you can change what you recall. If some particularly upsetting scene keeps coming back to you, try substituting some other memory of the incident that has less painful emotions associated with it.

EXERCISE: Strenuous exercise afterward is very useful, especially if you’re already in good physical shape. However, don’t overdo it and cause more harm than good.

GETTING BACK TO WORK: Get back to work when it is realistic, but accept the jitters that you might feel with the reminders of the incident. These are normal and will go away with time.

DECREASE ALCOHOL CONSUMPTION: Many people feel a “drink” eases tension. However, alcohol is actually not useful to the body in coping with stress.

ACCEPT ENJOYMENT AND DIVERSION: Even if the incident was a serious one. Or consequences occurred due to the actions of others. It is okay to enjoy yourself and forget the incident. There may be a time later that you need to recall what happened. Caring is fine but constant worrying serves no true purpose. Be kind to yourself, go to a movie, get involved in an activity you enjoy, etc.

IF NECESSARY, SEEK PROFESSIONAL HELP: Sometimes traumatic stress is so severe that professional help is necessary for working through it. This is the smart thing to do; it is not a sign of weakness. It takes a lot of courage to work with a professional, to face your own pain and fear. Be proud of yourself and not apologetic.

DON’T EXPECT MIRACLE CURES: Working through post-traumatic stress takes a long time and it is never really finished. Try to accept this and in time you can put things in proper perspective. What has happened is over and you cannot change it. You can learn from what happened and gain inner strength as time passes.

THE BOTTOM LINE: The bottom line in dealing with traumatic stress is to face it. If it can be face squarely and dealt with in a constructive way, that is half the battle. THINK POSITIVE.