## CRITICAL INCIDENTS

## Am I losing it? I keep seeing the scene, the person, the situation.

No, you're probably not losing it. Your brain is not designed to keep you happy. It's designed to keep you safe. You might keep seeing parts of the critical incident, or your body might be amped up when you think about it, pass by the scene, or see others who were there with you. This is common. For a couple of weeks after a critical incident, your brain thinks it is keeping you safe by sending you these visual or physical reminders of the incident because it mistakenly thinks you are still in danger. Usually, your brain works it out, integrating and storing the memory as an event that has passed. If, after 3-4 weeks, you are still having intrusive images and thoughts or physical reactions to people, places, or memories, seek support from a first responder clinician. There are specific brain-based methods for teaching your brain that the event is over and that it can "stand down."

You might also have a mixed bag of feelings and thoughts about the incident. You can feel angry, sad, pride, relief, and confusion at the same time about the same incident. You might relentlessly play the "What if..." Game. What if I arrived sooner, later, did this, did that...? This is to be expected because, you want to mentally prepare in case it ever happens again. Allow this briefly, so that you can take away anything that could be helpful. Then, you will need to shift your focus to the present, maybe even declaring to yourself "That *isn't* what happened so move on." You might have to repeat this a dozen or so times before your brain gets the hint that you're not going to be a prisoner to the What if Game.

## What can I do to make sure this doesn't have a lingering effect on me?

Recovering from a critical incident isn't rocket science. It's neuroscience.

- Get 7-8 hours of sleep. Your brain needs the full 7-8 hours to store memories properly, so the memories don't keep popping up. It also lets the brain run it's "rinse cycle." When you sleep, your brain secretes spinal fluid to clean off the deposits created from mental activities while awake.
- Can't sleep? Exercise, just not close to bedtime. Take a hot shower before going to bed. Make your bedroom cold and dark. Focus your brain on something because, if you don't, it will fill the void with thoughts of the event. Think through the steps of a complicated process (how to rebuild an engine, bake a cake, etc.). Every time your brain drifts to thoughts of the event, notice it, and return to thinking of the step you were on in the procedure. You can also do a word game- think of a 4-5 letter word, like "shoe." Then think of all the words you can spell with each letter of the word. (S- sock, stew, sand, etc. H- hose, hyena, etc.). After naming the word, see the image of the word- picture a sock, a pot of stew, etc. This primes your brain for sleep and is boring enough to put you to sleep.
- o **Drink water.** Stress hormones dehydrate you. Drinking water will help you flush out toxins from stress hormones.
- Avoid alcohol. Alcohol can help you fall asleep, but it will disrupt the second half of your sleep, which is vital to processing memories (especially traumatic ones).



- Eat small meals. Many don't feel hungry when they are stressed. Eating small, bland foods like yogurt, white cheeses, nuts, etc. can keep your energy up without upsetting your stomach. Much of your serotonin (the mood neurochemical) comes from food. No food means less serotonin.
- Go outside. Being in nature or, at a minimum, looking at pictures of natural settings is very calming for the nervous system. If you stare at pictures of your favorite hiking trail, vacation, or fishing spot, you will likely feel better. If you can go there, even better.
- Get exercise. In the immediate aftermath of a critical incident, your body will be amped up. Work with your body, not against it. Go for a run, brisk walk, hike, bike ride to lessen the adrenaline. Again, drink water to flush out toxins.
- O Hunt the Good. There is a natural tendency to pay more attention to the negative. First responder work worsens this tendency. Critical incidents can make you even more aware of the negative in the world. You will benefit greatly from asking "What else is there?" so that you can also recognize good and neutral aspects of life. They exist but can be overshadowed by the negative. It's important to take in the entirety of the picture.
- Maintain the Normal. At a time that feels like anything but normal, it is very important that you maintain as much normalcy as possible. Whatever activities you normally participate in, keep doing them. This not only helps you but helps others in your life in that it maintains your connections to them.
- Play Tetris. Yes, that's not a typo. Research shows that playing visuospatial games like Tetris, Candy Crush, and Bejeweled reduces the likelihood of visual flashbacks. Using your brain to do visuospatial tasks interferes with the brain's ability to store the memory in the way where the visual memory would intrude unexpectedly. It is possible that other visuospatial tasks (moving things around, spatially) can have the same benefit. You only need to play for about 10 minutes. Ideally, you would play within 24 hours of the event but benefits of this have been experienced days later.
- Get it out. Talking with trusted others about difficulties helps the brain integrate trauma. Trauma affects the right side of the brain. Talking about trauma engages the left side of the brain, which helps to integrate the memory. This means that it helps you process and move past it neurologically, emotionally and maybe even spiritually. Don't have someone you would want to talk to about it? Write it out. Even if you throw your writing away, the mere act of writing about it can help you process the event.
- Get support. You don't have to have post-traumatic stress disorder, anxiety, depression, or relationship collapse to benefit from professional help. In fact, the best thing you can do for yourself is get support before these occur. First responder clinicians have specialized training to help you help yourself during these times. It's not a matter of you being weak and being "fixed" by someone else. Rather, you are being wise enough to know that you don't know everything and could use some specialized support to help yourself.

My family members are affected by this critical incident. What can they do to get through it? Family members sometimes struggle just as much as you do. They might be torn between wanting details about the event and not wanting them. It's best to not give them the graphic details of the event. Just like you, they can't un-know what they come to know. They might even



picture the scene, if you describe it, which can't be "unseen", even if they are only picturing it in their mind.

Instead, give them details about how you are doing, what you need and what you don't need. Be both kind and direct in conveying these. They are suffering too. Provide them information about the department procedures that will follow- interviews, appointments, and legal hearings, etc. Family members can get through this with time and would be wise to follow the same healthy practices offered in the previous section.

Depending on the nature of the event and size of the community, you and family members might be subjected to public and media interest or even scrutiny. Be prepared for this by creating a 3-part response to unwanted questions. First, acknowledge the question- "Thanks for checking in." Next, make a comment that lets them know that you're not answering it- "I'm/we're not up for (able to, etc.) talking about that at this time. Lastly, redirect the focus to something else by asking them a question about something in their life- "Is little Johnnie still playing soccer this year?" If you don't know the person well enough to redirect with a question about their life, simply offer a statement that shows that the conversation is over- "Have a good day." If they persist with their question or another one, repeat the process *verbatim*. You do not need to explain or justify why you're not talking about it. Be a broken record, repeating the same 3-part comment as many times as it takes for them to understand that you're not talking about the incident with them.

#### What do I need to watch out for with my co-workers?

The biggest indicator that your co-worker is not doing well is an enduring change in how they are. If they are normally talkative, funny, and upbeat but haven't been this way since the incident, check in with them. Care enough to hurt your co-worker's feelings. Tell them that you have noticed the change and ask them "What is going on?" I don't usually suggest asking "How are you?" They might give you the standard answer- Good, okay, tired, alright, etc. If you ask this question, emphasize it, so they know you seriously want to know – "How are you?" This question is used every day as a greeting so people will respond as if you are just making small talk. If they say they're not doing well, thank them for being honest and ask what they have tried to get better. Suggest they talk to your department peer support team or a first responder clinician because they deserve help; not that they need help. There's a difference. The "need" for help can imply weakness while the "deserve" conveys their right to proper support.

# I am not having any issues with the critical incident. Am I in denial? Is something wrong with me?

This comes up a lot. At times, the critical incident does not negatively affect some people while affecting others quite significantly. This happens for a variety of reasons- your role in the event, the relatability of the victim(s) to you, your history with this type of incident, your health, stress levels, and your perspective toward trauma and suffering. Sometimes, a person's faith also lessens the impact of the traumatic event. Other times, it creates a crisis of faith. In short, if you're not having a negative response, it doesn't mean you are a sociopath.



You might also be really good at shoving down difficult feelings and reactions. This is helpful during the critical incident, as it allows you to do your job, but can be hard to switch back on. The problem with this, in the long run, is that you have switched off feelings and reactions that are healthy to have. It would be like neutralizing a bodily symptom that is there for a reason- a symptom to be addressed so you can get better. Switching off "negative" emotions tends to lead to numbing out *all* emotions, which is problematic.

If in doubt, talk to a peer support team member, trusted co-worker, family member or friend. Those that know you well can tell you if they have noticed you have numbed out. You can also talk to a first responder clinician who can help you sort through this.

Peer Support Team Contact(s):	
First Responder Clinician: Stephanie M. Con	nn, PhD, Licensed Psychologist
Cop Line, Confidential Support by Police for <a href="https://www.copline.org">www.copline.org</a>	Police: 1-800-COPLINE (267-5463);

Fire/EMS Hotline: 1-888-731-FIRE (3473): https://www.nvfc.org/fireems-helpline/

