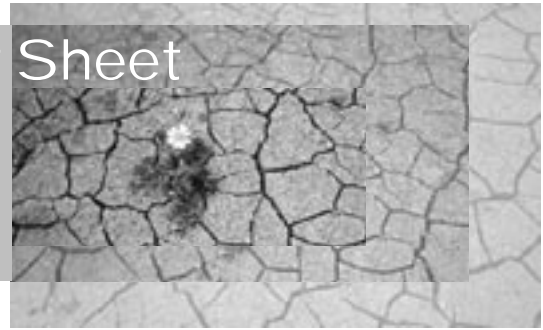


Fostering Resilience in Response to Terrorism: For Psychologists Working With First Responders



Fact Sheet



Fostering Resilience in First Responders

In the aftermath of the September 11th terrorist attacks, service personnel have been given added and more complex professional responsibilities. In addition to providing immediate assistance following everyday emergencies and crises, police, fire, and rescue personnel need to be vigilantly prepared for large scale, mass-casualty events, including bioterrorism, airline disasters, and the use of conventional weapons in large urban areas. Should these events occur, emergency services personnel are tasked with unprecedented, enormous, and sustained personal and professional challenges.

The objective of this fact sheet is to provide information to support psychologists working to promote the psychological resilience of emergency service personnel in the face of potential and actual mass violence. We focus on the promotion of resilience, rather than the prevention of untoward mental health problems, per se, for several reasons: (a) The large majority of first responders do heroically well. Police, fire, the emergency medical services, and other rescue personnel are self-selected and typically robust in the face of stress; (b) the emergency services usually have built-in support systems that help members cope with a variety of occupational hazards and severe stressors; and (c) in the immediate aftermath of occupational trauma (or as a result of the cumulative impact of sustained exposure to occupational demands and hazards), significant stress reactions or fatigue are not necessarily signs of an enduring mental health problem (neither is the complete absence of an emotional reaction to trauma or traumatic loss, for that matter).

Strategies for effective coping and strengthening resilience in first responders are provided here in four categories. The first is everyday resilience for first responders so they may stay prepared for any type of large mass casualty. The second category is resiliency strategies that can be employed during particularly stressful events, including disasters involving mass casualties. The third category is resiliency strategies that can be used in the days and weeks after a mass casualty event. Finally, in the fourth category, special issues are addressed, including first responders' reintegration to normal duties following acute stress situations.

Category 1: Preparing for the Disaster—Everyday Resilience

Resilient individuals maintain positive beliefs, attitudes, and behaviors that may serve to protect them in the face of adverse, difficult, and challenging events and experiences. Further, resilient attitudes and behaviors can be taught and practiced every day. Resiliency is the psychological armor that can shield a first responder from the emotional intensity of emergency situations.

The daily practice of the following resiliency building tactics will help the first responder successfully cope with both everyday situations and with any larger scale event that might occur.

- *Recovery time between incidents*

It is vitally important for first responders to monitor their own stress and take breaks, especially after particularly difficult incidents. Using downtime effectively means the regular practice of relaxation and proper breathing methods, physical exercise and stretching, rehydration, and eating healthy and nutritious foods.

- *Group cohesion and interagency cooperation*

As with any organization, personnel problems or conflicts can develop among first responders. By promoting group cohesion and team spirit within the department and interagency cooperation between departments, first responders will benefit from the protective buffer of a healthy and supportive work environment.

- *Maintaining community ties*

Resilient individuals tend to develop and maintain more interpersonal connections within their own neighborhood and community, including faith-based organizations, local civic groups, and professional associations. As expected, community institutions connect first responders to a network of supportive individuals, as well as activities, that can be counted on to cushion the impact of day-to-day stress.

- *Social support*

One of the most important contributing factors consistently identified as promoting resilience is social support. Day-to-day resilience involves having close relationships on which one can rely to talk and problem solve. Social support can be found in many forms, including peer-support groups, significant others, friends, supervisors, and counselors.

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• *Sense of purpose and meaning*

For many first responders, their most professionally rewarding goal is to provide safety and protection to those who require life-saving assistance. Those who identify deeper meaning and purpose in their work tend to feel more personally engaged and get more benefits in their jobs, feel greater appreciation in life and an increased sense of personal strength and spiritual growth.

Category 2: During the Mass Disaster Response

One of the most significant risk factors for first responders is exposure to loss of life, especially the loss of one's colleagues during the call of duty. Such an experience is a significant risk indicator for enduring distress and functioning problems and may lead to adjustment problems, such as post-traumatic stress disorder and/or complicated bereavement. Loss of life and exposure to grotesque human remains are particularly haunting and arguably lead to helplessness, a state which is particularly antithetical to the first responder culture, which may create considerable demoralization and lessen motivation to perform duties that may require considerable bravado.

The following represent strategies that may be employed by first responders to enhance resiliency during a mass disaster response:

- *When possible, first responders should be deployed and work in teams.*

The team concept is useful for:

- Giving and receiving support
- Monitoring for signs of distress and fatigue, which could be harbingers of mistakes and accidents

- *First responders should stay focused on the immediate task at hand.*

The following are important cognitive frames to remember during a mass casualty incident:

- The perfect time to make a difficult decision may never come.
- Make decisions based on the information available and move on.
- Information obtained after a decision is made does not necessarily negate the appropriateness of that decision when it was made.
- There will be plenty of time to assess the meaning, implications, and overall impact at a later time.

- *During a mass disaster response, first responders should monitor for the following potential signs of problems:*

- Disorientation, dissociation
- Dumbing down (inability to perform simple problem-solving tasks and/or the inability to follow simple instructions)
- 1000-yard stare
- Impulsive behavior
- Inclinations toward anger, argumentativeness, and/or violence
- Second-guessing that serves to interfere with performance
- Significant time distortion
- Exhaustion
- Sustained distractibility
- An expressed sense of futility, hopelessness
- ANY other evidence of impaired performance, including physical distress

- *As physical performance declines with fatigue, scheduled or non-scheduled breaks may be useful if they can be employed without disruption to operational responsibilities.*

- *Maintaining appropriate plain water hydration is imperative.*

- *"Information is power!"* Upon shift change/disengagement, there may be value in informational debriefings* so as to update information, discuss new challenges and problem solve, and discuss operational strategy.

- *First responders can take advantage of behavioral health services from the Red Cross and other support organizations.* Typically, counselors are available at disaster sites to assist rescue workers. Behavioral health counselors can be helpful, even if the rescue worker just wants to vent.

- *Chaplaincy services (both religious and nondenominational) are usually available on-site in mass disaster situations to provide spiritual support and counseling.*

Category 3: After the Mass Disaster Response

Several environmental factors influence the ease with which an individual will readjust and reintegrate into daily activities. Of the various environmental factors, social support appears to be of particular importance for first responders. Many individuals complain that support networks often disappear after the acute phase of the disaster. Because of the combination of chronic and acute stressors first responders encounter, it is often critical that

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continued individual and/or group support be provided on an ongoing basis. A disaster can lead an individual to become increasingly isolated or disconnected from social ties and responsibilities. Often significant others are the ones who play a role in determining in which of these directions the individual will move.

Following an intensely stressful event, first responders may believe that by talking about the event they will burden family and friends or that other people "just don't understand." However, talking about, or even writing about, the experience may be healthy and therapeutic. Discussing the event need not take place immediately following the stressful experience, and judgment should guide the decision about to whom and when to open up. If a trusted confidante extends an offer to listen and discuss the experience and reactions to the disaster, and the first responder desires to talk about his or her experiences, this might be beneficial. If, on the other hand, first responders are not yet ready to discuss their experiences, their decision should be respected.

The important point here is that all relationships are built upon communications, including the right to not communicate. It is helpful, however, for first responders to remember to keep their options open and to let those who have offered their support at least know that their offer has been heard and appreciated. This is especially true with family members.

As soon as possible, first responders should reaffirm ties with social support and religious networks.

- *If offered, the first responder should consider participating in an organizationally sponsored small peer group debriefing.**

Although the preventive effects of debriefing have not been established, a small peer group debriefing may serve as a useful forum for group support and normalization of reactions.

- First responders should try to return to a normal diet and a normal exercise level as soon as possible.

- First responders should understand that returning to normal may take some time. Furthermore, the impact of a mass disaster may change the perspective a first responder has on life. It is possible that positive changes may also emerge, including a greater appreciation for life, family, friends, and the important contributions made to society.

Category 4: Special Issues

- *Returning to everyday functioning*

After a disaster it is common for individuals to feel pressure to reduce distressing emotions brought on by the event and return

to adaptive, independent everyday functioning. For first responders, returning to everyday functioning entails managing residual effects from the disaster, being able to handle the day-to-day stressors of work, and being prepared to respond to any future crisis. First responders may want to avoid talking about the disaster. Avoidance can also take on other forms, such as missing work or even working too much. Although avoidant strategies may be initially highly adaptive to allow the first responder to continue working, continuous use or overuse of avoidance can impede long-term positive readjustment.

An active problem-solving approach that actively addresses difficulties posed by the stressor can help with both chronic and acute stressors. For example, finding meaning in some outcome of the disaster may minimize feelings of helplessness, instill a sense of control and mastery, and is typically associated with better physical and psychological outcomes than avoidant coping.

- *Identifying red flags*

After the acute phase of the disaster, many will return to adaptive independent functioning. For some, however, effects of the disaster may persist. It is important to identify and follow up on individuals who may be at risk on the basis of level or duration of exposure or other red flags. Some important red flags to be aware of include:

- Burn-out/frustration
- Persistent sleep problems, including nightmares
- Increased risk taking/impulsiveness
- Physical problems, including lack of appetite, lack of libido
- Missed days at work
- Difficulties with attention
- Feelings of being ineffectual, disillusionment
- Exhaustion/diminished energy
- Isolation from others/desires to escape
- Emotional numbing
- Anxiety/depression
- Arrogance/entitlement
- Irritability/anger
- Substance use/self-medication
- Marital or family problems
- Blaming behavior or feelings of guilt

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Because of the intense and often prolonged nature of being a first responder to a disaster, it is possible that some individuals will continue to feel distress after the disaster. It is important to be aware of and identify red flags in order to facilitate appropriate professional care. The following are some examples of ways first responders can find care:

- Most law enforcement agencies, fire departments, and emergency medical technician departments provide employee assistance programs (EAP) to assist and counsel staff in a confidential and safe setting. Following a disaster, EAP or behavioral health staff may provide an open-door or drop-in policy to discuss events or reactions following a disaster.
- Initiation or use of professional individual or group psychotherapy can be an excellent source to build personal resilience, competency, and self-efficacy.
- There are many Web sites now available to build resilience and coping. For example, www.apa.org has many links to organizations that provide assistance to professionals.

After some sense of stability has been established, there may be some benefit to first responders' thinking about lessons learned from the disaster in order to prepare for future events. Staying prepared for future events involves reflecting on the past events and sources of personal strengths and challenges. This is an opportunity for both individual and professional growth.

Additional Resources

Getting help when it is needed is an important aspect of taking care of oneself, and it can also contribute to resilience. In addition to turning to family members and friends for assistance, a person can take other helpful actions, including joining community support or self-help groups, reading books about how others have successfully managed hardships and challenges, and gathering related information on the Internet (though quality can vary by source).

One online resource that may be a good place to start is the **APA Help Center at www.APAHelpCenter.org**.

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* *Debriefing* is a broad-based term for a variety of programs and processes designed to assist people who have experienced a trauma. For the purpose of this fact sheet, we use the term debriefing to mean giving people an opportunity to talk about their traumatic experience. Our use of the term should not be considered an endorsement of any particular debriefing program; in fact, the research is mixed as to the effectiveness of some such programs.

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