

# TRAFFIR: Trauma Awareness For First Responders

Addressing skills gaps in critical incident stress and trauma intervention.

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**Helping those who help us:**  
*supporting first responders and the general public in disaster situations*

DomSpain – Spain  
Nikanor – Bulgaria





## First responders and crisis situations

- First responders: who are they and what are they facing
- EU paradigm
- COVID-19 pandemic
- Self-care
- Professional trauma
- After Action Review (AAR)

# Who are first responders

First responders or Protective Service Workers are those who respond to manmade and natural disasters. First responders are those professionals working within the following fields:

- Firefighter servants
- Law enforcement
- Emergency medical services
- Search and rescue
- 112 operators and dispatchers
- Emergency room staff (including doctors and nurses)
- Psychotherapists, etc.

These groups of professionals experience daily career exposure to acute stress and trauma as well as direct or secondary trauma from the work environment.



# Impact on people

The impact on people will be different and will involve a wide range of reactions and feelings: Confusion, insecurity, stress, fear, anxiety, insensitivity, indifference, or in severe cases, trauma.

Disasters psychological impact on persons can depend on different factors:

- The type of the event
- The environment and the circumstances
- The personality characteristics and the individual vulnerability of the survivors/affected ones (personality and ability to cope with the catastrophic event).

In emergency situations everyone has psychological coping mechanisms, but some are especially vulnerable or might need additional help (children, teenagers, adults, parents/primary caregivers, interveners, other professionals with affected persons, etc.)

# Preparing and organising response to disasters

First responders train for many types of disasters, but the larger the event with the greater amount of individuals displaced and injured, the greater the exposure that can create response and management issues. Mental health professionals may be involved with preparing for and responding to traumatic incidents and disaster situations. These may include incidents limited to the department and/or larger community situations. In order to respond most effectively, it is important to consider several aspects, such as the type of disaster they face.

## TYPES OF DISASTERS

- ✓ Natural disasters: wildland and/or forest fires, earthquakes, a tsunami, hurricane, flood, epidemic, structural collapse, etc.
- ✓ Man-made events: torture, acts of terrorism, war, drug cartel wars, school shootings, gang warfare, robbery, arson, bombs, etc.

Source: 14 Adler-Tapia, R. (In press). Early Mental Health Intervention for First Responders/Protective Service Workers Including Firefighters and Emergency Medical Services (EMS) Professionals. In M. Luber (Ed.), Implementing EMDR Early Mental Health Interventions for Man-made and Natural Disasters: Models, Scripted Protocols and Summary Sheets. New York: Springer Publishing Company



# EUROPEAN BODIES: ERCC

The Emergency Response Coordination Centre is the heart of the EU Civil Protection Mechanism and coordinates the delivery of assistance to disaster stricken countries, such as relief items, expertise, civil protection teams and specialised equipment. The centre ensures the rapid deployment of emergency support and acts as a coordination hub between all EU Member States and the 6 additional Participating States, the affected country, and civil protection and humanitarian experts. The centre operates 24/7 and can help any country inside or outside the EU affected by a major disaster upon request from the national authorities or a UN body.

## Why is this important?

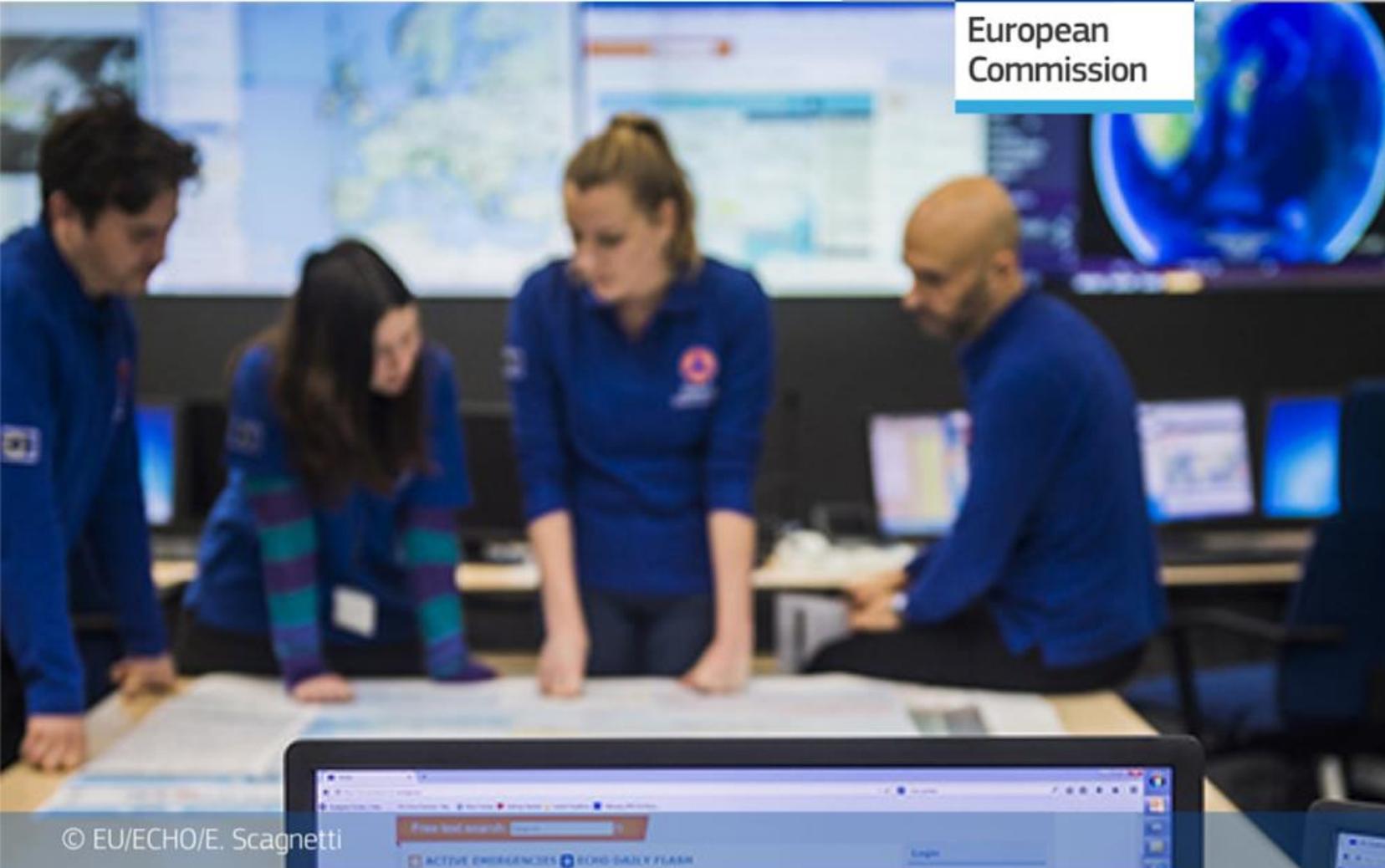
A well-coordinated response to man-made disasters and natural hazards at European level can avoid duplication of relief efforts and ensure that assistance is tailored to the needs of those affected. To lessen the burden on contributing states, the Emergency Response Coordination Centre can liaise directly with the national civil protection authorities of the country in need and can also financially support the delivery of civil protection teams and assets to the affected country



Source: [https://ec.europa.eu/echo/what/civil-protection/emergency-response-coordination-centre-ercc\\_en](https://ec.europa.eu/echo/what/civil-protection/emergency-response-coordination-centre-ercc_en)



European  
Commission



- Coordination platform for civil protection and humanitarian aid
- Civil protection cooperation and development of EU emergency response
- Enhancing crisis response coordination at European level
- Fighting forest fires
- Response to Marine Pollution

# COVID-19: COMMON EU RESPONSE

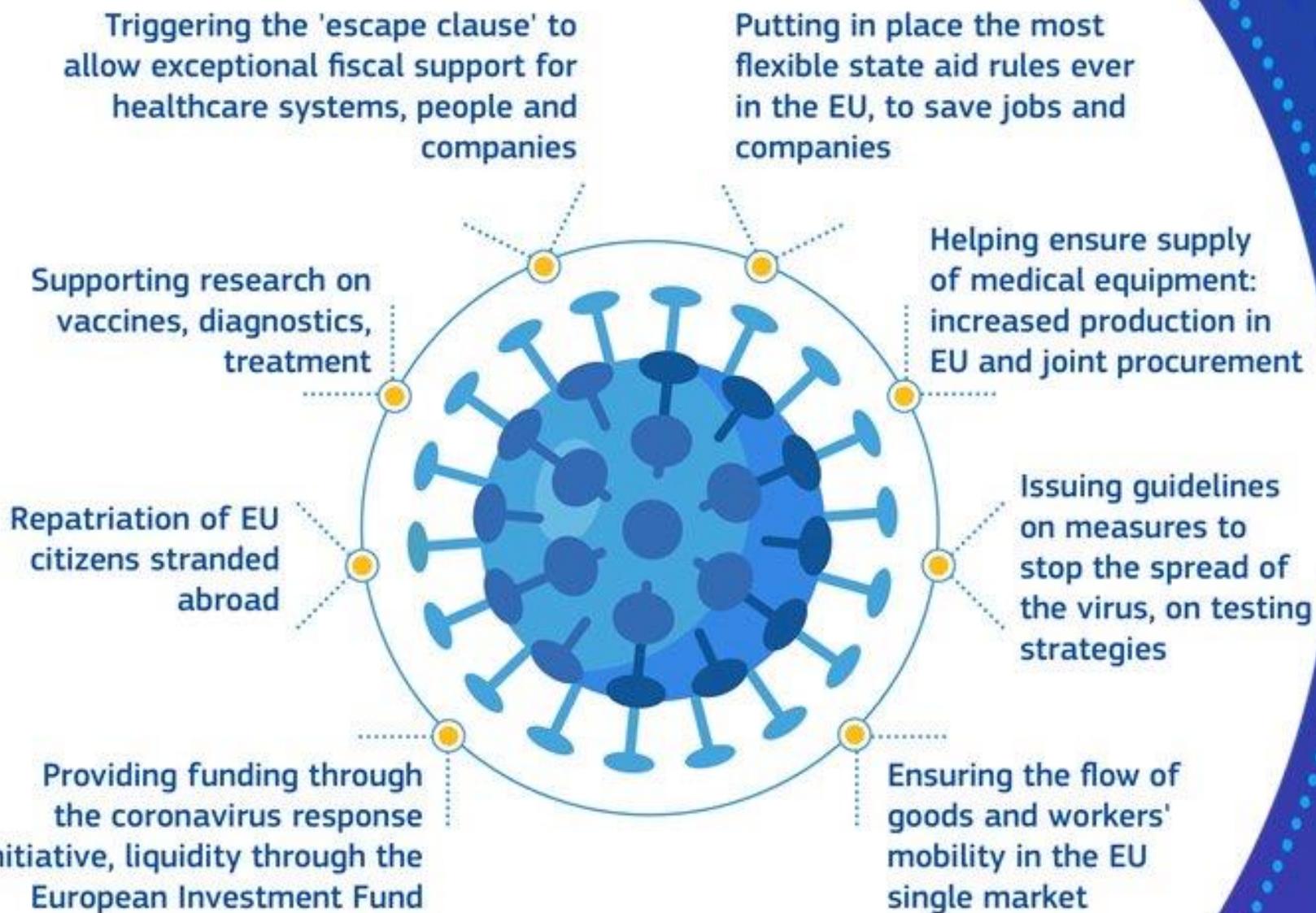
***COVID-19 is an example of global emergency  
where a large percentage of citizens become first responders***

The European Commission is coordinating a common European response to the coronavirus outbreak. They are taking resolute action to reinforce public health sectors and mitigate the socio-economic impact in the European Union. They are mobilising all means at their disposal to help Member States coordinate their national responses and are providing objective information about the spread of the virus and effective efforts to contain it.

A Coronavirus response team has been established to coordinate the response to the pandemic.



# EU CORONAVIRUS RESPONSE



#CORONAVIRUS



European  
Commission

# COVID-19 PANDEMIC

EFPA (European Federation of Psychologist's Associations) refers to COVID-19 as an important problem of public health at an European level.

First responders are facing very stressful and unknown situations which, according to OMS, means it is very important to provide them with psychological support.

The implementation of certain measures such as confining the population and general lockdowns, physical and social distancing, are translating in a huge pressure on first responders, who are not only affected at a psychological level but also at a physical one, as they are working in the first line. All this is collapsing EU health systems.



# COVID-19 PANDEMIC: *would you like to know more?*

If you would like to know more about psychological support and mental health under the COVID-19 outbreak, you can check out further resources, such as:

## **“Coronavirus: 7 Ways to Protect Your Mental Health”**

A brief article by Jo Steer which gives some good advice on helping relieve stress, including disrupting negative mental images, being honest with yourself about how you’re feeling, and maintaining a healthy ‘mental diet’, meaning avoiding scrolling through online news more often than we need to.

→ [www.tes.com/news/coronavirus-7-way-protect-your-mental-health](http://www.tes.com/news/coronavirus-7-way-protect-your-mental-health)

## **"If you're worried about your mental health during the coronavirus outbreak"**

→ [www.samaritans.org/how-we-can-help/support-and-information/if-youre-having-difficult-time/if-youre-worried-about-your-mental-health-during-coronavirus-outbreak/](http://www.samaritans.org/how-we-can-help/support-and-information/if-youre-having-difficult-time/if-youre-worried-about-your-mental-health-during-coronavirus-outbreak/)



# SELF-CARE IN FIRST RESPONDENTS



## ALERT SIGNS

- Fatigue, tiredness, irritability, sleep problems, headaches, digestive problems
- Anxiety, irritability, guilt, aggressiveness, pessimism
- Focusing problems
- Communication problems



## SUPPORTING ACTIONS

- Resting and allowing oneself time for disconnecting
- Spending time with family and friends
- Exercising regularly
- Leisure, cultural activities & hobbies
- Contact with nature,
- Practising relaxation and meditation techniques
- Sunbathing carefully about 30 minutes a day



# PROFESSIONAL TRAUMA

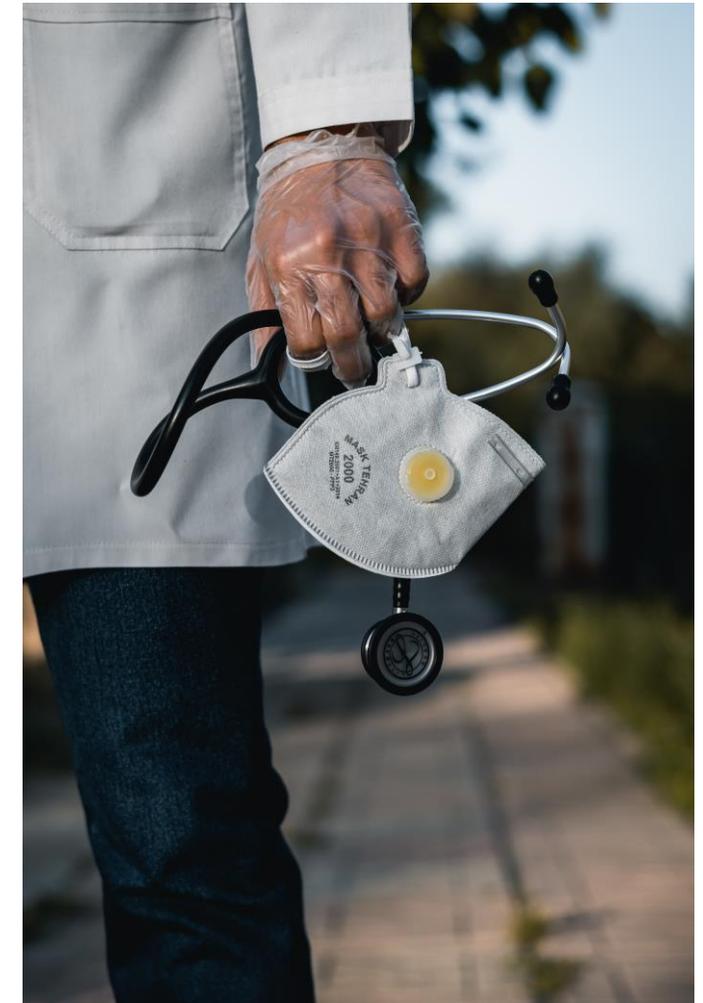
**PROFESSIONAL TRAUMA** is responding to and witnessing an actual or perceived threat to the safety/integrity of self or others that may result in intense fear or helplessness in response to an event.

Compared to the general population, with an estimated 6.8% lifetime prevalence rate of PTSD for adults, first responders are at increased risk for developing PTSD

“Powerless in the face of an event” often is what causes the client to experience the event as traumatic. One of the examples of such critical incidents may include **natural disasters** and **multiple fatalities** or seriously injured survivors.

In addition to witnessing and experiencing horrific natural and manmade events as part of the career, targets of professional exposure include:

- death notifications;
- personal exposure, when professional colleagues are hurt or killed in the line of duty;
- unique sensory flashbacks;
- residual impact of habitual **stoicism, depersonalization and derealization.**



Source: EMDR with First Responders: Models, Scripted Protocols, and Summary Sheets for Mental Health Interventions. Dr. Marilyn Luber, PhD. 2015. Springer Publishing



# Stoicism, Depersonalization & Derealization

Stoicism, depersonalization, and derealization are three common psychological defense mechanisms used by first responders to deal with the wear and tear of the career.

- ✓ **Stoicism** is a cultural expectation in that first responders are expected to not be impacted by the events to which they respond. This expectation manifests in a unique sense of humor, which can be interpreted as cold and/or disrespectful by others. The uniform and mask of first responders is used to cope with the career and is expected by the culture.
- ✓ **Depersonalization** is experiencing an event, but feeling like it is happening to someone else.
- ✓ **Derealization** is experiencing an event, but feeling like it isn't real.



# The Families of First Responders

First responders have two families including the traditional family and the professional family. Both families are part of their life and impact their response to their career.

The **Traditional Family** includes spouses and significant others, parents, siblings, children, and extended family and friends. The health and safety of family members are additional stressors.

Nowadays, we can see an example of such impact on health staff working in first contact with COVID-19 who can't even go home after long shifts and have to sleep in hotels, caravans or any other accommodation away from their families to protect them.



# The Families of First Responders

## - The **Professional Family**

These professionals have to spend many hours together due to the nature of their job (travel together, spend long shifts together, etc.)

Because of the co-existence required of the job, these professional families not only protect the community, but each other; therefore, when there are line of duty deaths or injuries, the entire family is impacted.

*Source: EMDR with First Responders: Models, Scripted Protocols, and Summary Sheets for Mental Health Interventions  
Dr. Marilyn Luber, PhD. 2015. Springer Publishing*



# Post Incident Services: After Action Review (AAR)

An “After Action Review” is a common term used in military, law enforcement, and first responders. An AAR is a meeting of the professionals who responded to an event and later review the events in order to improve services and safety for professionals. An AAR often includes the following questions posed to the professionals who responded to the event.



- What was expected to happen? What was our mission?
- What actually occurred?
- What went well and why?
- What can be improved and how?
- What could have gone better?
- What might we have done differently?
- Who needs to know?

Source: [www.queri.research.va.gov/ciprs/projects/after\\_action\\_review.pdf](http://www.queri.research.va.gov/ciprs/projects/after_action_review.pdf)



# Psychological Component of the AAR

Capitalizing on a known process for first responders, therapists may consider adding a psychological component to the AAR, using a CISD/CISM model of response, or a combination of the two. The following questions can expand the AAR to address the psychological impact of the event.

*How did it impact me?*

*What do I need to do to care for myself?*

*How do I get closure?*

*Who else is struggling?*

*What if anything do I need/want to do for my brothers and sisters who also experienced this exposure?*

*How does this impact our next call? Our next shift?*



By teaching first responders to consider these questions, an awareness of the impact of the exposure begins to grow.