
Healing from the Tornado

— Community Healing for Responders —

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What is Trauma?

- ❖ Trauma is powerful response to a very distressing event. Most often these events are sudden, sometimes unexpected, and include danger, a disruption in one's sense of safety, and a high risk or perceived risk of injury or death.
 - accidents, illness, natural disasters, crime, war, abuse, indirect exposure, loss, eviction

Neuroscience of Trauma

❖ Flight - Fight- Freeze [FIGHT/FLIGHT/FREEZE](#)

How does your nervous system figure out how to respond during a traumatic event?

- It's a split-second, unconscious process designed to choose the best option for self preservation.
 - Can I escape? FLIGHT
 - Can I overtake the threat? FIGHT
 - Can I make the threat lose interest or move on? FREEZE
 - COLLAPSE - If none of these work, disconnection between brain and body may occur.

Neuroscience of Trauma

❖ Window of Tolerance [WINDOW OF TOLERANCE](#)

The Window of Tolerance (developed by Dr. Dan Siegel, MD) describes the optimal ZONE in which one can function in everyday life.

When you are in your Window of Tolerance you feel calm and able to handle anything that might be happening.

- Hyperarousal = angry, agitated, annoyed, overwhelmed, upset
- Hypoarousal = zoned out, bored, fatigued, disconnected, don't care

What is Vicarious (Secondary) Trauma?

- ❖ **A NORMAL REACTION TO AN ABNORMAL EVENT**
- ❖ Vicarious trauma is trauma one absorbs from:
 - witnessing trauma
 - interacting with survivors of trauma
 - being exposed to a traumatic event
 - Increase in exposure = increase in trauma

Effects of Continual Exposure to Trauma

- ❖ Experiencing compassion fatigue or "burnout"
 - Feeling exhausted, checked out, angry, overwhelmed, detached, unable to connect or empathize
- ❖ Intrusive thoughts or memories
 - nightmares, emotional or physical stress when thinking about things that you've seen or heard
- ❖ Avoidance of Trauma Memories
 - Not wanting to talk or think about what you've seen or heard
- ❖ Increased arousal symptoms
 - feeling on edge, irritable, difficulty concentrating, sleep interruption, easily startled
- ❖ Negative Change in Mood & thoughts
 - Feeling angry, sad, anxious, thinking the world is no longer safe, people can't be trusted. Can be internalized.
- ❖ Experiencing extreme reactions
 - all or nothing - frozen or pressure to be busy helping every day

Risk Factors for Developing Long-Term Effects

- ❖ History of physical victimization
- ❖ Prior psychiatric history
- ❖ **Being a volunteer**
- ❖ Exposure to danger, death, injury
- ❖ **Experienced loss (possession, property, community, etc)**
- ❖ Experienced intense emotional demands, fatigue, physical stress
- ❖ Recent or subsequent major life stressors (e.g. COVID surge, other regular occurrences of stress)
- ❖ Reported avoidance coping, low self-efficacy, and low social support

Reference: Disaster Mental Health Training by Dr. Patricia Watson, PhD.

Protective Factors

- ❖ Higher perceived preparedness
- ❖ Greater sense of purpose in life
- ❖ Family support/Social support
- ❖ Positive-Approach and Emotion-Focused coping (e.g. problem-solving, reframing, acceptance)
- ❖ Benevolent perception of the world
- ❖ Training for specific tasks

Reference: Disaster Mental Health Training by Dr. Patricia Watson, PhD.

Survivors Guilt

- ❖ Definition: Feelings that you should or could have done something differently or feeling guilty that you were spared from a worse fate
- ❖ Some Signs:
 - Flashbacks
 - Feeling irritable
 - Difficulty sleeping
 - Feeling numb/disconnected
 - Being unmotivated
 - Feeling helpless
 - Intense sense of fear
 - Physical Symptoms (headache, stomach ache, etc.)
 - Thoughts of self-harm

Survivor's Guilt Traps

❖ Downplaying the effects

- Comparing to others
- Invalidating your feelings - "I'm not supposed to feel this way."
 - Being in a helper position gives the false impression or feeling that you are supposed to absorb others' trauma without being affected by it
 - False idea that acknowledging stress or emotional fatigue means that you are not doing a good job or that you are not strong enough (e.g. stigma)

❖ What is the purpose for you?

- Are you a volunteer or an employed first responder?
- If you are a volunteer, what happens to that sense of purpose when the tasks end or slow down?

Coping Tips for Survivors Guilt

- ❖ Give yourself time to grieve
- ❖ Physical and emotional self-care
- ❖ Think about what others might be feeling (in a connected way)
- ❖ Feel good about gift of survival
- ❖ Remind yourself that you are *not* alone
- ❖ Be patient
- ❖ Share your feelings with someone you trust
- ❖ Daily routine
- ❖ Journaling
- ❖ Professional support, if needed

Power of Helping Each Other

Studies show that peer-support interventions that are integrated into first-responder cultures increase cognitive abilities, improved functioning and decreased psychological effects of the work. It is most effective if it is integrated consistently within the culture or environment.

Positive Impact of Peer-Shared Coping

- ❖ What is it like to bond through this experience?
 - There is a natural inclination to feel connected through a shared experience in many contexts. When that experience involves trauma, it becomes even more important to talk about it and gain support through empathy and validation.
- ❖ What do you need and when?
 - Who are the people who can meet your emotional needs?
 - When do you need validation/witness? When do you need distraction? When do you need guidance?
- ❖ Value of acknowledging both successes AND struggles



ABC's of Managing Secondary Trauma

Awareness, **B**alance, and **C**onnection

- **Awareness:** Know your own trauma history and triggers, evaluate your current routines and lifestyle choices and identify necessary changes, create a self care plan that works for YOU.
- **Balance:** Create and maintain clear work/life boundaries, seek out positive experiences, be aware and limit negative coping skills, give yourself space to fully experience your emotions.
- **Connection:** Avoid isolation, develop and use your support system, avoid professional/group isolation, listen to feedback from others (work, groups, family, friends), **debrief after difficult days.**

Managing Secondary Trauma Cont'd

- ❖ The goal is to address stress regularly so you can continue to work, support, help.
- ❖ Complete the stress cycle
 - Do things that signal danger/stress is over
- ❖ Debrief daily
 - Talk to other helpers, write, make voice memos
- ❖ Take time off
 - Need time for rest, play, and connection
- ❖ Seek balance
 - Spend time with friends, family, do hobbies, self-care, “add joy” to balance difficult experiences, mindfulness
- ❖ Do things to regulate emotions
 - Eat balanced, sleep, exercise, avoid mind altering substances, take care of your health & body

Self-Monitoring

- ❖ Check in with yourself by tuning into what your mind and body are telling you (Use some of the clues discussed earlier to look for indicators of compassion fatigue, burnout, or secondary trauma)
- ❖ Distraction vs Avoidance
 - We are not meant to live in the emotional effects of trauma 24/7. At times, it is adaptive and healthy to take a brain break.
 - Healthy distractions: Meeting up with friends/family, Reading, TV, Hobby, Sports/Exercise
 - Avoidance: If you find that you are not carving out any time to acknowledge and process your feelings, you may be avoiding and this can have negative long-term effects

When to Seek Further Help

- ❖ If you notice a marked decrease in functioning level that continues more than 1 month (e.g. noticeable changes in sleep, eating, wanting to connect with others, low mood, high anxiety, low motivation, self-critical thoughts, etc)
- ❖ If you are feeling disconnected from helping others (e.g. it lost meaning, you are not feeling present, devaluing your contribution, etc)
- ❖ Any sign of risk-taking behaviors to avoid (e.g. alcohol/drugs, high spending, etc)
- ❖ When the tools provided or ones you typically use are no longer working

THANK YOU!

We would be remiss to not take a moment to thank all of you for the work that you do. Whether you are a volunteer or in a helping profession, your desire to step in and help those in need have huge positive impact on our community. The people of UD have a strong sense of community which continues to be illustrated with each need presented. We encourage you to continue on this path while being mindful of the balance of personal needs and limitations. We can only be as good to others as we are to ourselves.

Resources

- ❖ <https://www.psychiatry.org/psychiatrists/practice/well-being-and-burnout/well-being-resources> APA website on burnout - has some focus on physicians but includes helpful general information on burnout in helping professions
- ❖ <https://www.helpguide.org/articles/stress/burnout-prevention-and-recovery.htm> Burnout Prevention and Treatment
- ❖ <https://cops.usdoj.gov/lemhwaresources> Information about the Law Enforcement Mental Health and Wellness Act
- ❖ <https://nicabm-stealthseminar.s3.amazonaws.com/Infographics/Anxiety/NICABM-InfoG-4strategies-for-managing-anxiety-color.pdf>
- ❖ <https://www.youtube.com/watch?v=1Ewgu369Jw> Brene Brown Empathy vs Sympathy