

The Bridge Retreat July 23 – 25, 2021

Lisa Callander, LISW-S, LICDC-S, MSW



▶ Thank you!

- For what you do
- For being here
- For taking care of yourselves so you can take care of us
- YOU ARE NOT ALONE



FIRE/EMS

911



POLICE



DISPATCH



LAW ENFORCEMENT







Why are you HERE:

“I want to help others.”

“I recognize I’m feeling burnt out.”

“I can’t stop thinking about critical incidents.”

“I want my life to be less impacted by this job/my loved one’s job.”

“I feel empty and hopeless”



- ▶ Empty?
- ▶ Overflowing?
- ▶ Full of sadness, grief, tragedy?
- ▶ Anything uplifting?

- ▶ **THERE IS HOPE!**



What we will cover this morning

Part 1: Impact of the job

Burn out/ Cumulative Stress/Critical Incident Stress
Traits that help/hurt you
Family impact

Part 2: Toolbox: Strategies for high resilience

Part 3: Traumatic stress and PTS, PTSD

Effective strategies: EMDR; CISM



Tool Box Strategies for high RESILIENCY:



COPING

What's in your toolbox?

Tool Box STRATEGY #1:



We don't always notice our own stress:

“Did somebody else die?”

Thinking about work all the time--preoccupied

Feeling of weariness and fatigue


Ran 2 red lights



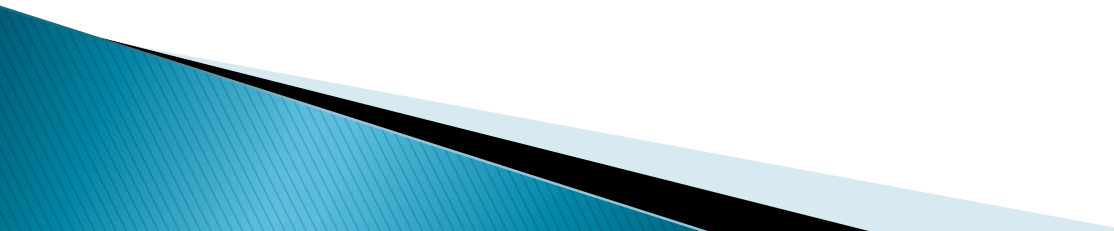
Toolbox STRATEGY #2: Your “go-to” person to keep you in check:

- 1. Do I have the courage to specifically ask another person to watch my back mentally?
- 2. Am I open to feedback?
- 3. Do I surround myself with those who will agree with me?
- 4. Do I get and remain angry and blaming those who are honest with me?
- 5. “How have I changed?”


Have you heard/said this?

- ▶ “You’ve lost your heart”
 - ▶ “You are so impatient all the time”
 - ▶ “You laugh at sick stuff”
 - ▶ **“You never listen to me”**
 - ▶ “You only see the negative stuff in life”
 - ▶ “Everything is always doom and gloom with you”
 - ▶ “You’ve changed”
- 

“Joe”

- ▶ “Can’t do this job anymore”
 - ▶ “Look and feel terrible”
 - ▶ “I’m not being a good husband, dad, friend”
 - ▶ “Can’t get the distraught families, mangled bodies, and dead people out of my head”
 - ▶ “I drink in order to sleep”
 - ▶ “I feel so empty inside”
- 

Others:

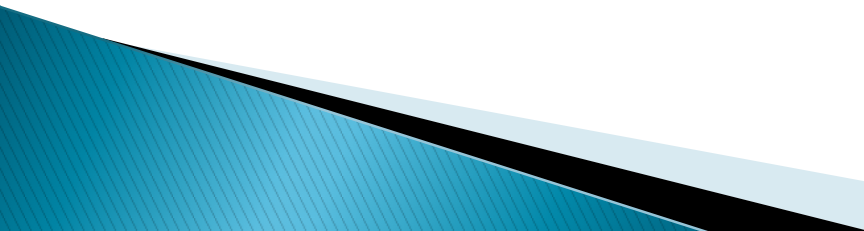
- ▶ Medic who is frustrated by repeat “band aid” and “hauling” call’s
 - ▶ Officers who are frustrated and angry about law enforcement/corrections getting bashed on social media
 - ▶ Dispatcher who feels public “takes us for granted”.
 - ▶ Spouse who feels disappointed/disconnected because loved one doesn’t share anything about the job
 - ▶ YOU ARE NOT ALONE!
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Frustrated, disillusioned,
disappointed.....

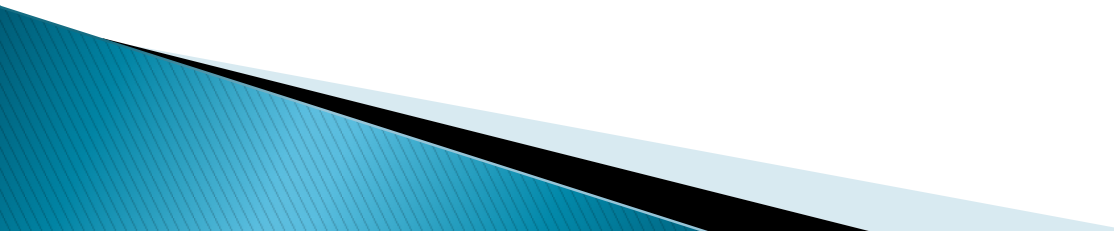


"My question is: Are we making an impact?"

The Continuum of Stress: What Burnout/Cumulative stress looks like:

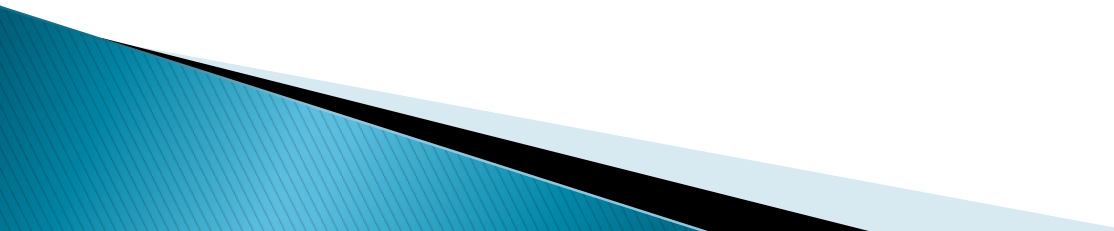
- ▶ Physical, mental, emotional exhaustion
 - ▶ Frustration, guilt, loss of sense of purpose
 - ▶ “Nothing I do makes a difference”
 - ▶ “There’s just too many _____”
 - ▶ High Cynicism, negativity
 - ▶ Disappointment, discouragement, etc.
- 

Contributing Factors:

- ▶ Repeat callers
 - ▶ Staffing/Coverage
 - ▶ High run volume
 - ▶ Administrative practices, etc.
 - ▶ Media/Social media, body cameras
 - ▶ View of public towards first responders
 - ▶ Civil unrest
 - ▶ Covid-19
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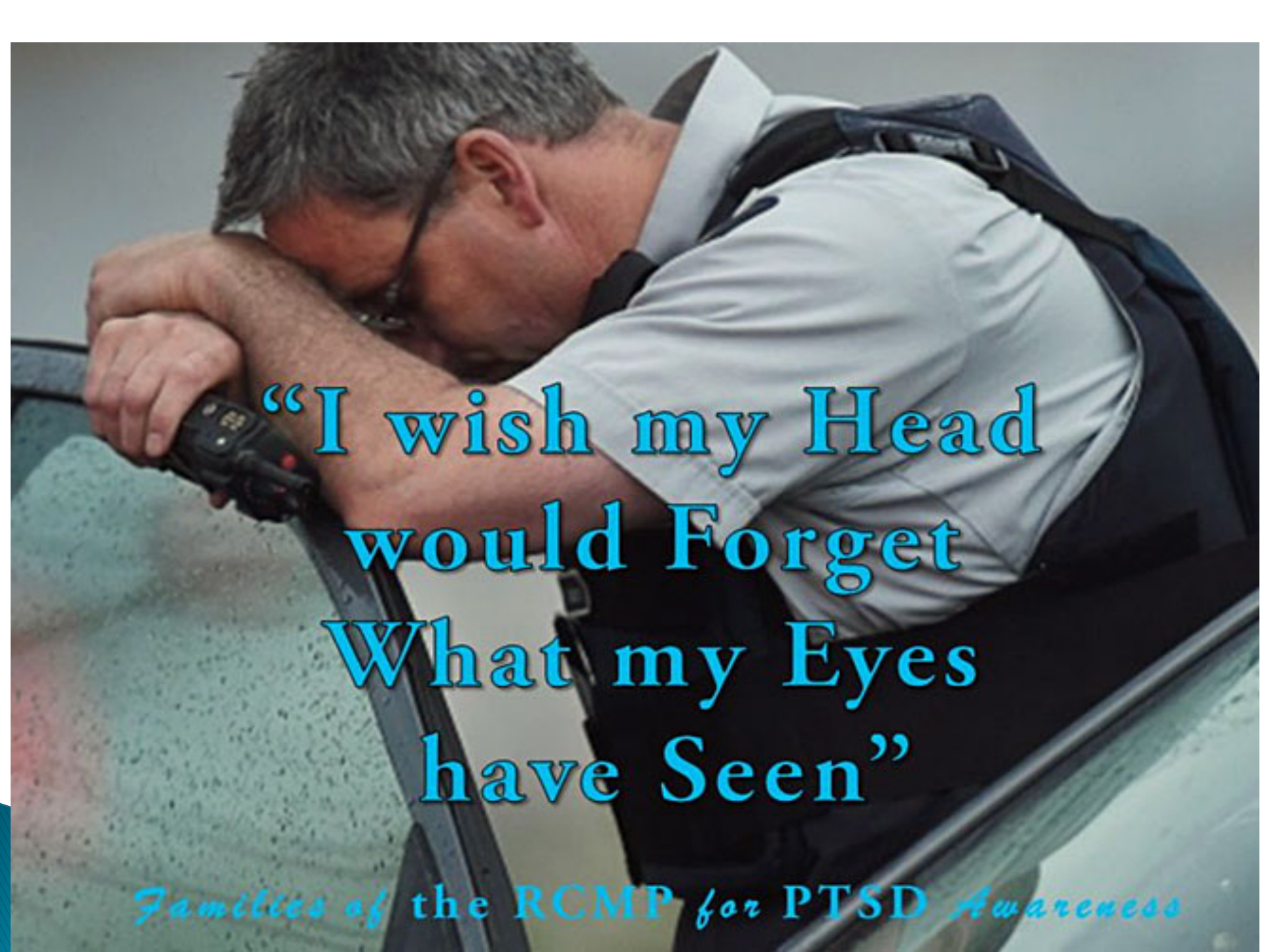
The Continuum of Stress:

Critical Incident Stress:

- ▶ Out of the ordinary incidents
 - ▶ Incidents that impact your HEART
 - ▶ Kids, peers, some connection to you personally
 - ▶ Experienced at a time when you are experiencing other things: recent death in family; depression; major life changes, etc.
 - ▶ More on this later.....
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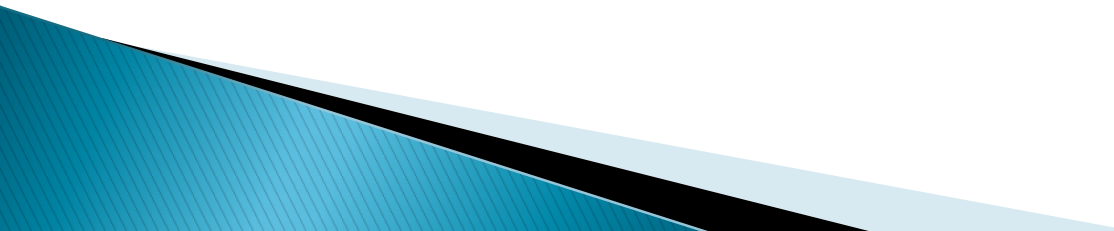
Hopelessness:

- ▶ Higher rates of suicidal ideation/attempts among all first responder's groups, than general population.
- ▶ About 10% of prison guards have considered or attempted: 3x that of general population
- ▶ Even higher among retired guards; 14%, similar to rate among military veterans.
- ▶ More suicides than line of duty deaths among all first responder groups.
- ▶ **YOU ARE NOT ALONE! YOU CAN FEEL BETTER!**

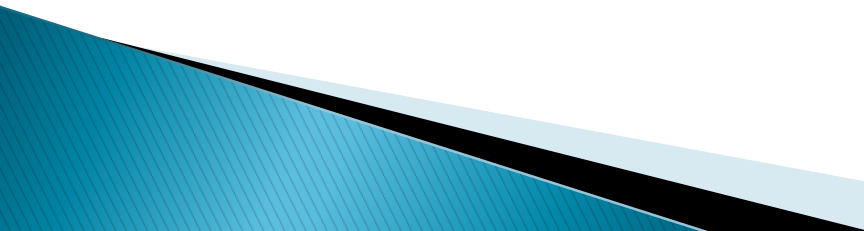


**“I wish my Head
would Forget
What my Eyes
have Seen”**

Families of the RCMP for PTSD Awareness

- ▶ Keys to avoiding burn out, cumulative stress build up, surviving the job, and having a successful and healthy family life is to adjust expectations. Be flexible. GO WITH THE FLOW.
 - ▶ This sounds good but is contrary to what we know to be usual personality traits of first responders.
 - ▶ Let's look at these:
- 

A word about personality traits of first responders:

- ▶ First responders have **GREAT** traits, that help navigate the realities of the job
 - ▶ Good and not-so-good-news:
 - These traits allow you to do the job
 - These traits sometimes prevent you from seeing how your life is being impacted by the job
 - From: Jeff Mitchell, International Critical Incident Stress Foundation (ICISF)
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Always good to be in charge?



“Must you precede everything you say with ‘This is your captain speaking?’”

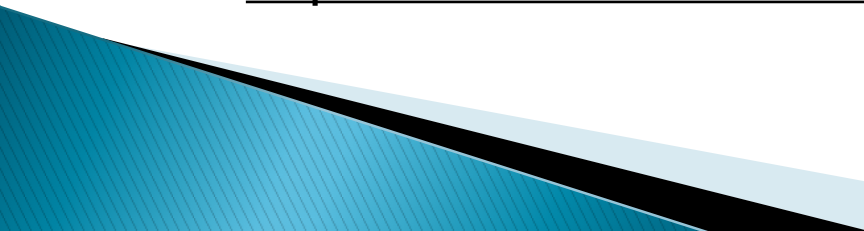
9 Traits of First Responders:

- ▶ **1. Focused and task oriented...get the job done:**
 - Can be impatient; Fixers

 - ▶ **2. Action oriented:**
 - Easily bored with routine, “normal” life stuff

 - ▶ **3. All or nothing mentality:**
 - Everything black/white (but life is mostly gray)
 - “Life is all GOOD or all BAD”

 - ▶ **4. Motivated to help:**
 - Can lose sight of oneself (airplane example)

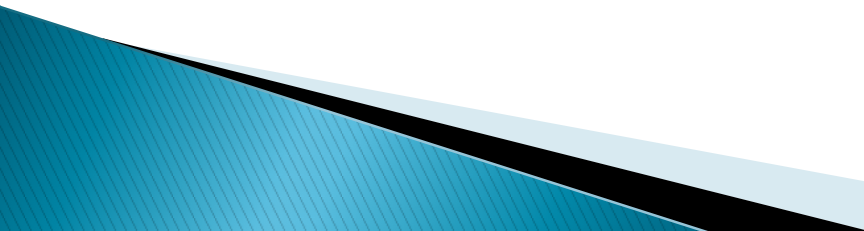
 - ▶ **5. Perfectionistic:**
 - Expectations of self and others unrealistic
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9 Traits of First Responders, cont:

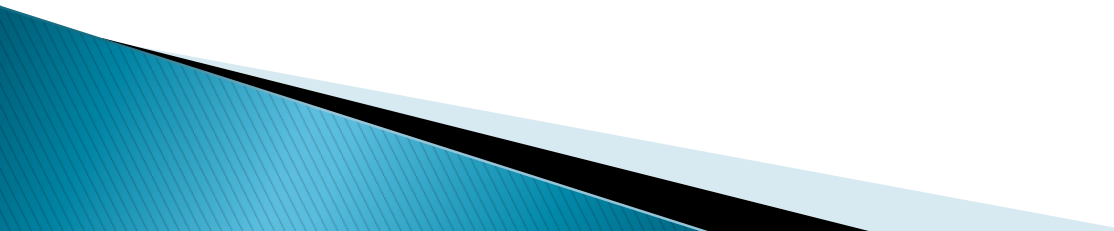
- ▶ **6. Ability to perform well under pressure:**
 - Heightened state of adrenaline becomes “usual” or normal but is exhausting. (8 years)

 - ▶ **7. Become angry at self/others for human error:**
 - Low tolerance for conflict in personal life

 - ▶ **8. Ability to function when others would be overcome by emotion:**
 - Emotional connecting in personal life gets shut down
 - Shielding is IMPORTANT to survive the job

 - ▶ **9. Accustomed to taking control of situations that are out of control:**
 - Spouse/family doesn't want you to be in charge all the time
- 

3 Useful On-Duty Coping skills (which protect your heart)

- ▶ 1. Compartmentalize: put it in the box/file folders
 - ▶ 2. Detachment: “not my kid”
 - ▶ 3. Shielding: arms distance from human emotion; protects your heart
 - ▶ Switch gears when off duty!!!!!!
- 



▶ **FAMILY LIFE**

I know what to do when the smoke clears on the job.

But what to do when that happens in our
relationship...

Well my confidence there isn't quite so high.

Maybe we could practice some drills in that?

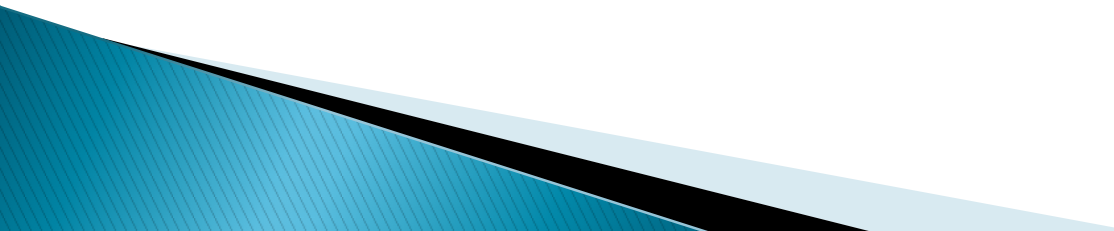
I'm willing if you are.

"Being married to a cop is so easy,"
said no police wife ever.



Impact on family:

- ▶ Checked out?

- Physically
 - Emotionally
 - Poor communication
 - Low tolerance for routine life “stuff”
 - Increase in alcohol consumption
- 

**YOU DESERVE A
LONG, and a GOOD
LIFE**



- ▶ **Must intentionally counteract the impact of the job**

EMOTIONAL SURVIVAL FOR LAW ENFORCEMENT



**A Guide for Officers
and Their Families**

Kevin M. Gilmartin, Ph.D.

"If you want to make it through to

Toolbox STRATEGY #3: Know what your body tells you about stress:

SIGNS OF STRESS

Dry Mouth

Headache

Chest Pain

Upset Stomach

Cold or Sweaty Hands

Muscle Pain

STRESS MANAGEMENT

GET ENOUGH SLEEP

RELAXATION TECHNIQUES

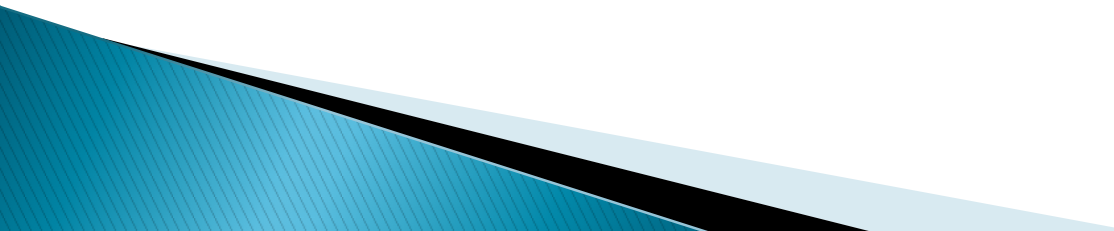
CONNECT WITH OTHERS

LAUGH & PLAY MORE

EXERCISE & EAT HEALTHY

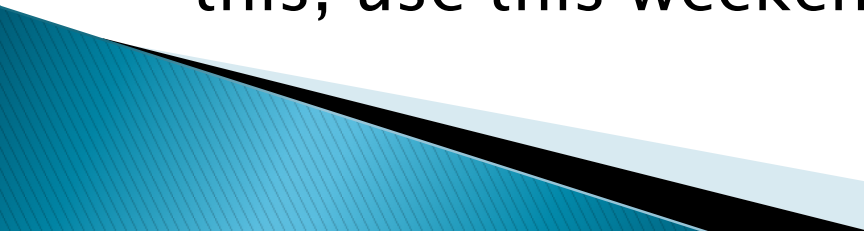
Toolbox STRATEGY #4: Maintain balance in life:

- ▶ 1. Be Disciplined about including RE-CREATION in your life
- ▶ 2. Counter the effects of being hypervigilant with scheduled “down time”
- ▶ 3. Focus on non-job-related people, things
- ▶ 4. Schedule time together
- ▶ 5. Get rest....WHENEVER YOU CAN!!!
- ▶ 6. Increase body awareness so you know when stress is building
- ▶ 7. Consider Meditation as a tool to improve relaxation response


8. Switch your routine up
 9. Schedule dates with each other
 10. Improve your spiritual life
 11. Talk with others
 12. Use a journal
 13. Get a hobby
 14. Improve how you communicate
 15. Recognize when you are impacted by a CRITICAL INCIDENT
- 

Toolbox STRATEGY #5: Reach out:

- ▶ Find providers (clinicians) that work with first responders: union, department, word of mouth, insurance?
 - ▶ Explore if your department has an EAP and make them work for you!
 - ▶ It only takes 2 to start a group
 - ▶ Connect with local CISM/Peer teams
 - ▶ Connect with first responder Chaplains
 - ▶ Retirees' lunches, etc?
 - ▶ Auxiliary groups?

 - ▶ If you've never talked with anybody about all of this, use this weekend to do this!
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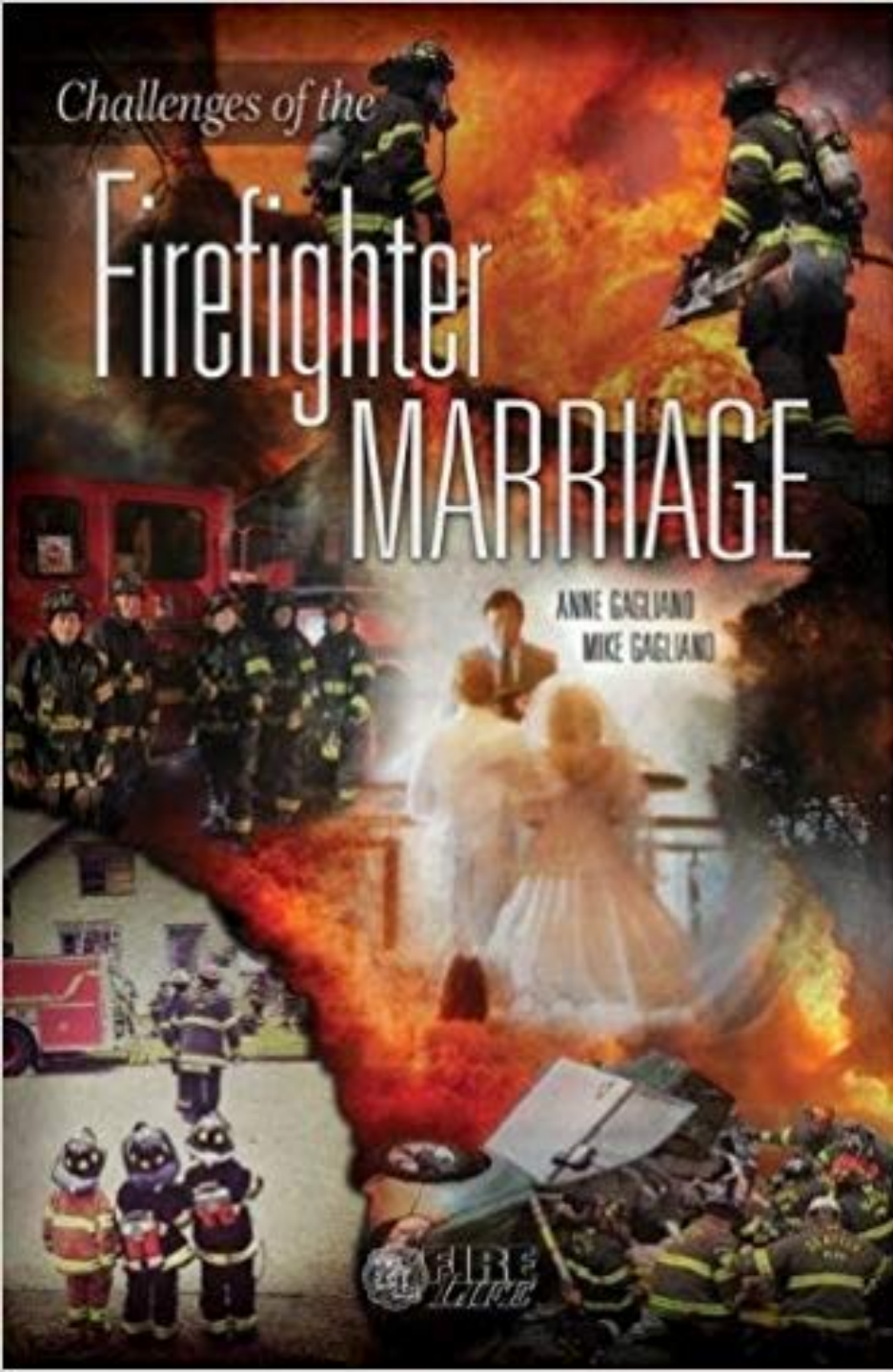
ASK YOURSELF:

- ▶ What do you enjoy? What brings you peace?
 - ▶ Where is your spirituality? How do you practice that?
 - ▶ Is your life where you want it to be?
- 

Challenges of the

Firefighter MARRIAGE

ANNE GAGLIANO
MIKE GAGLIANO



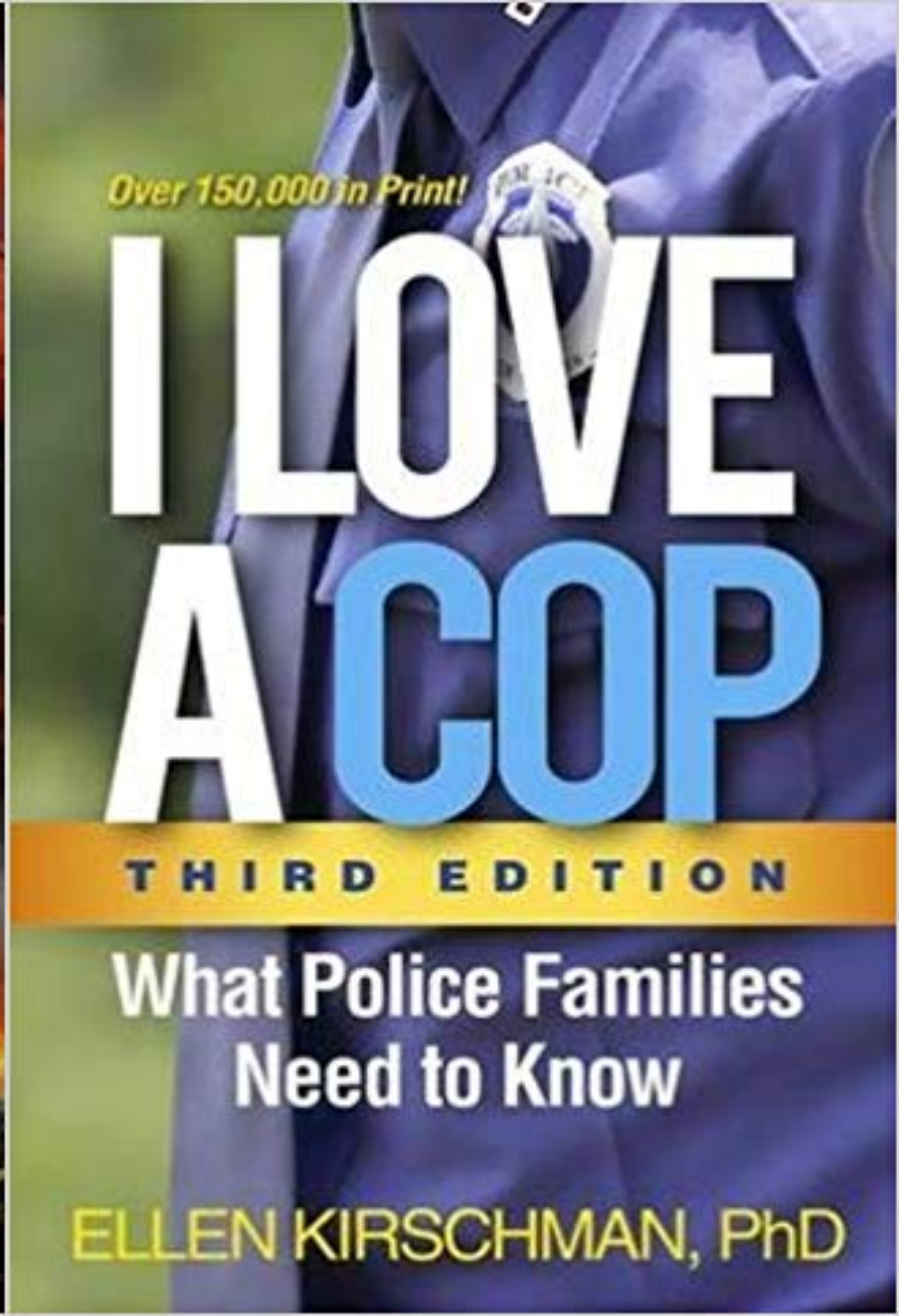
Over 150,000 in Print!

I LOVE A COP

THIRD EDITION

What Police Families
Need to Know

ELLEN KIRSCHMAN, PhD





HOW FULL IS YOUR BUCKET?

Let's make a Coping Skills Toolbox!

What is it?

A Coping Skills Toolbox is a place for you to keep things that calm you down in periods of distress. If you have everything gathered in one place, it's easier to remember to use your coping skills, rather than using negative behaviors.

Self-Soothing

(Comforting yourself through your five senses)

1. Something to touch
(ex: stuffed animal, stress ball)
2. Something to hear
(ex: music, meditation guides)
3. Something to see
(ex: snowglobe, happy pictures)
4. Something to taste
(ex: mints, tea, sour candy)
5. Something to smell
(ex: lotion, candies, perfume)

Distraction

(Taking your mind off the problem for a while)

Examples:

Puzzles, books, artwork, crafts, knitting, crocheting, sewing, crossword puzzles, sudoku, positive websites, music, movies, etc.

Opposite Action

(Doing something the opposite of your impulse that's consistent with a more positive emotion)

1. Affirmations and Inspiration
(ex: looking at or drawing motivational statements or images)
2. Something funny or cheering
(ex: funny movies / TV / books)

Emotional Awareness

(Tools for identifying and expressing your feelings)

Examples:

A list or chart of emotions, a journal, writing supplies, drawing / art supplies

Mindfulness

(Tools for centering and grounding yourself in the present moment)

Examples:

Meditation or relaxation recordings, grounding objects (like a rock or paperweight), yoga mat, breathing exercises.

Crisis Plan

(Contact info of supports and resources, for when coping skills aren't enough.)

Family / Friends
Therapist
Psychiatrist
Hotline
Crisis Team / ER
911

Put it all together!

Once you've gathered all of your items, put them together in a box or other container, decorate it to your heart's content, and put it in a place where you'll remember it. Then USE IT!

THANK YOU!

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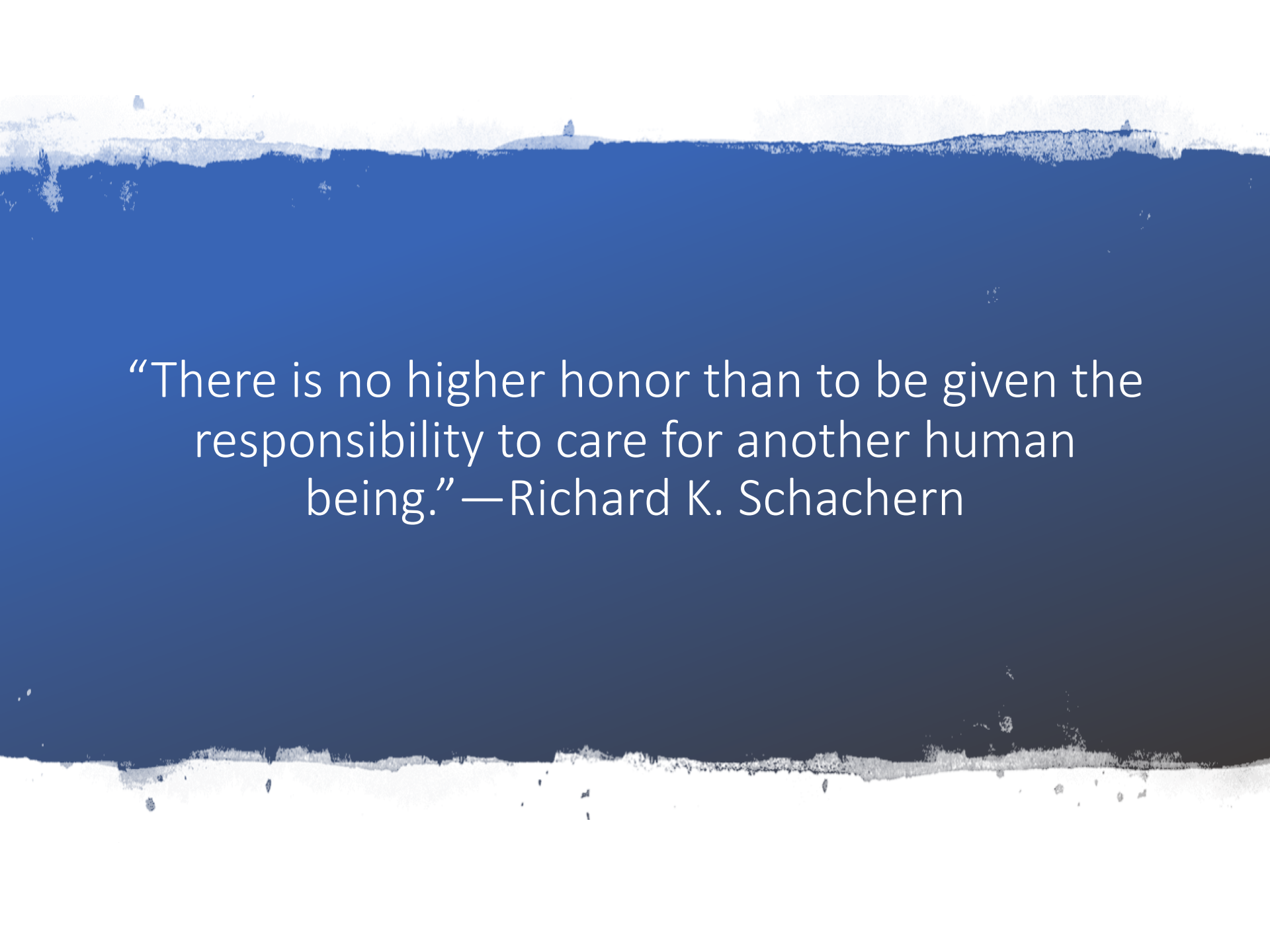




Traumatic Stress and First Responders

Carly Mesnick, LPCC-S

Mesnick Counseling and Consultation LLC



“There is no higher honor than to be given the responsibility to care for another human being.” —Richard K. Schachern

Defining Trauma

According to the US Department of Health and Human Services Substance Abuse and Mental Health Administration trauma results from "an **event**, series of events, or set of circumstances that is **experienced** by an individual as physically or emotionally harmful or life threatening and that has lasting adverse **effects** on the individual's functioning and mental, physical, social, emotional, or spiritual well-being."

Post-Traumatic Stress

- a normal response to an abnormal situation
- Adaptive strategy to survive
- When faced with and or witnessing stress, threats, unsafe or life-threatening situations our bodies automatically react.
- Reactions are heightened sympathetic defense responses of fight, flight, freeze, or parasympathetic response of collapse.
- In prolonged stress or life-threatening situations, the amygdala continues sending an alarm signal (always in heightened state)
- Symptoms can present as depression and anxiety
- Can initially be 2-4 weeks of symptoms
- High risk for first responders to experience traumatic stress
- At risk for Post-Traumatic Stress Disorder (PTSD)



Post-Traumatic Stress Disorder (PTSD)

- Diagnosable Mental Health Condition of Post Traumatic Stress
- To be diagnosed with PTSD, an adult must have all of the following for at least 1 month:

At least one re-experiencing symptom

(flashbacks, nightmares, triggers)

At least one avoidance symptom

(Staying away from places, events, or objects that are reminders of the experience, avoiding thoughts or feelings related to the traumatic event)

At least two arousal and reactivity symptoms

(easily startled, rapid breathing, increased heart rate, difficulty falling or staying asleep, anger outbursts, irritability)

At least two cognition and mood symptoms

(depressive symptoms, anxiety, memory issues)

Complex Post-Traumatic Stress

Attachment and Relationships:

- Relationship problems with family members, adults, and peers
- Problems with attachment and separation from caregivers
- Problems with boundaries
- Distrust and suspiciousness
- Social isolation
- Difficulty attuning to others and relating to other people's perspectives

Thinking & Learning:

- Difficulties with executive functioning and attention
- Lack of sustained curiosity
- Problems with information processing
- Problems focusing on and completing tasks
- Difficulties with planning and problem-solving
- Learning difficulties
- Problems with language development

Physical Health: Body & Brain:

- Sensorimotor developmental problems
- Analgesia
- Problems with coordination, balance, body tone
- Somatization
- Increased medical problems across a wide span
- Developmental delays/regressive behaviors

Behavior:

- Difficulties with impulse control
- Risk-taking behaviors (self-destructive behavior, aggression toward others, etc.)
- Problems with externalizing behaviors
- Sleep disturbances
- Eating disturbances
- Substance abuse
- Oppositional behavior/difficulties complying with rules or respecting authority
- Reenactment of trauma in behavior or play (e.g., sexual, aggressive)

Emotional Responses:

- Difficulty with emotional self-regulation
- Difficulty labeling and expressing feelings
- Problems knowing and describing internal states
- Difficulty communicating wishes and needs
- Internalizing symptoms such as anxiety, depression, etc.

Dissociation:

- Disconnection between thoughts, emotions and/or perceptions
- Amnesia/loss of memory for traumatic experiences Memory lapses/loss of orientation to place or time
- Depersonalization (sense of being detached from or "not in" one's body) and derealization (sense of world or experiences not being real)
- Experiencing alterations or shifts in consciousness

Self-Concept & Future Orientation:

- Lack of a continuous, predictable sense of self
- Poor sense of separateness
- Disturbances of body image
- Low self-esteem
- Shame and guilt
- Negative expectations for the future or foreshortened sense of future

PTS and PTSD

Several Risk Factors include:

- Having a job that exposes them to traumatic events
- Experiencing intense trauma
- Having feelings of helplessness or fear
- Seeing people get killed or hurt

Symptoms of PTS and PTSD

- Intrusive memories, dreams, or flashbacks of a specific incident
- Refusing to talk about a traumatic event
- Losing interest in activities
- Avoiding places where a traumatic event occurred
- Feelings of hopelessness, guilt, or low self-worth
- Distancing themselves from others-Isolation
- Feeling tense or on-edge all the time

Symptoms of PTS and PTSD

- Sleep disturbances
- Paranoia or overwhelming fear
- Irritability or aggressive outbursts
- Inability to focus
- Reduced work performance or missed days
- Increased alcohol or drug consumption
- Unreasonable reactions to average situations
- Risky, dangerous, or self-destructive behavior
- Suicidal thoughts, feelings, and behaviors

“Act Now and Feel Later” Mentality

- Trauma is a sensory experience, and no trauma and reaction is the same for everyone
- Delayed Onset of Symptoms- 6 months or more after an event or series of events
- When one is chronically exposed to traumatic stress on a daily basis, hard to pinpoint the major triggering event as “the trauma.”
- Stigma and stoicism- an expectation that first responders are expected to not be impacted by the events to which they respond and don't need assistance in managing their traumatic stress.

Stress Continuum Model

READY (Green)

DEFINITION

- ◇ Optimal functioning
- ◇ Adaptive growth
- ◇ Wellness

FEATURES

- ◇ At one's best
- ◇ Well-trained and prepared
- ◇ In control
- ◇ Physically, mentally and spiritually fit
- ◇ Mission-focused
- ◇ Motivated
- ◇ Calm and steady
- ◇ Having fun
- ◇ Behaving ethically

REACTING (Yellow)

DEFINITION

- ◇ Mild and transient distress or impairment
- ◇ Always goes away
- ◇ Low risk

FEATURES

- ◇ Feeling irritable, anxious or down
- ◇ Loss of motivation
- ◇ Loss of focus
- ◇ Difficulty sleeping
- ◇ Muscle tension or other physical changes
- ◇ Not having fun

CAUSES

- ◇ Any stressor

INJURED (Orange)

DEFINITION

- ◇ More severe and persistent distress or impairment
- ◇ Leaves a scar
- ◇ Higher risk

FEATURES

- ◇ Loss of control
- ◇ Panic, rage or depression
- ◇ No longer feeling like normal self
- ◇ Excessive guilt, shame or blame

CAUSES

- ◇ Life threat
- ◇ Loss
- ◇ Moral injury
- ◇ Wear and tear

ILL (Red)

DEFINITION

- ◇ Clinical mental disorder
- ◇ Unhealed stress injury causing life impairment

FEATURES

- ◇ Symptoms persist and worsen over time
- ◇ Severe distress or social or occupational impairment

TYPES

- ◇ PTSD
- ◇ Depression
- ◇ Anxiety
- ◇ Substance abuse

Healing PTS and PTSD

- PTS and PTSD are not life sentences for first responders and their families
- Learn more about PTS and PTSD to help deal with it ongoing
- Talk to someone (family, friend, partner, professional)
- Improve physical health- monitor somatic symptoms (stomach aches, headaches)
Nutrition
- Lean on others for help- spend time with people who make you feel good (friends, family, role models)
- Join a support group
- Learn relaxation skills
- Monitor your symptoms- write down what you are thinking and feeling
- Take part in positive activities and continue to do regular routines
- Use healthy distractions like sports, exercise, netflix, reading

Healing is Hopeful

- Recognize your wearing down or drained and do something every day that recharges you
- Take care of yourself- take time off, yes time off
- Take on a project that doesn't involve work
- Learning mindfulness meditation is an excellent way to ground yourself in the moment and keep your thoughts from pulling you in different directions. The ability to reconnect with a spiritual source will also help you achieve inner balance
- Be spiritual- whatever this means to you
- Build resilience into your daily routine- There is Hope
- Shifting the thoughts from "what is wrong with me?" → "what is going on with me?"

Talking to a Professional

- You keep us safe in many ways, who helps to keep you safe so you can better serve the community?
- Professional assistance may be needed to heal post-traumatic stress and PTSD
- This could be inclusive to a case manager, counselor, therapist, clinician, psychiatrist, nurse practitioner, psychologist, medical provider, and other helping professionals.
- Relationship and Trust
- Confidentiality
- Individual, Group, Family

My Contact Information

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www.mesnickcounselingconsultation.com

References

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- SAMHSA