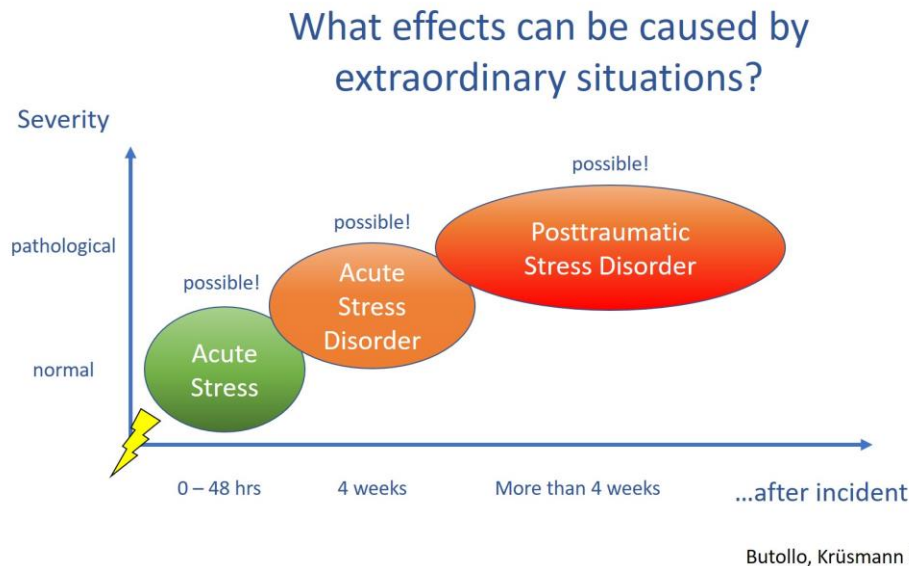


## Recommendations for coping with people after critical

incidents (based on recommendations by the “Bundesamt für Bevölkerungsschutz und Katastrophenhilfe”)



Close to the incident, the reactions of affected people can vary between **feeling overwhelmed and avoidance**.

Fischer und Riedesser (1998) define this trauma as *a vital discrepancy of experience between threatening situational factors and a lack of coping options*. The support is meant to minimise the feeling of threat and activate the chances of coping.

### Acute Phase (0-48 hours) after the traumatising incident:

Affected people are in a psychological state of emergency (Feeling overwhelmed and flooded with helplessness, fear, dismay, disorientation, massive stress reactions, avoidance (unwillingness to accept)...) )

#### **Goals of the interventions:**

- Protection and Safety
- Information, orientation and structure

#### **Actionable measures:**

- Gathering as much information as possible
- Actively contacting affected people
- Eye contact, calm voice, optionally touching the shoulder

- Go to a safe place, create opportunity for a conversation
- Ascertain needs
- Take time
- In case of avoidance: Person often seems outwardly calm and controlled, care is nevertheless important – observe how things proceed – a sense of feeling overwhelmed can occur suddenly
- Shield from spectators / media representatives

### **Reactions – Signs of an acute stress reaction/disorder up to four weeks after an incident**

Directly after an exceptionally stressful event, the following reactions may occur, for example:

- Helplessness
- Fear
- Despondency
- Feelings of guilt
- Severe moodiness
- Loss of orientation
- Being at a loss
- Inability to carry out ordinary tasks

**Following an exceptionally stressful event, these and similar reactions are normal.** The reactions will usually diminish after a few days.

Sometimes additional conditions can occur, like e.g.:

- Severe nervousness, jumpiness
- Sleeping disorders, nightmares
- Sense of futility, hopelessness
- Memory gaps, lack of concentrativeness
- Tormenting memories or emerging images
- Loss of appetite, fatigue
- Craving for alcohol or sedatives

Typically, these reactions will lessen from week to week, as well.

**If you are unsure on how to judge someone's condition, reach out for professional help (find contact below)**

### **What can affected persons do for themselves – what should they be aware of?**

If you have gone through an exceptionally stressful incident, it **can** be helpful to allow yourself some time to rest, in order to come to terms with the experience and recover.

- Take attentive note of your current needs and allow time for them.
- Do not suppress your feelings, speak with people you trust.
- Try to return to your ordinary routine as soon as possible.
- Do not expect time to erase your memories, it is normal for your current feelings to preoccupy you for a longer period.
- Spend time on things that you generally enjoy and help to relax you.
- Do not hesitate to get psychological help.

**CAVE: It may happen that events are so traumatising that it is advisable to make use of professional help. This is especially the case if the above-mentioned reactions last for more than four weeks**

Particular symptoms of this are if:

- you have the impression that your feelings and emotions do not return to normal.
- you are tormented by nightmares or keep suffering from sleeping disorders.
- you often have unbidden recollections of the incident
- you avoid certain situations or places, which remind you of the incident.
- since the incident, your use of tobacco, alcohol, drugs or medications has increased.
- your work performance has permanently decreased
- your relationships have considerably suffered, or sexual issues have developed.
- you cannot speak to anybody about your feelings, even though you want to.

Take these signals seriously. In these cases, it is especially important to accept professional, external help to avoid serious complications (e.g. posttraumatic stress disorder).

**You can talk to:**

**Stefanie Lützen (Dipl. Psych.)**

Tel: +49-(0)151-23605602

[stefanie.luetzen@gmx.de](mailto:stefanie.luetzen@gmx.de)