You’ve just had a very difficult experience. It’s common for people to experience emotional and physical aftershocks after a traumatic event. Don’t be worried – you are not going crazy. These are NORMAL reactions of NORMAL people going through a NORMAL recovery from a very ABNORMAL situation. It’s not only okay, it’s completely acceptable to feel the way you do.

Sometimes these emotional and physical aftershocks (or stress reactions) appear immediately after the traumatic situation. Sometimes they appear a few hours or a few days later. In some cases, weeks or months may pass before the stress reactions appear. Everyone is different.

The signs and symptoms of a stress reaction may last a few days, a few weeks or a few months, and occasionally even longer depending on the severity of the traumatic event. With the understanding and support of loved ones and co-workers, these reactions usually pass more quickly. Occasionally, the traumatic event is so painful that professional assistance from a counselor is necessary. This does not imply craziness or weakness. It only indicates that the event was simply too powerful to manage on your own. If these symptoms persist or worsen over time, professional help can prevent permanent damage to your ability to cope with the stress.

Here are some very common signs and symptoms of a stress reaction in a traumatized person.

**Physical**
- Nausea
- Upset stomach
- Tremors (lips, hands)
- Feeling uncoordinated
- Profuse sweating
- Chills
- Diarrhea
- Chest pain (should be checked at hospital)
- Rapid heartbeat
- Rapid breathing
- Increased blood pressure
- Headaches
- Muscle aches
- Sleep disturbances

**Mental**
- Seeing the event over and over (flashbacks)
- Slowed thinking
- Difficulty making decisions
- Difficulty problem-solving
- Confusion
- Disorientation (especially to time and place)
- Difficulty calculating
- Difficulty concentrating
- Memory problems
- Difficulty naming common objects
- Distressing dreams
- Poor attention span

**Emotional**
- Anxiety
- Fear
- Guilt
- Grief
- Depression
- Sadness
- Feeling lost
- Anger
- Feeling numb
- Feeling startled
- Shock
- Apathy

**Behavioral**
- Feeling abandoned
- Isolation
- Worrying about others
- Wanting to hide/withdrawal
- Wanting to limit contact with others
- Irritability
- Unusual anger
- Prolonged silence
- Change in eating habits
- Decreased personal hygiene
- Paranoia

No one can deny that this was a difficult experience for you, but it’s important to know that, like the flu, your reactions will run their course and you will feel better in time if you continue to “talk out” your feelings and reactions. Withdrawal and “bottling things up” can prolong your recovery and make it more difficult. This is especially true if you’ve been involved in other unresolved traumatic events or if your personal life is currently not stable. When it’s especially tough, remember: it’s okay to feel the way you do. Express any fears or feelings and get professional help if it doesn’t get better.
The incident you’ve just experienced was a shock to your system and your reactions are NORMAL. These reactions may last for a few days, a few weeks or even a few months. Try some of the following to reduce the emotional pain of the incident you experienced.

- Exercise vigorously within a day or two of the incident; alternate with relaxation.
- Structure your time and keep busy; maintain normal routines.
- Talk with people: your family, friends and co-workers.
- Don’t numb yourself with alcohol or drugs.
- Spend some time with others.
- Give yourself permission to feel rotten and to tell others you feel that way.
- Keep a journal; this is particularly helpful to pass any sleepless hours.
- Do things that you especially enjoy.
- Don’t make any major life changes or decisions for awhile.
- Do make as many daily decisions as possible to reassert your sense of control.
- Get plenty of rest.
- Eat well-balanced and regular meals, even if you don’t feel like it.
- Don’t fight recurring thoughts, images, flashbacks or dreams – they will decrease with time.
- Help coworkers by asking how they are doing and sharing your feelings about the incident.
- Reach out to others – people do care.
- Remember, there is no set timeframe for your reaction to the trauma to subside; each person’s situation is different, so be patient.

If you have trouble sleeping, try some of these things:

**For difficulty getting to sleep:**

- Avoid caffeine in coffee at least seven hours before bed; caffeine from tea, soda and chocolate should be cut off three hours before bed.
- Do some gentle stretching exercises before bed.
- Have a glass of milk before bed.
- Avoid naps in the late afternoon or evening.
- Listen to relaxing music or a relaxation tape before bed.

**For waking up at night:**

- Get up and have a glass of milk.
- Don’t toss and turn for more than fifteen minutes – get up and do something productive or just enjoy the peace and quiet of the night.

**For disturbing dreams:**

- When you wake up with a thought-provoking dream, write down what it was about.
- Turn on a light, look around and get up to “shake” the intense feeling of the dream.
- Imagine your own ending to the dream.

**For waking too early:**

- Get up early and enjoy the morning.
- Go to bed later so you can sleep later.
- Maintain a routine of going to bed and getting up at the same time.
Sudden catastrophic events occur without warning and have the potential to severely impact you and your community. The following information can help you deal with this critical event. We encourage you to share this information with your family and friends.

- For the next several weeks, you and the people you care about may experience feelings of pain and hurt. No one is prepared to deal with such a catastrophic occurrence. You may experience feelings that are very different from any you have felt before.
- Find people to talk with you about the incident. Talking helps release the tension and put the incident into perspective. Refusing to talk can increase feelings of isolation and the feeling that “no one cares.” The world cannot read your mind. Your family, fellow employees and friends do not know what you are feeling unless you tell them.
- Try not to be alone. Find someone to be with during the first few days following the incident. Being alone can increase thoughts of isolation and the idea that you are the only one feeling this way.
- You may find that you’re overprotective of your family, and specifically, your children. This is to be expected and is okay. Your sense of control has been severely threatened, and you may feel very vulnerable. As you get further away from the incident, the feeling will be more controlled. Talk with your family members about your need to be overprotective. Allow them the opportunity to understand and accept your actions.
- Avoid violent television programs, movies and books for the next month. This type of activity may produce some of the same feelings that occurred after the incident.
- It’s important to limit your consumption of alcohol and other substances that may alter your state of mind. Using these substances can provide temporary relief from your anxiety, but it only delays the natural and healthy process of coping with the incident.
- You may experience changes in your sleep pattern. Sleeping can be difficult because of the fear that dreams will contain thoughts related to the incident. Expect that it will take you twice as long to fall asleep. If you still have difficulty falling asleep in a reasonable period of time, try moving to a different room to watch television or listen to the radio. It is important to avoid associating your bedroom with disturbing thoughts.
- Make sure you are getting enough exercise. A regular exercise routine helps reduce stress.
- It’s extremely important to realize you will not feel like this forever. You have experienced a traumatic situation. Your body is slowly adjusting to the results of the incident.

“The essence of psychological trauma is the loss of faith that there is order and continuity in life. Trauma occurs when one loses the sense of having a safe place to retreat within, or outside of oneself to deal with frightening emotions or experiences. This results in a state of helplessness, a feeling that one’s actions have no bearing on the outcome of one’s life.” – Dr. Bessel Van Der Kolk

REMEMBER, CRITICAL INCIDENT STRESS IS HOW A NORMAL PERSON’S BODY AND MIND COPES WITH AN ABNORMAL SITUATION. IF FEELINGS ARE SHARED, UNDERSTOOD AND ACCEPTED, RECOVERY WILL BE MORE RAPID.
Reactions to Loss and Death

By Alan T. Sturm, R.N., C.,
Clinician Geriatric Nurse

Death is often considered an event, but is more appropriately considered a process. Loss -- whether it is the loss of a loved one, home, employment, body limb, functional or emotional ability -- like death may be experienced in the same manner.

The process of loss or death is usually broken up into three important parts: bereavement, grief and mourning. Bereavement is defined as the state of having suffered the loss of a loved one, usually a family member. However, many people also suffer from the loss of animals.

Grief refers to the psychological and physical reactions directly related to the loss. Mourning refers to how the bereaved person expresses grief within his or her cultural or religious background. Previous life experiences determine the way individuals cope with losses, and this influences the grief process.

Symptoms of grief may be physical and/or mental (emotional). Not everyone experiences all of these symptoms or reactions, which may vary in their frequency and intensity, coming and going for short periods of time.

Grief and mourning have been identified in three stages. The first stage includes an initial response-shock, disbelief, feelings of emptiness, numbness and confusion. This early stage of grief serves to protect the person from overwhelming pain. It is followed by sorrow, which can last several weeks. The survivor may find themselves weeping and crying easily, responding to physical symptoms (such as loss of appetite and sleep) and experiencing behavioral responses by taking depressants and/or keeping extremely active.

The second stage, known as the intermediate phase, may start around three weeks after death and lasts approximately one year.

This can be an extremely difficult stage since the survivor frequently finds himself dwelling on one aspect or situation related to the death, often trying to understand the meaning of death and feeling that the deceased person is present.

The last phase, recovery, is often a time when the survivor moves on with living, becoming increasingly social and developing new skills. Many people find themselves making new friends and gaining a personal strength, realizing that grief can be good, not always bad. Of course, there are grief reactions that are considered unusual, morbid and are labeled as pathological. Stages and symptoms last longer and are more severe. Depending on their coping abilities, some people turn to substance abuse and/or have symptoms or major depression.

Bereavement groups can be very useful during times of grief. (Note: Your Laborers’ Member Assistance Program [MAP] or local community mental health organization can help you find an appropriate resource in your community.)
TIME
This includes time alone and time with people you trust who will listen when you need to talk. It may take months or years to feel and understand the feelings that go along with loss.

REST - RELAXATION - EXERCISE - NOURISHMENT - DIVERSION
You may need more of these things than you needed before. Hot baths, afternoon naps, a trip, a “cause” to work for to help others – any of these may give you a lift. Grief is an exhausting process emotionally. You need to replenish yourself. Follow what feels healing to you and what connects you to the people and things you love.

SECURITY
Try to reduce or find help for financial or other stress in your life. Allow yourself to be close to those you trust. Getting back into a routine helps. You may need to allow yourself to do things at your own pace.

HOPE
You may find hope and comfort from those who have experienced a similar loss. Knowing things that helped another person and realizing that they have recovered may give you hope that in the future, your grief will be less raw and painful.

CARING
Try to allow yourself to accept expressions of caring from others even though they may be uneasy and awkward. Helping a friend or relative suffering the same loss may bring a feeling of closeness with that person.

GOALS
For a while, it may seem that much of life is without meaning. At times like these, small goals are helpful. Something to look forward to, like playing cards with friends next week, a movie tomorrow night or a trip next month, can help you through in the immediate future. Living one day at a time is a good rule of thumb. At first, don’t be surprised if your enjoyment of these things isn’t the same. This is normal. As time passes, you may need to work on some longer range goals to give some structure and direction to your life. You may need guidance or counseling to help with this.

SMALL PLEASURES
Do not underestimate the healing effects of small pleasures. Sunsets, a walk, a favorite food – all are small steps toward regaining your pleasure in life itself.

PERMISSION TO BACKSLIDE
Sometimes after a period of feeling good, we find ourselves back in the old feelings of extreme sadness, despair or anger. This is often the nature of grief, up and down, and it may happen over and over for a time. It happens because we cannot take in all of the pain and the meaning of death at once, so we let it in a little at a time.

ALCOHOL OR DRUGS ARE NOT HELPFUL
Even short-term medication used to help people get through periods of shock under a physician’s guidance may prolong and delay the necessary process of grieving by masking its symptoms. We cannot prevent or cure grief. The only way to recover from the grieving process is to work through it and seek professional grief counseling, if necessary.