I. **Active Listening Skills**

- demonstrate understanding and remember your tone of voice

**Purpose:**

a. lower emotions and return subject to “normal”

b. encourage behavioral change

c. gather information

d. establish rapport and influence

**Techniques:**

a. emotional labeling -
   
   listen to the facts and hear the emotion then give it back to him
   
   “you sound angry….”
   
   “you seem hurt….”
   
   “you sound betrayed…abandoned etc….”
   
   “I didn’t say you were angry, I said you sound angry…”

b. paraphrasing
   
   used to confirm meaning and display attentiveness
   
   subject: “she’s always talking and doesn’t pay attention to what I say”
   
   negotiator: “she doesn’t listen to you”

c. mirroring / reflecting
   
   good initial technique to repeat the last few words especially if subject is ranting
   
   and raving
   
   subject: “she doesn’t pay attention to what I say to her and it makes me angry”
   
   negotiator: “It makes you angry.”

d. summary
   
   Periodically covering the main points, it’s his story & his feelings in your words
   
   “Ok, what you’ve told me so far is this…..and as a result you feel….. Do I understand correctly?”

e. open ended questions
   
   What ...?, When...? How...?

f. minimal encouragers
   
   periodically “Uh-huh.....really?” “yeah” “OK” etc
   
   when subject is speaking for an extended time
   
   subject may be used to hearing them when others were not “listening” to him

g. effective pauses
   
   immediately before or after saying something meaningful
   
   can be an appropriate response to anger followed by an “I” message

h. “I” messages
   
   used to confront the subject about behavior that is counterproductive
   
   “when you yell at me it makes me feel frustrated because it stops me from
   
   listening to you”
   
   “when you ....I feel.....because...”
   
   “when you scream at me I find it difficult to listen to you”
Critical Incidents

1. Suicide of a colleague

2. Line of duty death

3. Serious line of duty injury

4. Disaster/multiple casualty incident

5. Police shooting/accidental killing or wounding of an innocent person

6. Significant events involving children

7. Prolonged incidents, especially with a loss of life

8. Personally threatening situations

9. Events with excessive media interest

10. Any significant event capable of causing considerable emotional distress for those who are exposed to it
GREATER BOSTON CISM TEAM
THINGS YOU CAN DO TO HELP YOURSELF

Available 24/7

These are some suggestions. You know yourself best and know what works for you, but we have found these are most helpful for emergency services personnel.

- Within the first 24-48 hours, periods of mild, aerobic exercise alternating with relaxation to alleviate some of the physical and emotional reactions.

- Structure your time – keep busy.

- Make as many every day decisions as possible that will give you a feeling of control in your life.

- You’re normal and having normal reactions – do not label yourself as crazy.

- Be aware of numbing the pain with overuse of drugs or alcohol. You don’t need to complicate this event with a substance abuse problem.

- Reach out – people do care.

- Spend time with people who make you feel good.

- Give yourself permission to feel rotten.

- Help yourself and your co-workers by checking in with each other and see how they are doing. Just remember not to smother others.

- Get some rest.

- When you can’t sleep, think about writing down your thoughts to release them.

- Do not make any life changing decisions during or immediately following a critical incident.

- Recurring thoughts, dreams or flashbacks are very common. Talk to someone.

- Eat small, well-balanced meals, even if you may not feel very hungry.
# GREATER BOSTON CISM TEAM

## CRITICAL INCIDENT STRESS REACTIONS

Available 24/7

This is a short list of some common stress reactions. These reactions usually subside in 3 - 6 weeks. Call us if you're still experiencing these after 6 weeks. Follow up services may need to be considered.

### PHYSICAL
- *Fatigue*
- Nausea
- Muscle tremors
- Twitches
- Elevated BP
- Rapid heart rate
- Thirst
- Headaches
- Visual difficulties
- Vomiting
- Teeth grinding
- Weakness
- Profuse sweating
- Fainting
- Chest pain, shock symptoms
- Difficulty breathing

### EMOTIONAL
- Anxiety
- Guilt
- Denial
- Severe pain
- Emotional shock
- Fear
- Uncertainty
- Loss of emotional control
- Depression
- Apprehension
- Feeling overwhelmed
- Intense anger
- Agitation
- The "emptied out" feeling

### BEHAVIORAL
- Change in activity
- Change in speech patterns
- Withdrawal
- Emotional outbursts
- Suspiciousness
- Change in communication
- Loss or increase in appetite
- Alcohol or substance abuse
- Restlessness
- Irritability
- Non-specific body complaint
- Startle reflex
- Pacing
- Erratic movements
- Changes in sexual functioning or needs
- Road rage

### COGNITIVE
- Blaming someone
- Confusion
- Poor decisions
- Heightened or lowered alertness
- Poor concentration
- Memory problems
- Hyper vigilance
- Increased or decreased awareness of surroundings
- Poor problem solving
- Difficulties identifying familiar objects or people
- Intrusive images

*Any of these may indicate a need for medical evaluation.*
Your loved one has been involved in an emotionally charged event, often known as a critical incident. S/he may be experiencing normal stress responses to such an event. No one is immune to critical incident stress, regardless of past experiences or years of service. Your loved one may experience critical incident stress at any time during his/her career.

- The signs of critical incident stress are cognitive, physical, emotional, behavioral, and spiritual. Your loved one has a handout explaining these. Ask to share it with you.

- Critical incident stress responses can occur immediately, within hours, days or even after weeks after the incident.

- Your loved one may experience a variety of signs and symptoms of a stress response or they may exhibit only one sign at a time.

- Suffering from the effects of a critical incident is completely normal. Your loved one is not the only one suffering – colleagues who shared the event are probably suffering with their reactions as well.

- Symptoms usually subside and disappear in time, sometimes with help. Don’t be afraid to reach out for help. The MBCISM Team is available for family assistance. We can make the appropriate referrals.

- All phases of our life overlap and influence each other – personal and professional. The impact of critical incident stress can be intensified, influenced or mitigated by our own personal, family and current life issues.

- Encourage, but do not pressure, your loved one to talk about the incident and his or her reactions to it. Talk is the best medicine. Your primary role here is to listen and reassure.

- Ask your loved one what would be most helpful during this time and try to accommodate his or her needs.

- If the signs and symptoms of distress do not subside after a few weeks, consider asking your loved one to seek further assistance. We can help you find a professional who understands, is knowledgeable and can guide you through this process.