There are two main kinds of responder stressors you can expect. Planning your response to these stressors will maximize your resilience during disasters.

“Traumatic Response Stress” can include exposure and loss factors such as:

- Witnessed severe burns, dismemberment or mutilation
- Witnessed pediatric death(s) or severe injuries
- Witnessed an unusually high number of deaths
- Responsible for expectant triage decisions
- Injury, death or serious illness of coworkers
- At work, you were treated for injury or illness
- Felt as if your life was in danger

These current stressors may also be “Trauma Triggers”, activating memories of other past experiences or losses.

“Cumulative Response Stress” can include factors such as:

- Exposure to patients screaming in pain/fear
- Forced to abandon patient(s)
- Unable to meet patient needs (such as patient surge, crisis standards of care)
- Direct contact with grieving family members
- Asked to perform duties outside of current skills
- Hazardous working conditions (such as extreme shift length, compromised site/safety or security or lack of PPE)
- Unable to return home
- Worried about safety of family members, significant others or pets
- Unable to communicate with family members or significant others
- Health concerns for self due to agent/toxic exposure (infectious disease, chemical, radiological nuclear, etc.)

These current stressors may also be “Trauma Triggers” that activate memories of past experiences or losses.

List what you think the most stressful aspects of working on a disaster will be for you. (If you are unsure what you might find stressful, review situations typically experienced by healthcare workers shown on the PsySTART Staff Self Triage System in this brochure).

1.
2.
3.
4.
5.

Everyone has different ways of coping with stress. What positive ways of managing stress works best for you every day? What positive ways of managing stress do you think will work for you following a disaster? Strategies you might consider include limiting your exposure to media reports, focusing beyond the short term, taking frequent short breaks. List your healthy coping plan here:

1.
2.
3.
4.

People often find that there are some positive things about working on a disaster. For example, people might feel good about being able to “make a difference” when their community needs them most.

Positive resilience factors help you as a healthcare worker to cope better with the stressors associated with responding to a disaster in your facility or community. Below please list positive factors that might give you a sense of mission or purpose following a disaster:

1.
2.
3.
4.
Monitor your stress reactions and activate your Coping Plan (see step 2) early to maximize your resilience during a disaster response. Fill out and review the PsySTART Staff Self Triage form at the end of the disaster (for a one day disaster response) or at the end of your shift each day (for a disaster response that occurs over a number of days). If you have any of the PsySTART stress factors present:

Review your Personal Resilience Plan, including activating your positive coping plan. If you have not already done so, consider your co-workers as part of your Social Support Plan. Know who to call in your facility if you find that you are dealing with a particular stressor(s) or your reactions to the stressors are intense, disruptive, or lasts longer than a few days or weeks.

Consider visiting Bounce Back Now™ a confidential internet self-help tool as an additional resource for your post disaster coping at: www.bouncebacknownyc.org

Monitor your stress during the disaster response and activate your responder resilience plan early. Review and revise your plan to maximize your resilience.

Know whom to call for additional support such as mental health, spiritual care or Employee Assistance Program resources. In the space below, write the contact information for the person or program in your facility that is responsible for providing mental health support for healthcare workers following disasters:

1. 
2. 
3. 
4. 

Listen, Protect, and Connect

Below are the three steps of “Psychological First Aid” that you can use to provide emotional support to those around you following a disaster. For more information on how to provide Psychological First Aid: download the LPC PFA guide at http://www.emergencymed.uci.edu/PDF/PFA.pdf

1. Listen
   • Let those you care about know you are willing to listen and talk about what happened.
   • Make the first move.
   • Take time to talk.
   • Understand silence is OK.
   • Share reactions.
   • Check back often.

2. Protect
   • Help people locate the basics such as shelter, food, community resources.
   • Answer questions about what happened.
   • Support their actions towards recovery.
   • Limit exposure to upsetting sights and noises wherever possible.
   • Encourage healthy behaviors.
   • Develop a safety plan.

3. Connect
   • Providing a sense of support and connection to others is perhaps the most important thing anyone can do after a disaster.
   • Reaching out to family, friends, co-workers and neighbors can help you and those around you “bounce back” from a disaster.
   • Offer to lend a hand to people around you who seem to need help the most.