



The Fallout Of Confrontation

The Price First Responders Pay for Duty

By Richard Kay

In this article, I will examine the aftermath of traumatic encounters, most commonly violent encounters (but the same principles can be applied to all manner of confronting situations) and the effect these incidents have on emergency services, police and security officers, both professionally and personally. This critical post-incident management phase is one that is often ignored or marginalised in training programs, but it is an area where many officers lack appropriate knowledge or skills. The actual 'physicality' of violence is over relatively quickly and physical injuries are 'healed' relatively easily through medical technology. The psychological trauma, however, is often hidden and can cause far greater damage in the officer's life, and for a much longer period.

In his book, *On Combat*, Dave Grossman explains why violence affects officers so greatly:

"Most people have some phobia that 'pushes their button'. However, one phobia that pushes almost everyone's button is 'interpersonal human aggression'. It is the universal human phobia, and it produces behaviour that is not rational... The reason why interpersonal aggression is so toxic is because 'it's personal', with the emphasis on the word 'person', as in human.

"The Diagnostic and Statistical Manual of Mental Disorders specifically states that 'any time the causal factor of a stressor is human in nature, the degree of trauma is usually more severe and long lasting'... In other words, when it is another human being who causes our fear, pain and suffering, it shatters and destroys us.

"It is in this toxic, corrosive, destructive domain of the universal human phobia that we ask our officers to operate. The stress of violence debilitates far more officers than are harmed in direct action. Unchecked, extreme stress is an emotional and physical carnivore. It chews hungrily on so many of our officers and does so quietly, silently in every corner of their lives. It affects their job performance, their relationships and, ultimately, their health."

Understanding Psychological Trauma

Traumatic events come in many forms and are generally distinguished from more

commonplace misfortunes by the severity of the event and the intensity of a person's reactions to it. Psychological trauma can result from a single traumatic event, such as physical attacks, but can also include responses to chronic or repetitive stressful experiences such as abuse, bullying and violence. However, different people will react differently to similar events and not all officers who experience a traumatic event will become psychologically traumatised.

Psychological trauma is the personal experience of, or witnessing of, a highly stressful event in which the individual is overwhelmed and unable to cope with their emotional reaction to the event. Thus, psychological trauma is caused by experiencing a traumatic event that overwhelms a person's ability to cope and leaves them fearing death, bodily injury, or psychological damage. Traumatic events are pervasive and do not discriminate among people. Unfortunately, all people are at risk of experiencing traumatic events.

Trauma survivors often have problems or symptoms as a result of their experience. Many factors influence how serious these symptoms may be, such as:

- an officer's life experiences before the trauma
- an officer's ability to cope with stress
- the type of training an officer has received
- how severe the trauma was
- what kind of support the officer gets immediately after the trauma.

Most trauma survivors are unfamiliar with the effects of trauma and often have difficulty understanding the problems they are having. Trauma survivors often feel like they are going 'crazy' or that there is something seriously wrong with them. Although there is not one set of symptoms that all trauma survivors experience, some of the more common effects of trauma are listed below.

1. Re-experiencing the traumatic event:

- recurring nightmares about the trauma
- intrusive, distressing memories or flashbacks of the trauma
- becoming upset when reminded of the trauma.

2. Avoidance or numbing:

- efforts to avoid thoughts, feelings, activities or

situations associated with the trauma

- difficulty remembering important parts of what happened during the trauma
- decreased interest or participation in previously enjoyed activities
- feelings of detachment, alienation, or disconnection from the world around them
- inability to have loving feelings or feel any strong emotions.

3. Hyper-arousal:

- exaggerated startle response
- difficulty falling or staying asleep
- difficulty concentrating
- irritability or outbursts of anger
- constantly feeling watchful or 'on guard'.

4. Other symptoms associated with experiencing trauma:

- depression, despair and hopelessness
- fear and anxiety
- anger and aggressive behaviour toward oneself or others
- self-blame, guilt and shame
- problems in interpersonal relationships
- social isolation
- problems with identity and self-esteem
- problems with sexuality
- feeling permanently damaged
- alcohol and/or drug abuse
- problems with food and body image
- physical health symptoms and problems.

Recovery from psychological trauma is often a difficult and gradual process. When a trauma survivor takes direct action to cope with problems, they often feel a greater sense of personal power and control. Positive coping actions are those that help to reduce anxiety or other distressing reactions, and improve the situation in a way that does not harm the survivor further. Positive coping methods can include:

- learning about trauma and its effects
- talking to another person for support
- practising relaxation methods
- challenging negative thoughts and beliefs
- increasing positive and enjoyable activities
- calling a counsellor for help.

Post-Incident Management

Trauma reactions can exhibit emotional, cognitive, behavioural and physical manifestations. Officers

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should understand the reaction/recovery cycle, which follows the psychological process through the stages of shock, acute stress, intrusion and, finally, recovery. Without proper recognition and treatment, the officer can experience PTSD (post-traumatic stress disorder), which has far more serious and life-affecting influences on their personal and professional life. There are prescribed treatment methods recommended at each stage in order to prevent PTSD. The issues involved with violence-related trauma are vast and complicated in scope, but there are sound, helpful and therapeutic solutions available. A professional counsellor and/or psychologist would be recommended.

Debriefing

After every incident, a debriefing should be conducted to evaluate what happened against the circumstances. This can be done formally with management, authorities or team members or, informally, through self-reflection and honest self-appraisal, but the process is important in understanding why the situation occurred, how the outcome was achieved and what could be done to improve things for similar incidents in the future.

Debriefing is also an effective way of recalling and consolidating facts prior to creating a report and it can also serve to reduce post-stress anxiety by providing clarification and understanding in addition to peer support. Many people overlook professional counselling, often based on ego, but the effect violence can have on emotional and psychological wellbeing should never be underestimated. There are advantages to utilising the services of a professional who can objectively assist in understanding an otherwise irrational situation.

Debriefing should include an analysis of the officer's actions with regard to the

applicability and effectiveness of the control options used. The officer's actions should be evaluated against policy, legal requirements and the circumstances of the incident. Be honest with the explanation of events and keep it simple but, initially, it is better to say less than more until the officer has better cognitive recall and has spoken to company and legal representation, as required. At no stage, should he or she speak to, or make any references to, the media relating to any use-of-force incident. All information relating to any incident should be referred to the investigating authorities and company officials.

Reducing Workplace Trauma

An effective strategy for reducing the effects of traumatic stress is to select appropriate personnel – those who are the least stress-susceptible and the most trauma-resistant. This can be quite an involved process and is conducted at the recruitment stage. Most organisations do not have the facilities, processes or inclination to adopt this strategy, though it would solve many personnel issues in the long-term.

Another prevention strategy is education. This is more feasible for organisations to implement, and should be seen as an ongoing commitment, on both the part of the organisation and the officers, to ensure workplace safety. Information through training also allows officers to make better decisions and choose more positive behavioural alternatives. Reports show that officers who were properly prepared for the reality of the operational environment, either through a pre-existing mindset or properly designed training (including stress-based simulation exercises), survived violent incidents physically and showed less incidence of psychological

trauma. Knowing what to expect can reduce trauma and keep officers from feeling isolated and alone.

Employing the services of professional counsellors to be available when needed can assist officers through trauma caused by workplace violence.

Organisations can also create 'critical incident teams', which consist of specially-trained personnel, usually experienced colleagues, who respond and assist the involved officer in the aftermath of an event. Team members can provide peer counselling in some cases, as required. Discussing an incident with a colleague who has 'been there' is more powerful and effective than hearing 'I know how you feel' from people who really do not, because they have never experienced the same operational reality.

To ensure 'total safety strategies', organisations should incorporate post-incident management polices into their organisational procedural handbooks. Instructors should address this issue 'up front' at the training level, through appropriate training designed to prepare officers for operational reality. Officers should also take responsibility for their own safety by gaining knowledge, skills and experience so they are ready for the reality of the job. Personal safety is personal responsibility but, ultimately, it should be a combined effort to ensure the safety of every person. ■

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