

## Critical Incident Stress Management (CISM)

### *“How do I know when I’m in over my head?”*

#### Referral Guidelines for Peers

*(Prepared by: Gregory Janelle, Janelle & Associates Consulting Ltd., 1997. Revised 2001)*

Peer support training does not fully equip the average layperson for the occasionally overwhelming circumstances that may be encountered after a critical incident. This is especially true during Defusing and One-On-One intervention, when the Peer is often the first responder and assessment of a survivor’s emotional state is difficult at best.

No matter how experienced and confident one may feel going into a situation, there may inevitably come a point when it would be harmful, even dangerous, to try to handle a survivor without professional mental health intervention. A responsible Peer will always enter a dialogue cautiously and follow established guidelines with due care. It is very important that the Peer remain constantly vigilant to “danger signals” that may alert them to the moment when they feel they are beyond their limits as a caregiver and no longer capable of providing proper support to the traumatized individual. To err on the side of caution is always the best route to take.

**As a helpful guide, consider the following BEFORE speaking to a survivor:**

*(Excerpt with permission, from “Coping With Survival” by Margaret A. Kilpatrick, 1981)*

#### ALERTNESS AND AWARENESS

**You can probably handle, if the survivor:**

- a) is aware of who he/she is, and what happened
- b) is only slightly confused or dazed, or shows slight difficulty in thinking clearly or concentrating on a subject

**Consider referral, if the survivor:**

- a) is unable to give own name or names of people he/she is living with
- b) cannot give date; state where he/she is; tell what he/she does
- c) cannot recall events of past 24 hours
- d) complains of memory gaps

#### ACTIONS

**You can probably handle, if the survivor:**

- a) wrings his/her hands; appears still and rigid; clenches his/her fists
- b) is restless, mildly agitated and excited
- c) has sleep difficulty
- d) has rapid or halting speech

**Consider referral, if the survivor:**

- a) is depressed, and shows agitation, restlessness and pacing

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- b) is apathetic, immobile, unable to rouse self to movement
- c) is incontinent
- d) mutilates self
- e) excessively uses alcohol or drugs
- f) is unable to care for self, eg. doesn't eat, drink, bathe or change clothes
- g) repeats ritualistic acts

**SPEECH / MENTAL FUNCTIONING**

**You can probably handle, if the survivor:**

- a) has appropriate feelings of depression, despair, discouragement
- b) has doubts of his/her ability to recover
- c) is overly concerned with small things, neglecting more pressing problems
- d) denies problems; states he/she can take care of everything him/herself
- e) blames problems on others; is vague in planning; bitter in feelings of anger that he/she is a victim

**Consider referral, if the survivor:**

- a) hallucinates – hears voices, sees visions, or has unverified bodily sensations
- b) states his/her body feels unreal and fears losing his/her mind
- c) is excessively preoccupied with one idea or thought
- d) has delusion that someone or something is out to get him/her and family members
- e) is afraid of killing self or another
- f) is unable to make simple decisions or carry out everyday functions
- g) shows extreme pressure of speech; talk overflows

**EMOTIONS**

**You can probably handle, if the survivor:**

- a) is crying, weeping, with continuous retelling of the disaster
- b) has blunted emotions, little reaction to what is going on around him/her
- c) shows excessive laughter, high spirits
- d) is easily irritated and angered over trifles

**Consider referral, if the survivor:**

- a) is excessively flat, unable to be aroused, completely withdrawn
- b) is excessively emotional, shows inappropriate emotional reactions

**References:**

- Farberow, N.L., and Frederick, C.J., et al, Training Manual for Human Services Workers in Major Disasters. National Institute of Mental Health, Publication DHEW (ADM) 777-538, 1978, U.S. Government Printing Office Stock #017-024-00685-8.
- Farberow, N.L., and Frederick, C.J., Human Problems in Disasters: A Pamphlet for Government Emergency Disaster Services Personnel. National Institute of Mental Health, Publication DHEW (ADM) 88-539, 1978
- Farberow, N.L., and Frederick, C.J., Field Manual for Human Services Workers in Major Disasters. National Institute of Mental Health, Publication DHEW (ADM) 78-737, 1978, U.S. Government Printing Office Stock # 017-024-00778-1.
- Kilpatrick, M.A., Coping With Survival, Glendale, CA., 1981.
- Kilpatrick, M.A., and Brunstein, S.A., The Invisible Injury. Emotional Trauma From Airline Emergencies, Glendale, CA., 1983.