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## Traumatic Incident Stress: Information For Emergency Response Workers

Disasters take many forms and demand quick response from emergency workers. They may include natural disasters such as earthquakes or hurricanes, or they may involve manmade disasters such as technological failures or terrorist attacks. As a member of an emergency response team, you and your team members are at risk of experiencing what psychologists refer to as a **traumatic incident**—an incident that may involve exposure to catastrophic events, severely injured children or adults, dead bodies or body parts, or the loss of colleagues, for instance.

***Traumatic incidents can produce unusually strong emotional reactions that may interfere with your ability to function at the scene or later:***

You may experience any of the physical, cognitive, emotional, or behavioral symptoms listed below in Table 1. Some people experience emotional aftershocks weeks or months after they have passed through a traumatic event. Others may experience these reactions while still at the scene, where they must stay clearly focused on constantly changing hazards to maintain their own safety and to rescue injured victims.

***Remember that strong emotions are normal reactions to an abnormal situation!***

**Table 1.**

### Symptoms of stress that may be experienced during or after a traumatic incident

Physical*	Cognitive	Emotional**	Behavioral
Chest pain*	Confusion	Anxiety	Intense anger
Difficulty breathing*	Nightmares	Guilt	Withdrawal
Shock symptoms*	Disorientation	Grief	Emotional outburst
Fatigue	Heightened or lowered alertness	Denial	Temporary loss or increase of appetite
Nausea/vomiting	Poor concentration	Severe panic (rare)	Excessive alcohol consumption
Dizziness	Memory problems	Fear	Inability to rest, pacing
Profuse sweating	Poor problem solving	Irritability	Change in sexual
Rapid heart rate	Difficulty identifying familiar objects or people	Loss of emotional control	
Thirst		Depression	
Headaches			

Visual difficulties Clenching of jaw Nonspecific aches and pains		Sense of failure Feeling overwhelmed Blaming others or self	functioning
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**\*Seek medical attention immediately** if you experience chest pain, difficulty breathing, severe pain, or symptoms of shock (shallow breathing, rapid or weak pulse, nausea, shivering, pale and moist skin, mental confusion, and dilated pupils).

**\*\*Seek mental health support** if your symptoms or distress continue for several weeks or interfere with your daily activities.

## What You Can Do On-site

Taking care of yourself will help you to stay focused on hazards at the site and to maintain the constant vigilance you need for your own safety. Often responders do not recognize the need to take care of themselves and to monitor their own emotional and physical health—especially when recovery efforts stretch into several weeks.

The following guidelines contain simple methods for helping yourself. Read them while you are at the site and again after you return home.

- Pace yourself. Rescue and recovery efforts at the site may continue for days or weeks.
- Take frequent rest breaks. Rescue and recovery operations take place in extremely dangerous work environments. Mental fatigue over long shifts can place emergency workers at greatly increased risk for injury.
- Watch out for each other. Co-workers may be intently focused on a particular task and may not notice a hazard nearby or behind.
- Be conscious of those around you. Responders who are exhausted, feeling stressed, or even temporarily distracted may place themselves and others at risk.
- Maintain as normal a schedule as possible: **regular eating and sleeping are crucial**. Adhere to the team schedule and rotation.
- Make sure that you drink plenty of fluids such as water and juices.
- Try to eat a variety of foods and increase your intake of complex carbohydrates (for example, breads and muffins made with whole grains, granola bars).
- Whenever possible, take breaks away from the work area. Eat and drink in the cleanest area available.
- Recognize and accept what you cannot change—the chain of command, organizational structure, waiting, equipment failures, etc.
- Talk to people when **YOU** feel like it. You decide when you want to discuss your

experience. Talking about an event may be reliving it. Choose your own comfort level.

- If your employer provides you with formal mental health support, use it!
- Give yourself permission to feel rotten: You are in a difficult situation.
- Recurring thoughts, dreams, or flashbacks are normal—do not try to fight them. They will decrease over time.
- Communicate with your loved ones at home as frequently as possible.

## What You Can Do at Home

Over time, your impressions and understanding of your experience will change. This process is different for everyone. No matter what the event or your reaction to it, you can follow some basic steps to help yourself adjust to the experience:

- Reach out—people really do care.
- Reconnect with family, spiritual, and community supports.
- Consider keeping a journal.
- Do not make any big life decisions.
- Make as many daily decisions as possible to give yourself a feeling of control over your life.
- Spend time with others or alone doing the things you enjoy to refresh and recharge yourself.
- Be aware that you may feel particularly fearful for your family. This is normal and will pass in time.
- Remember that "getting back to normal" takes time. Gradually work back into your routine. Let others carry more weight for a while at home and at work.
- Be aware that recovery is not a straight path but a matter of two steps forward and one back. You will make progress.
- Appreciate a sense of humor in yourself and others. It is OK to laugh again.
- Your family will experience the disaster along with you. You need to support each other. This is a time for patience, understanding, and communication.
- Avoid overuse of drugs or alcohol. You do not need to complicate your situation with a substance abuse problem.
- Get plenty of rest and normal exercise. Eat well balanced, regular meals.

## Additional Resources

### **Disaster Mental Health Services, Substance Abuse and Mental Health Services Administration (SAMHSA).**

<http://www.mentalhealth.org/cmhs/EmergencyServices/index.htm>

Tips for Talking About Disasters, SAMHSA.

<http://www.mentalhealth.org/cmhs/EmergencyServices/after.htm>

Self-Care Tips for Emergency and Disaster Response Workers, SAMHSA.

<http://www.mentalhealth.org/cmhs/EmergencyServices/response.htm>

Related Links, SAMHSA.

<http://www.mentalhealth.org/cmhs/EmergencyServices/links.htm>

### **National Center for Post Traumatic Stress Disorder (PTSD), Department of Veterans Affairs.**

<http://www.ncptsd.org/>

Disaster Mental Health: Dealing with the Aftereffects of Terrorism. Brief Information for the Public and the Professional. National Center for PTSD, Veterans Affairs.

<http://www.ncptsd.org/disaster.html>

St. Laurent, D. (1996). *The nutritional needs of rescue teams*. Emergency Preparedness Digest, April-June, pp. 26-27

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# Please stay safe at work.

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