Critical incidents and stress



What are critical incidents?

A critical incident is an event, or a series of events, that causes enough stress to overwhelm a person's ability to cope and return to their normal state of well-being. The person can be directly involved in the incident or have witnessed it as a bystander. The critical incident stress can cause problems that interfere with the person's ability to enjoy their life.

Examples of critical incidents include being directly involved or witnessing:

- · The death of a coworker
- · Fatal accidents
- · Public emergencies or natural disasters
- · The threat of injury or death
- · Witnessing death, abuse or suffering
- · Violence
- · Harassment, including discrimination and bullying

This list is incomplete because we classify an incident as "critical" based on how it impacts people, not on what type of incident it is.

If critical incident stress is not addressed, then workers can have symptoms, including:

- \cdot Insomnia or other problems affecting sleep
- · Mood swings, irritability or withdrawal
- Heart palpitations, sweating or trouble breathing
- Feeling disconnected from the people and environment around them (dissociation)

If the stress that caused the symptoms is not addressed, then a person's physical and mental health well-being can be affected, causing injuries, illness and death. The impacts of these types of incidents should not be ignored, dismissed or minimized.

Anyone experiencing any type of health problem after a critical incident should consult a health care provider. There are effective solutions that can help.



Critical incidents in work

Exposure to traumatic events in work is common. <u>An estimated 1.5% of workers have</u> experienced traumatic events at work, and that's likely underreported. CUPE members are front-line public sector workers whose work directly provides health or safety to the public. Many CUPE members are more likely to experience one or more critical incidents because of their type of service work.

Research tells us that working conditions and practices can be protective when they consider the impacts of critical incidents. That's why it's important to have appropriate health and safety control measures in place.

The joint health and safety committee or the health and safety representative are good resources. If there are critical incident exposures in work, there should be a psychosocial hazard prevention program.

You can find more information at cupe.ca.

Stigma

There is a stigma associated with mental health problems and illnesses. That could mean that some people don't feel comfortable talking about these kinds of problems. This could be for many reasons, including social or cultural norms, past experiences or a lack of understanding.

In some workplaces, there is a culture of not reporting these types of incidents.

Some reasons workers do not come forward could include:

- · Fear they will not be believed
- · Fear they will not be supported
- · Fear they will look weak or like they can't handle the work
- · Fear they will face negative consequences like ridicule, blame or discipline if they talk about it

Intersectionality

Members of equity-deserving groups may have additional stressors to deal with, like violence or discrimination based on race, culture, origin, ability, gender identity or expression, or sexual orientation. Intergenerational trauma, like from colonization or racism, can cause mistrust of the health care or security systems we typically count on for help. Any action proposed must be respectful and inclusive.

The employer's responsibility for psychological safety

Some employers mistakenly believe that workers should deal with critical incidents on their own, without help. This does not consider the human needs of workers and it ignores the employer's responsibility for providing safe work. The 2010 report "<u>Tracking</u> the <u>Perfect Legal Storm</u>" by Dr. Martin Shane outlines the legal frameworks that assign responsibility for psychological safety in work to the employer.

Unsafe work practices can lead to critical incidents in any workplace, like:

- Working alone
- · Understaffing and poor safety procedures
- · Poor working conditions
- · Excessive workloads and overtime
- Proper health and safety policies and practices in all workplaces will reduce the likelihood of critical incidents.

What can be done about critical incidents and critical incident stress?

1. Identify the problem

The first step is to recognize that critical incidents are serious health and safety hazards. If a critical incident has happened or can happen in your workplace, critical incident stress is likely to affect CUPE members. Surveys and mapping techniques are excellent tools to identify critical incident stress.

Visit <u>cupe.ca</u> for more information.

2. Preventative actions

When possible, the first goal should be to prevent critical incidents. For some occupations, critical incident stress is very hard to avoid or engineer away.

- Develop a critical incident prevention policy and program that puts the health and safety of workers first. The CSA standards <u>Z1003-13 - Psychological health</u> and safety in the workplace and <u>Z1003.1-18 - Psychological health and safety for</u> the paramedic service organization are good examples of what such programs should include.
- · Refuse unsafe working conditions and unnecessary overtime.
- Conduct a full review of work organization and conditions that lead to critical incidents.
- Evaluate the exposures to psychosocial hazards at work.
- Conduct regular workplace inspections to evaluate the physical environment and implement control measures where critical incidents may happen.
- Demand that employers improve working conditions and eliminate or control residual hazards that can cause critical incidents and critical incident stress.

3. Responding to critical incidents

Despite the best prevention plans, many CUPE members will face critical incidents during their work. The following are important considerations to respond appropriately:

- · The safety of the individual comes first. Appropriate health care should be available as needed to help them deal with their reactions to the incident.
- People exposed to critical incidents can continue to react for days. New symptoms could take some time to appear. There should be multiple opportunities to check in that are respectful of a person's right to refuse assistance.
- Critical incidents should be discussed to understand how they happened. It's important that the discussions not shift blame to the worker. This could cause self-blame in a person who has just experienced a traumatic event.
- Peer support programs can be helpful but should be carefully considered. The Mental Health Commission of Canada has resources that can ensure this is done well.
- · Keep critical incidents and their management on the health and safety committee agenda until issues are resolved.
- Negotiate contract language where legislation does not provide for specific critical incident and critical incident stress controls, monitoring or access to information about critical incidents and critical incident stress.
- · Raise awareness of ongoing concerns with campaigns, education and training.

Summary

The harm caused by critical incident stress is significant for CUPE members. It is hard to fully gauge the extent and effect of critical incident stress due to underreporting, employers' ignorance about critical incident stress and a lack of employer support for critical incident stress programs. We need to lead the way by educating workers and employers on the effects of critical incident stress.

Employers have the responsibility to provide a healthy and safe workplace. Eliminating critical incident hazards and critical incident stress is an important part of maintaining a healthy workplace. Ending critical incident stress requires the participation of CUPE members. Through education and action, we can make our workplaces safe and healthy.

FOR MORE INFORMATION, CONTACT:

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