Critical incidents and critical incident stress

What are critical incidents and critical incident stress?

Critical incident stress is a term used to describe the *normal* reactions of workers who experience an *abnormal*, shocking critical incident or traumatic event. A direct injury to a worker or witnessing an injury can cause critical incident stress.

CUPE members' work often involves the risk of critical incidents. Whether members work in hospitals, schools, libraries or municipal facilities, it is a very real health and safety hazard for front line workers.

Examples that cause critical incident stress in the workplace are:
- Death of a co-worker.
- Serious or life-threatening injury to oneself or to co-workers.
- A near miss that threatens the health and safety of oneself or of co-workers.
- Suicide of a co-worker.
- Loss of a patient after rescue attempts.
- Death of or violence against a child.
- Violence inflicted on oneself or on a co-worker.
- Violent crime in or near the workplace.
- Natural disasters that affect work.

Some CUPE members who experience critical incident stress could become overwhelmed and unable to cope with daily activities. After a critical incident, members' attitudes about their work and workplace can change drastically. If there is no support from the employer or their concerns are dismissed, workers can feel let down with their work. Poor morale, increased accidents and staff turnover can result.

Symptoms of critical incident stress include:
- Irritation, anger, sadness and depression.
- Guilt and denial.

- Memory problems (general and incident specific).
- Confusion, disorientation and poor concentration.
- Focussing too much on the incident, accompanied by recurring images or dreams of the event.
- Decreased physical activity.
- Trouble working near the incident site.
- Difficulty being alone or being around others.
- Fear of the incident happening again.

What causes critical incidents and critical incident stress?

There is a link between a high number of critical incidents and an unsafe workplace. One of the basic causes of critical incidents is employer unwillingness to eliminate workplace health and safety hazards. Employers that do not respond to members' concerns about workplace conditions, stress, poor work organization and other hazards, contribute to an atmosphere that can cause critical incidents. For example, if a workplace is poorly managed – unchecked bullying, lots of health and safety violations, a high injury rate, excessive overtime and workload – there is a greater likelihood that a critical incident will occur. If members are risking their health under poor working conditions the results are usually frightening near misses, serious injuries and fatalities. Such workplaces also have high levels of critical incident stress.

Staff layoffs and cutbacks can also lead to critical incidents. Layoffs and cutbacks mean that CUPE members are being asked to do more with less help and less employer support. This situation leads to substandard health and safety measures. Members work harder, faster and longer. They become increasingly tired and feel unsupported. These conditions can lead to stress, violence and fatalities. If workers also lack control over work organization, the risk of critical incidents increases. The main causes are employer negligence and a lack of support for workers' needs.

Specific causes of critical incidents are:
- Insufficient staff levels.
- Insufficient training and support.
- No replacement of workers on sick leave or vacation.
- Budget cutbacks and staff layoffs.
- Working long hours and unnecessary overtime.
- Increased work pace.
- Contracting out and privatization.
- Ineffective joint health and safety committees.
- Employers ignoring warnings from workers about poor conditions.
- Lack of proper equipment.
- Loss of worker control over how a job is done.

It is important to remember some workers may respond to layoffs as they would to a death in the family. Workers who are their family's main income earner, or who may have worked for the same employer for many years can experience critical incident stress when they are laid off.

What are the effects?

Critical incident stress affects the physical and psychological health of

CUPE members. But it also spills out of the workplace, negatively affecting members' families. The cumulative effects can be devastating.

Major physical outcomes can include:
- Chest pains and difficulty breathing.
- Aches, pains, and chills.
- Headaches, nausea, vomiting and loss of appetite.
- Fainting, sweating profusely and visual difficulties.
- Gastrointestinal problems sleep disorders and sexual dysfunction.
- Hypertension and heart disease.

Major psychological outcomes can include:
- Anxiety, grief and survivor guilt.
- Panic attacks, depression and anger.
- Nightmares, confusion and impaired thinking.
- Memory problems, poor attention and heightened or lowered alertness.
- Social withdrawal and isolation.
- Unusual behaviour and use of inappropriate humour.
- Abuse of co-workers and irritability.
- Thoughts of suicide and self-inflicted injuries.

Untreated critical incident stress can develop into post-traumatic stress disorder (PTSD), a more harmful condition. The same kinds of critical incidents that cause critical incident stress usually cause PTSD. In the past PTSD was only associated with war trauma or victims of violent crimes. However, it has begun to appear as a medical diagnosis in cases of workplace critical incidents. When PTSD is diagnosed, it is usually because critical incident stress was left untreated. The effects of PTSD are similar to critical incident stress except they are typically more intense and last longer.

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

1. Identify the problem

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

A survey can be done in co-operation with the employer, in which case the union approves the survey and is involved in collecting and assessing the information generated. The survey results give the union and the employer a clearer picture of the impact of critical incident stress. The union should conduct its own critical incident stress survey if the employer resists the idea or denies that critical incident stress is a problem. Body mapping, hazard mapping and your world mapping techniques can be used, in addition to surveys, to identify critical incident stress and its effects.

Workplace inspections by CUPE members are an important tool in uncovering and identifying critical incident hazards. Inspections should be carried out regularly to identify and prevent critical incidents.

2. Actions

Critical incident stress hazards arise largely from issues of control over work and general health and safety conditions. Taking action involves members exercising control at work.

The following actions can help combat critical incident stress:
- Refuse unsafe working conditions and unnecessary overtime.
- Report the critical incident, critical incident stress, near misses and all workplace hazards.
- Conduct regular workplace inspections to prevent critical incidents and critical incident stress hazards.
- Put critical incidents and critical incident stress on the health and safety committee agenda.
- Demand employers take action on improving working conditions that cause critical incidents and critical incident stress.
- Insist employers manage work processes and organization so that critical incidents and critical incident stress are eliminated.

3. Strategies for change

The strategies outlined below go with the actions listed above. Critical incidents and critical incident stress can be eliminated through the following:
- Give workers real control over their work (e.g., more autonomy, more decision-making, more self-directed work and more power to eliminate health and safety hazards).
- Exercise the right to refuse on overtime.

- Conduct a full review of work organization and conditions that lead to critical incidents.
- Decrease workloads and increase staff levels.
- Eliminate monotonous work.
- Redesign physical work features to eliminate critical incidents.
- Keep critical incidents and critical incident stress issues on the health and safety committee agenda until they are resolved.
- Demand regularly scheduled maintenance on equipment and tools.
- Put the issue of critical incidents and critical incident stress on the bargaining table.
- 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.
- Sponsor CUPE education around the issue of critical incidents and critical incident stress and its effects.
- Create a critical incident and critical incident stress policy for CUPE workplaces. A policy starts with the premise that critical incidents and critical incident stress are health and safety hazards and that all steps should be taken to prevent them.
- Collective job action around the issue of critical incidents and critical incident stress.
- Implement a workplace critical incident stress program that puts the health and safety of workers first. Make sure a critical incident stress program includes the standard defusing and debriefing stages in

addressing the critical incident stress needs of members.

4. Dealing with a critical incident

A critical incident stress program involves a thorough plan and qualified personnel. These should include specially-trained mental health professionals and peers from the workplace. Their focus is to lessen the impact of the critical incident through helping the members understand their emotional responses.

The first step after a critical incident is *defusing* to relieve acute stress. Defusing usually happens three to eight hours after the incident. A counsellor or peer worker meets with one or more affected workers. Workers remain anonymous in any reports. The counsellor or peer worker provides information on normal reactions and how workers can take care of their emotional and physical health. The counsellor or peer worker also outlines resources available to workers who need more assistance.

Debriefing usually happens 24 to 72 hours after the incident. It is a process where workers talk about the emotional impact of the event. Debriefing is usually done by a mental health professional and involves letting workers talk about their reactions to reveal and release their emotions.

Defusing and debriefing are not substitutes for therapy. They are part of a larger process that attempts to let workers know that their reactions are normal.

The *follow-up* process of a critical incident provides contact and support for workers over the long term. Workers' family members are usually included in the follow-up stage to make sure they can cope with the effects of critical incident stress at home.

It is important to remember that critical incident stress reactions can happen immediately after, a few hours after or a few months after a critical incident. Follow up procedures are vital to workers' health.

Sometimes employers believe that members should be able to deal with critical incidents without help. This shifts blame and responsibility on the worker for an event beyond their control. Instead, the real responsibility is the employer's.

An Employee Assistance Program (EAP) should have critical incident stress provisions. An EAP should also address violence, stress, overwork, depression, addictions, relationship and family problems, death, financial pressures and physical illness. A comprehensive EAP can address problems before they lead to a critical incident. Along with a good EAP, workers need education about the full range of resources available and how to use them.

However, the best EAP will be no good for members if working conditions are not fixed and workplace hazards not eliminated. The focus must be on preventing critical incidents to stop critical incident stress. For example, damaged equipment and tools, faulty safety features, improper or ill-fitting personal protection equipment, stress,

overwork, poor lighting and other hazards must be eliminated to help prevent critical incidents and critical incident stress.

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 under-reporting, employers' ignorance about critical incident stress, and a lack of employer support for critical incident stress programs that help workers recover. CUPE needs to lead the way, educating workers and employers on the effects of critical incident stress.

Peer counselling or mental health professional counselling is needed after a critical incident. This counselling is part of a critical incident stress program that should be coordinated by CUPE-trained health and safety representatives.

Employers have the responsibility to provide a healthy and safe workplace. This legal responsibility is known as the general duty clause. Eliminating critical incidents and critical incident stress is an important part of a healthy workplace. Ending critical incident stress requires the participation of our CUPE membership. Through education and action, we can make our workplaces safe and healthy.