

CRISIS NEWS



Happy New Year to all our faithful readers!

May this new year bring us all peace, health, prosperity, and happiness.

Not long after 9/11, we focused an issue of Crisis News on resilience, which can be defined as the process of adapting *well* in the face of adversity, trauma, tragedy, etc., and as the process of *bouncing back* from adversity — the notion that what doesn't kill you makes you stronger. Going on seven years after 9/11 and over 5 years since the beginning of the wars in the middle East, we thought the concept might be worth revisiting.

Dr. Michael Lacroix, Director, Behavioral Health Services

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LESSONS LEARNED ABOUT RESILIENCE

In the last issue of Crisis News, we introduced you to a book by Dr. Glenn Schiraldi entitled *World War II Survivors: Lessons in Resilience*, and recounted one of the stories in the book, that of Medal of Honor winner Russell Dunham. This is a wonderful book full of uplifting stories (41 in total) about people like us, who found themselves in horrendous situations not of their own making, and yet with death and destruction all around them somehow managed to survive, and even to thrive. Part of Dr. Schiraldi's purpose in putting this book together was to find out what had worked, what had prevented these otherwise ordinary folks from falling apart, and had helped them find their center and move forward with their lives. What did he learn from these 41 inspiring life stories? What can we learn that can help us through the stresses and challenges of our own lives?

First, Dr. Schiraldi notes that resilience is not something that develops in the moment of challenge; resilience builds up gradually over

the lifetime of the individual, nourished by "experiences such as hard work, challenging training, athletic competition, self-reliance, making do with little, learning to work with others, and the realization that all people are in the same boat in life."

Although there are exceptions, most resilient survivors had the security of at least one (and usually two) stable adult figures in their lives as they were growing up.

Second, the resilient survivors understood the mind-body connection and took good care of their



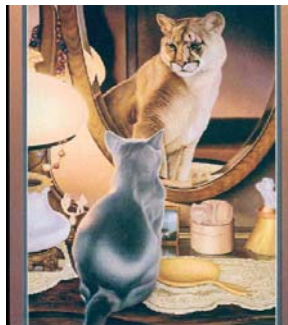
(Continued on P. 2)

Inside this issue:

<i>Lessons learned about resilience</i>	1
<i>Enhancing resilience</i>	1
<i>Training video</i>	2
<i>Top 10 ways to build up resilience</i>	3
<i>Questions about Coventry's Crisis Response program</i>	3
<i>Resilience and Congress</i>	4
<i>What is Coventry's Crisis Response program?</i>	4
<i>The lighter side of Crisis</i>	4

ENHANCING RESILIENCE

Resilience is a term borrowed from physics and engineering, as well as ecology, where it may be defined as the capacity of a system to tolerate disturbance without collapsing into a qualitatively different state. A resilient system can withstand shocks and rebuild itself when necessary. In psychology, resilience describes the capacity of people to cope with stress and catastrophe. It is also used to indicate a characteristic of resistance to future negative events. In this sense *resilience* corresponds to cumulative



protective factors and is used in opposition to *cumulative risk factors*.

Following 9/11, the American Psychological Association thought there would be value in sharing with Americans what we had learned about how to foster psychological resilience. A Task Force was formed, and their report is available on the APA website. The Task Force research identified resilience as (Continued on P. 3)

Lessons learned about resilience

bodies. They continued to exercise into their 80's, they valued sleep and got enough sleep every night, none of them smoked, and they were either non-drinkers or light drinkers. More generally, they led what we would consider balanced lives with varied interests.

Dr. Schiraldi notes that these survivors (and he offers that, "perhaps this is the essence of resilience") felt great love. "They loved life, their country, their families, their friends, ... they were not burdened by hatred or bitterness," to the extent in some cases of going back to meet with their former captors and torturers even, for the express purpose of forgiving them.

These survivors had an uncanny ability to remain calm under pressure, without letting their judgment become clouded by negative thoughts, malice, or impulsiveness. Dr. Schiraldi comments that, "Some people today think that combatants need to be motivated by hatred toward the enemy. It would appear that duty and principle are far more effective motivators, and result in far fewer psychological casualties."

Related to the absence of negative thoughts was also an absence of the sorts of thought distortions that are generally related to PTSD, depression, anxiety, and other mental health problems. They were realistic in their expectations of themselves, as well of others, and did not dwell on mistakes, nor were they prone to judging or blaming.

Emotionally, these survivors were not constricted; they were comfortable with the full range of their emotions. They did not deny or avoid unpleasant emotions, being willing to admit and express negative emotions such as fear and grief without feeling shame.

These people liked themselves, they were comfortable in their own skins, and had developed a strong and realistic sense of self-confidence. There was little self-aggrandizement, and many seemed reluctant to sound boastful. Dr. Schiraldi comments that, "Because of their inner security, they enjoyed the pursuit of excellence, without being joylessly driven toward unrealistic, perfectionistic demands."

They were not quitters. Rather, these survivors were characterized by determination, perseverance, courage, and the will to overcome adversity. When faced with obstacles, they were "creative improvisors ... On the battlefield, when one plan was thwarted, innovations were often tried."

"These survivors — and perhaps this is the essence of resilience — felt great love."

They were spiritual in their attitudes and beliefs, but they perceived God as kind and loving, not vengeful or vindictive. They derived comfort from their beliefs.

They had a clear sense of purpose. "Without exception, they were clear about why they were fighting, be it to protect their loved ones, their brothers in arms, their country, or the world from tyranny." And associated with this clarity of purpose was a strong sense of morality, but their morality was not limited to narrow issues, as they "related morality to honesty, treating others with respect, refusing to steal from buddies, and refusing to mistreat enemy POWs or civilians. They understood the relation-



ship between morality and inner peace, self-confidence, self-respect, leadership, and trusting relationships."

They were optimistic and believed that they would prevail and return to a brighter future.

They frequently used humor to lighten things up and ease tension. As Dr. Schiraldi notes, "humor bonds and reminds us that we are deeper and better than the chaos around us."

Finally, these survivors were able to take the long view of suffering. They saw suffering as something that made them stronger, something that would lead to a better appreciation of life, to strength of character, and to the discovery of a new purpose to life.

Reading these stories from the "greatest generation" is indeed inspiring, but beyond that, they are filled with wisdom — wisdom that we ourselves would in turn be wise to learn from. Dr Schiraldi closes his book with the comment that these survivors would "feel deep satisfaction in knowing that their stories have in some way benefited others, encouraging each of us to become ever more resilient."

(Photo credit: trumanlibrary.org)

TRAINING VIDEO

AVAILABLE FROM YOUR COVENTRY SALES REPRESENTATIVE!

We have available for training purposes a videotape entitled "The Psychology of Trauma," which features Coventry's Director of Behavioral Health, Dr. Michael Lacroix. The video is about 65 minutes long. It has been approved for CEU credits for nurses, CRC's, CCM's, and CDMS' nationwide, as well as adjuster CEU's in a number of states. Please consult your local Coventry Workers' Comp Services Sales Representative if you wish to avail yourself and your staff of this free training.

Enhancing resilience



(www.http://helping.apa.org).

“ordinary, not extraordinary,” and as something that “involves behaviors, thoughts, and actions that can be learned by anyone.”

It is interesting to note how well the conclusions of the Task Force dovetail with those from Dr. Schiraldi’s analysis of successful survivors in our main story. The primary factor contributing to resilience, according to the APA, lies in having caring and supportive relationships, both inside and outside the family. “Relationships that create love and trust, provide role models, and offer encour-

agement and reassurance help bolster a person’s resilience.” Other factors include the ability to develop and carry out realistic plans, good self-esteem, good communication and problem-solving skills, and the ability to manage strong feelings and impulses. All of these can be learned.

Since we are all different, however, we all develop resilience in our own ways, based on our personalities, our personal histories, and our cultural backgrounds. It is useful to ask ourselves how we have coped with stressors in the past, what we found particularly stressful, what it is about these events that we found so difficult, and which coping strategies have worked well (and perhaps not so well) with us. What have we learned about ourselves during difficult times?

“Resilience involves maintaining flexibility and balance” as we deal with stressful events and trying circumstances.

We can do this by

- (1) allowing ourselves to experience strong emotions but also acknowledging that at times we may need to

bottle these up in order to keep functioning;

- (2) taking action to deal with the problem while also giving ourselves time and permission to rest and recharge our batteries;
- (3) allowing loved ones to succor us, while also nurturing ourselves; and
- (4) learning to rely on others but also to rely on ourselves.

On the journey of life, we periodically need to stop and rest, but in order to get to the end of the journey, we do need to get back in the boat and paddle.

(Additional source: Wikipedia.org; Photo credit: Myspace.com; artoffengshiinc.com; realinspiration.com)



TOP TEN WAYS TO BUILD UP RESILIENCE

- ◆ Make connections: Supportive relationships with family and friends are vital
- ◆ Avoid seeing crises as insurmountable; Look beyond the present to better circumstances
- ◆ Accept that change is part of your life; Learn to roll with the punches
- ◆ Move toward your goals; Set realistic goals and do something toward achieving them daily
- ◆ Take decisive actions; Act on adverse situations as much as you can, don’t just wish
- ◆ Look for opportunities for self-discovery; Good can come from bad, look for it
- ◆ Nurture a positive view of yourself
- ◆ Keep things in perspective; To quote Eleanor Roosevelt, all things ultimately end
- ◆ Maintain a hopeful outlook; visualize what you want rather than what you fear
- ◆ Take care of yourself; Pay attention to your own needs and feelings



Questions about Coventry’s Crisis Response program?

Call us at 888-552-5378. Or:

Call your Coventry Workers’ Comp Services Sales Representative today, who will be VERY happy to fill you in. Come see how much Coventry can do for you!

Resilience and Congress

The concept of resilience has attracted the attention of our legislators. Since the horrific events of 9/11, our preparedness at all levels has been the subject of much examination, and there is a realization, in some circles at least, that there more to addressing terrorism than military and security approaches. The key objective of the terrorist is not to kill people, but to sow fear and panic among the population, and the response to that psychological goal must include psychological strategies for preparing the citizens so as to thwart that objective.

HR 2370 (the National Resilience Development Act) was introduced by Congressman Patrick Kennedy (D-RI). The legislation is intended to improve homeland security by providing for national resilience in preparation for, and in the event of, a terrorist attack. Among its goals:

- 1) Coordinate the efforts of various governmental agencies (including the Surgeon General and the National Institutes of Health, among others) in their efforts to develop programs and protocols to increase resilience among the public.
- 2) Consult with, and provide guidance to the Department of Homeland Security to integrate in its efforts programs and protocols designed to increase psychological resilience and mitigate distress reactions among the American public in preparation for, and in response to, a terrorist attack on the United States.
- 3) Integrate mental health and public health emergency preparedness.

Support for HR 2370 has come from a number of Democrats and Republicans, as well as many organizations, including Families of 9/11, the National Center for Victims of Crime, the American Public Health Association, and the American Psychological Association.

What is Coventry's Crisis Response Program?

Crisis Response is a nationwide Crisis intervention program available to employers, TPA's, and workers' compensation carriers. It is provided through a network of about 160 Coventry case managers (nurses and Master's level counselors) who have received specific training in Crisis intervention. They are located in 45 of the 50 states.

Traumatic events are very disruptive for an organization, generating chaos, disorganization, lost time, and lost productivity. Crisis Response provides a structure for employees to express their emotions and learn appropriate coping strategies. This, in turn, facilitates recovery and a return to normal (which in most instances will include a return to work). Crisis Response consists primarily of a one-time intervention with individuals who have been subject to, or witnesses of, a traumatic incident which may be expected to lead to post-traumatic stress sorts of symptoms. Examples include robberies, assaults, deaths in the workplace, violent injuries to co-workers, etc. Typically the intervention takes place within 72 hours, and it may be done in a group format or on an individual basis. Note that this is not psychotherapy; rather it is essentially a prevention and education program. The goals of the program include preventing the establishment of longer term post-traumatic stress symptoms, enhancing return to work following a trauma, and, by the same token, limiting costs. On a broader level, this program is excellent for morale as the employer's involvement in this way at an early stage reflects a concern for employees in a very tangible way. An added benefit is that this process can be used to "red-flag" employees whose response to the trauma is likely to fall outside the norm, and to help connect these people with appropriate resources sooner rather than later.

The heart of the program, Critical Incident Stress Management, was originally developed in the 1970's to assist emergency workers who had experienced particularly traumatic situations. Over the years these techniques have been refined, expanded, and adapted to the needs of corporate customers.

The Lighter side of Crisis

Classmates Weekly Cartoon



"How did computer hackers manage to destroy your handwritten book report?"

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