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LifeNet

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MAZAMA MOUNTAINEERS CISM TEAM TRAVELS TO NEPAL

By Marina Wynton and Katie Foehl

The Mazamas, a nonprofit mountaineering education organization based in Portland, Oregon, was founded in 1894, on the summit of Mt. Hood. Mazamas offers over 700 hikes and 350 climbs annually. A variety of classes and activities are offered for every skill and fitness level, and are open to both members and non-members. The Mazamas mission is simply to promote mountaineering through education, climbing, hiking, fellowship, safety and the protection of mountain environments.

The Mazamas CISM team was formed in 1992 as the result of a climbing accident on Mt. Shuksan in the north Cascades in

Washington State. Katie Foehl, one of the accident victims, was dragged 50 feet into a crevasse and was suspended for two hours until she could be rescued. Katie's climbing mentor, Al Cooke, was a climb leader and a fire and rescue professional. His fire department had just begun using a local chaplaincy service that included medical and mental health professionals for critical incident stress debriefing. At Al's suggestion the Mazamas worked to implement a debriefing service. In the fall of 1993, the Mazamas executive council established the Critical Incident Debriefing Committee to provide post-accident emotional support.

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CISM CONTINUES TO EVOLVE

By George S. Everly, Jr., PhD, ABPP - ICISF Chairman Emeritus

This issue of *LifeNet* begins another year, a year that promises to see changes in the field of critical incident stress management. From a systems level, there are several factors at work.

Organic Brain Injury

First, there is a growing appreciation for the need to factor into the assessment and intervention of PTS, depression, and PTSD organic factors associated with physical head injury. Both the experience of and response to many critical incidents have associated with them the risk for closed head injury. The presence of undiagnosed sub-syndromal head injury could play a role in the

recalcitrant trajectory of post-incident stress and depression. Similarly, veterans returning from combat-related deployments are joining the ranks of emergency services. These veterans might have experienced mild closed head injury. Even in crisis intervention, it could be important as part of assessment and triage, to factor in the potential role that a history of physical head injury, such as post-concussive syndromes, might play in intervention formulation and the decision for subsequent referral. Post-concussive physiological factors such as increased cortisol, increased catecholamines, increased glutamate,

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REGIONAL CONFERENCE CALENDAR

May 11-16, 2015

13TH World Congress on
Stress Trauma and Coping
-Baltimore, MD
ICISF

June 24-28, 2015

-San Francisco, CA
San Mateo CISM Team

August 20-23, 2015

-Denver, CO
Mayflower Crisis Support Team

October 15-18, 2015

-Seattle, WA
Seattle Police & Fire Peer Support Team

November 11-15, 2015

-Baltimore, MD
ICISF

December 3-6, 2015

-San Diego, CA
San Diego CISM Team

*Check our Website for updated
information on course offerings!*

Submit a Letter to the Editor!

ICISF welcomes comments
from our readers. Please
submit your comments to the
editor at (lifenet@icisf.org)

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HAPPY NEW YEAR FROM THE ICISF BOARD OF DIRECTORS!

By Becky Stoll, Chairperson of the Board

I hope the New Year finds you all rested, happy, and excited for what lies ahead in 2015. I am as excited as I have ever been for the future of ICISF as we enter this year on solid ground from a leadership and financial perspective. Rick Barton has been in his role as Chief Executive Officer for over a year now. He has spent a large amount of time evaluating and learning about the organization and has begun to make necessary changes he feels are key to our long term success. The Board as well as the leadership realizes there are several pressing issues that must be tended to; updates to current trainings, development of new trainings, simpler ways of assisting our instructors, enhanced use of technology and diversification in revenue streams. All of these represent a large amount of work to be done but Rick is moving us in the right direction and we are already seeing good progress in many areas.

As I sat in my office in Nashville last year I thought I heard some screams of joy when we announced the 2015 World Congress was being moved from February to May. For all of us who have braved the frigid winter weather in Baltimore this was an answer to many prayers. The World Congress, managed by Terri Pazornick is fast approaching and the staff has been working on it for months to ensure an excellent experience for all.

This year we are moving back to the inner-harbor and are planning not only excellent content but lots of opportunities for networking and catching up. I hope you plan to join us May 11-16, 2015 for what we surely be a wonderful learning and social event!

RESPONDER TO REFUGEE

By Bernd Ennig, Paramedic (EMTP)

Your shift just went to overtime. Your shoulders begin to ache, head throbs just enough to be distracting. You dread the call home to cancel plans, yet again. Lately, it always ends in a fight, and it's you and the job that apologizes. You use the same argument "It's not my fault. The call came in and we were closest": "But it doesn't matter. The dial tone says it all".

The consequences of a job that dedicates time and resources in helping others can be costly. The toll it takes on first responders is significant, including a reduced life expectancy, dependence on addictive substances and a higher rate of domestic violence.

"Stan" a veteran of the police force found himself kicked out of his home and onto the streets after 20 years of marriage. He recalls, "when I left the house, I had my car full of my clothes, but nowhere to go". Stan, after the first instance had hit rock bottom, remembering how he wore a jacket to keep warm while sleeping in his

car and then going to work to shower.

"Mark" finds he can't talk about his ambulance shifts at home, so he spends more time at work, to try and decompress and he says we have nothing in common anymore. Mark had patched things up at home so many times before, but this time it was different. "This was the last straw", Mark remembers. "My things were moved out. I had to ask my partner at work for his couch for a few days. "What a humbling experience – I was homeless, a refugee in my own city."

Kevin, a Calgary Alberta Police Service (CPS) chaplain and veteran, constable, saw firsthand his fellow officer's struggle with work-related family strife. Many found themselves "homeless" and slept at work, in their cruisers, or sofa-surfed while attempting to reconcile their marriages or relationships. Kevin had an idea that, if officers had a safe place to stay, a place with stability, they could start a journey of

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THE EFFECTS OF TRAUMATIC SOCIAL MEDIA ON FIRST RESPONDERS

By Sgt. Lisa Pomerance-Hindi,
Ret. NYPD & Coordinator of POPPA Trauma Response Team

The development of social media has changed the way events are disseminated to individuals. Whether it be a worldwide catastrophe or a local rally, we all are a part of it, instantaneously. There are videos and photos of raw, unedited footage that to others, such as the first-responders, it can be harmful and traumatic to view. For the interested bystander, this is an incredible look into the world.

I retired from the NYPD as a Sergeant, after 20 years on the force. On September 11, 2001, I responded to World Trade Center as the towers were coming down. Several days later, I was reassigned from my detective unit to the Police Organization Providing Peer Assistance (POPPA), as a full-time debriefer for the NYPD. As part of the POPPA debriefing team, we helped

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THE TRAGIC DEATH OF A SANTA FE, NM DEPUTY

By Dr. Deb Boehme, Mr. Conant Carr, Mrs. Eleni Fredlund, Dr. Carl Russell
Chaplain Jeff Eichorst and Mr. Charles Schroeder

In the early morning hours of Tuesday, October 28th, 2014, the Santa Fe County Sheriff's department contacted the New Mexico Crisis Support Team with an immediate need for intervention services. The Sheriff's department had suffered a traumatic event unlike anything it had experienced before: one deputy had shot and killed another deputy during an argument.

On Monday, October 27th, deputies

Jeremy Martin and Tai Chan were transferring a prisoner from Santa Fe County Detention Center to a federal facility in southern Arizona. After the deputies completed the prisoner transfer, they made their way back to New Mexico. They stopped to spend the night in the city of Las Cruces, in Doña Ana County. After the officers checked

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FROM THE HOTLINE TEAM COORDINATOR

By Reverend George Grimm

In order for teams to remain on the current team list in our database and on the website, an annual update of information is required. It has been noted that many teams sending in the information do have changes to be made in the contact information, indicating that phone and email contact information given out by ICISF would have been incorrect and possibly delayed anyone attempting to contact the team.

At times, the email or US Mail reminder sent to the team that this update is due is returned because the contact information we have is incorrect. It is vital that we have

the correct information to provide when a request for assistance is made to the ICISF office or Hotline. As of this writing, only 155 of the 809 teams in our database have current information on file. If your team is one of those, you may find the necessary form at <http://www.icisf.org/wp-content/uploads/2014/04/0-team-form-05-11-11.doc>

Your assistance in keeping our database up to date is greatly appreciated. If you have any questions, please contact me at hotline@icisf.org

Thanks in advance for your help,

George

Share Your Team's Milestone with *LifeNet* Readers

ICISF would like to acknowledge CISM Teams that have reached significant milestones in organizational longevity (i.e. five, ten, fifteen year anniversaries, etc.) in future issues of *LifeNet*. If your team reached such a significant anniversary this year, please contact George Grimm, ICISF CISM Team Coordinator (via email at hotline@icisf.org) and provide the appropriate information so we may proudly list your Team in a future *LifeNet* and provide a Certificate of Appreciation.

"Compassion is not a relationship between the healer and the wounded. It's a relationship between equals. Only when we know our own darkness well can we be present with the darkness of others. Compassion becomes real when we recognize our shared humanity."

- Pema Chodron

CONNECTING THE CRISIS RESPONSE COMMUNITY

13TH WORLD CONGRESS, MAY 11-16, 2015

By Terri Pazornick, World Congress Manager

Registration for the 13th World Congress on Stress, Trauma & Coping is open, with over seven hundred providers of crisis intervention and disaster mental health services expected to convene in Baltimore to gain insight from over 100 presenters in nearly 100 educational sessions. The presentations and networking opportunities have been planned to make time spent at the World Congress both professionally and personally fulfilling. With just a couple more months until the World Congress opens in Baltimore, have you made your plans to attend?

Visit www.ICISF13thworldcongress.org for complete details and registration information.

Pre-Congress

Pre-Congress workshops will be held Monday-Wednesday, May 11-13 and will include the opportunity to attend a course needed to complete a Certificate of Specialized Training. These include Assisting Individuals in Crisis & Group Crisis Intervention, Advanced Assisting Individuals in Crisis, Suicide Awareness: An Introduction for Crisis Responders, and Techniques for Delivering Bad News by Crisis Response Personnel. Other half and one-day courses will be presented that are unique to the World Congress, on topics such as Ethics-Based Leadership, The Bulletproof Mind, Disaster Preparation for Faith Based Organizations, and CISM in the Aviation field. Look for a complete list online and in the Registration Brochure.

Main Congress

The Main Congress educational program on Thursday-Saturday, May 14-16, 2015 will feature seven General Sessions each with several presentations and five scheduled

educational breakout sessions each with up to ten workshops to choose from.

Other Networking Opportunities

Breaks throughout the six days of the World Congress offer multiple opportunities to make valuable connections with other attendees and help you find an important balance to the serious subject matter covered during the days' presentations. In addition to coffee breaks in the exhibit area, join friends old and new during scheduled morning, afternoon and evening activities to enhance your experience. Yoga, Tai Chi, Lunch at a signature Baltimore restaurant, an Orioles game, visit to the Baltimore City Emergency Dispatch or a visit to the Museum at the Medical Examiners Office- Nutshell Studies of Unexplained Death- and much more!

Save on Registration

Be sure to register on or before March 31, 2015 to take advantage of Advance registration pricing; Regular rates go into effect on April 1.

Why Should You Attend?

Ask past World Congress attendees why they keep coming back, and there would probably be a couple of common themes among their answers. Most would probably say that they come for the variety of presentations on disasters, lessons learned, research, etc. But they would also be just as likely to say they return for the incredible sense of community they feel when they're among hundreds of others who do the same type of work and speak the same "language". That's why our theme is Connecting the Crisis Response Community. The opportunity to make personal connections, learn from one another and be among friends often renews their commitment to the selfless work they do, and they return

to their communities, agencies and jobs with fresh ideas, and reinvigorated. If you haven't yet experienced a World Congress, we hope you'll give it a try.

We hope that you will:

Engage-

#connect13wc, #engage13wc

Get involved now! Look through the information, register for sessions that are of interest. Follow us on Facebook and Twitter and keep an eye out for special updates on the "What's New" section of icisf13thWorldCongress.org website.

Learn-

#connect13wc, #learn13wc

Get the most of your World Congress experience on site. Follow the World Congress app, network with others in your profession, workplace setting, and geographical area. Visit vendors in the Exhibit Hall. Check out the e-Poster Gallery. Get tips and back pocket skills from not only presenters, but others you meet!

Share-

#connect13wc, #share13wc

Take it home with you! The World Congress may be over on May 16th, but the stories you hear, the knowledge you gain, and the relationships you create will continue for years to come. Connecting the Crisis Response Community- it's on you.

CONFERENCE AWARDS AND SCHOLARSHIPS

ICISF's San Diego, CA Conference held December 3-7, 2014

Marlatt Scholarships are offered in remembrance of Erin and Colleen Marlatt to deserving individuals in Fire Services. Recipients are selected by the local host and are acknowledged and presented with awards at the conference Award Ceremony & Town Meeting.

Congratulations on being chosen as Marlatt Scholarship recipient:

Jon Dorsey
(not pictured)

John Duncan

Kevin Molloy



Congratulations on being chosen for the Certificate of Appreciation Award:

Lance Fickas

Lori Briggs



Comments, Questions or Suggestions

Please direct any comments or questions regarding the contents of this issue to the attention of Victor Welzant, PsyD, Editor, at lifenet@icisf.org.

Letters to the Editor are also welcome. Have an idea for an article in a future issue of *LifeNet*? Send your suggestions to the attention of Michelle Parks, Content Editor, at lifenet@icisf.org. We welcome your input.

Thank you!

If your article is approved and used in an issue of the *LifeNet* you will receive a complimentary

Level One-1 year ICISF membership (\$50.00 value)

Make Sure We're Able to Stay in Touch!

To be sure ICISF emails get through to your inbox, be certain to add ICISF email addresses to your address book. If you have a spam filter, adding ICISF.org to your "white list" of acceptable senders will also help to ensure that our emails get through. Thanks!

FROM THE APPROVED INSTRUCTOR DEPARTMENT

We would like to congratulate the newest Approved Instructors to the ICISF Family. The following individuals recently completed the Group Crisis Intervention Instructor Program in San Diego, CA from December 4-6, 2014.

Kathy Abram
Daniel Adams, II
H. Roksan Biktimir
Douglas Cyr
Denver Driberg
Steven Fraser
Christen Kishel

Danny Leonard
Rob Lloyd
Kenneth Macgregor
Melissa Meyer
Laura Morton
Michael Oshry
Leah Sandberg
Davina Sentak

Meri Skilliter
Lane Spalla
Rosemary Spicer
Jody Stanners
Phil Stoffle
Elbert Tomai
Janet Tomai



SHINING STAR PROGRAM

ICISF is proud to announce a new recognition program entitled "Shining Star" in CISM. Current CISM Teams or Liaisons may nominate a local person who has, over seven years or more of CISM experience, shown outstanding leadership/innovation for their efforts in promoting CISM. The Categories and Eligibility for this program are as follows:

Rising Star: Those individuals who have shown seven years of dedication, commitment and enthusiasm towards the mission of ICISF and CISM.

Guiding Star: Those individuals who have, over eight or more years

of involvement in CISM, shown dedication and commitment to those in need, mentoring others to become involved in CISM, through training, team building and team support.

Heavenly Star: Those individuals who made significant contributions to the field of CISM and have left us far too soon.

Nominations will be evaluated by a committee comprised of Pete Volkmann from New York, Sandy Scerra from Massachusetts, Dennis Potter from Michigan and Mary Schoenfeldt from Washington State. This committee is independent of the

ICISF office.

Announcements will be provided by ICISF on their webpage and in *LifeNet* Newsletter. This program will recognize the grass-roots efforts and successes of CISM worldwide. The recipient being honored will receive a special pin and a Proclamation from ICISF. Please nominate those shining stars in CISM. We need to know.

Complete the nomination form and forward to Michelle Parks (mparks@icisf.org)

ICISF IS HAPPY TO ANNOUNCE THE FIRST GUIDING STAR RECIPIENT OF 2015!

Jason has generously volunteered his time to meet the needs of these individuals and the community as well as worked diligently on advancing the knowledge and concept of Critical Incident Stress Management by his extensive professional and volunteer work with fire and emergency service personnel, as well as individuals, families, groups, that have been affected by critical incidents or traumatic events.

For the past 14 years Jason has volunteered with the Nassau County Fire Commission's Critical Incident Stress Management Team as a mental health professional. His responsibilities include providing psychological first aid, stress management sessions as well as disaster and emergency mental health services for members of the emergency medical services and fire service personnel throughout Nassau County, New York.

In conjunction with his clinical work on the Critical Incident Stress Management Team, Jason has advanced the concept of peer support by training and developing CISM teams within various organizations.

Jason assisted in the development and trained the Emergency Services personnel at Jamaica Hospital Medical Center for their Critical Incident Response Program. This training was offered free of charge to all EMS workers employed by the Medisys Health Network. Currently Jason is employed by Jamaica Hospital as the administrator of the Medisys Diagnostic and Treatment center in East New York.

While employed by the GEO Group Inc, at the Queens Private Detention Facility, Jason conceptualized, implemented and developed the company's first Correctional Critical Incident Response Team and Stress Management Program for correctional employees at the detention facility. This program aimed to assist employees cope with work related stress and aid those employees who might be affected by work related trauma or critical incidents through both peer support and professional mental health counseling.

Finally, at another prior employment at Goodwill Industries, as a member of the health and safety committee Jason also conceptualized, implemented and developed an emergency crisis response program for Goodwill Industries of Greater New York and Northern New Jersey. His responsibilities included educating, training and supervising staff, as well as developing the logistics for an interagency response to internal and external crisis.

For his work providing trauma counseling and CISM services as well as his valuable service to community in which he serves, Jason has also received a number of awards commending him on his dedication on helping improve the quality of life for emergency services workers, including the 2009 ICISF Pioneering Spirit Award.



Jason's professional experiences and team development that he strives to promote and advance peer support and CISM in professional settings where the employees and consumers can benefit from such services. He strives not only to educate staff on work related trauma but also develop programs and provide services to staff in hopes to extend careers and mitigate the effects of cumulative stress on employees.

It is fitting to applaud the valuable contributions of those working in the CISM field. We should join to recognize an outstanding individual who has provided these services and who has fulfilled their professional responsibilities with a high degree of integrity, efficiency, and accountability to the greater public.

ICISF thanks Jason for his dedication and support of ICISF and CISM!

FEDERATION OF FIRE CHAPLANS AWARD

The Federation of Fire Chaplains presented Don Howell and Rev. George Grimm the **Ed Stauffer Award** at their 2014 conference for their years of service and dedication in the emergency services field.

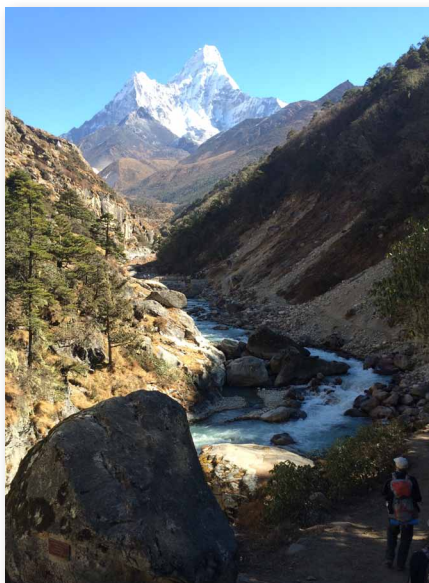


MAZAMA MOUNTAINEERS CISM TEAM TRAVELS TO NEPAL

Continued from page 1

Katie was a founding member of the CISM team, and has served on the team continuously since then. Since 1993, an estimated 70 group and peer debriefings have been held. Those who were provided with debriefings have expressed much gratitude. CISM team members include mental health professionals as well as non-professionals. All receive training through the ICISF.

In April 2014, 16 Sherpa guides were killed in an avalanche on Mt. Everest in Nepal. International climbers Conrad Anker and Jenni Lowe Anker of the Alex Lowe Fund invited the Mazamas CISM to travel to Nepal to provide emotional support to the families of the deceased. Conrad and Jenni were concerned for how the families of those who died were coping: grieving from the loss of husbands, future husbands, fathers, uncles, brothers, sons, cousins, and



friends.

CISM team members who traveled to Nepal included: Katie Foehl, Licensed Professional Counselor, Drew Prochniak, and Marina Wynton. We traveled with two Nepali guides and two porters. Our guides took care

of many logistics, such as medical problems, lodging arrangements, locating families, translating, and getting the word out in the Khumbu of our arrival and nature of our visit. Dave Morton, Juniper Fund founder and guide with major U.S. expedition-guiding company Alpine Ascents also helped with preparing the families for our visits.

The mission of the trip was to provide emotional support to families of the deceased. We were very aware that Nepalese people experience and manage grief and the loss of a loved one in a very different way than we do. In preparation we met several times with many members of the Sherpa community in Portland. They were invaluable in working with us to help us understand the Sherpa culture, what issues people were facing and the state of mountaineering in Nepal from the Sherpa perspective. We learned that Nepal has no mental health care

MAZAMA MOUNTAINEERS CISM TEAM TRAVELS TO NEPAL(CONT'D)



services. We went to Nepal with the intent to provide an opportunity for people to tell us their stories, listen well and offer support to them in ways that would work for them.

We arrived in Katmandu on October 25, 2014. Our first group debriefing in Katmandu was with several family members and a translator. We spent a few days in Katmandu, and then flew up to Lukla in the Khumbu region and began the trek on October 27. We trekked to the village of Phakding the first day and Namche Bazar the next. In Namche, we met with four women whose husbands had died on Everest in the avalanche. Soon after, we trekked to Thamo where we met with a woman whose husband died in the same event. The woman runs a teahouse there, and provided a delicious meal of Sherpa stew and tea. After our meal, we spent an hour talking with her.

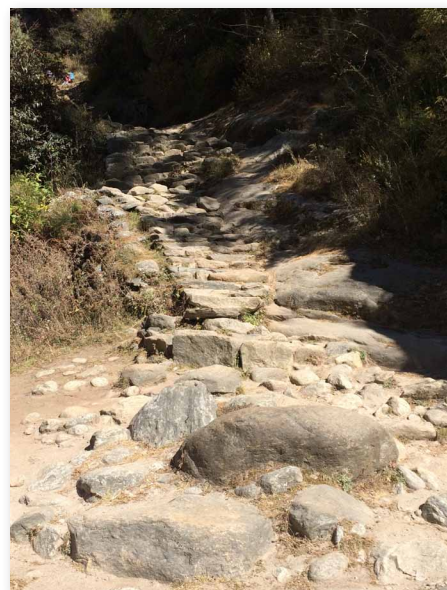
Our next stop was a small Sherpa village of Thame, one of the last year-round villages on the salt trading route that connected Tibet, Nepal and India. It is the home to many famous Sherpa mountaineers including Tenzing Norgay, who with Sir Edmund Hillary was one of the first men to reach the summit of Mt Everest. Its monastery, one of the oldest in the region, is famous for the annual festival of Mani Rimdu.

The last morning, as we were getting ready to depart, a woman arrived to see us. Dave Morton, of the Juniper Fund, had visited her recently, and told her we would be visiting. She traveled an hour and a half on foot from Tarnaga, a small remote village beyond Thame. Drew and Marina met with her for about an hour, sitting in the sun on a stone bench, with glorious views of the Himalayas. Her husband had been a guide on Everest and died in the avalanche. They had four children together, ages 6, 8, 10 and 15. By the time we had met with her, she had received the first of five annual payments from the Juniper Fund. The payments are meant as replacement for lost salary. Her children's education is covered by the Sherpa Education Fund. She makes extra money renting yaks out to mountaineering expeditions. Since her children are in school, she lives alone. She is able to be with her neighbors during the day, tending the communal garden and yak herd, but since the children are in school in Katmandu, spends nights alone.

It had been several months since the death of her husband by the time of our meeting. She reported feeling very sad and lonely after husband's death. This woman is in better financial shape than most Everest Sherpa widows since she is the beneficiary of her husband's will. In addition to the Juniper Fund, she and her children are supported by Alpine Ascents, through an insurance policy and the education fund. Our main concern for her is that she is alone much of the

time in a remote village. We were able to offer her information about self-care when suffering trauma. Unfortunately she has no access to mental health care, and very limited access to health care in general, so monitoring her progress, ongoing support or follow up is next to impossible. We encouraged her to spend time with friends, neighbors and family as much as possible and seek care at the medical clinic if her depression didn't lift fairly soon. She expressed much gratitude and thanks for our visit.

Our route took us back through Thame. The woman we had met with previously was holding a traditional puja ceremony to honor her husband. Lamas perform the anday ceremony, chanting, praying, meditating, drumming and playing



instruments. After lunch there, we went on to Khumjung, the location of a small heliport, hospital and a high school that was started by Edmund Hillary.

The weather in the Khumbu was perfect trekking conditions with brilliant sunshine, clear blue skies, but quite cold. As we descended into Khumjung, the weather changed very fast to very foggy and cold. We left early the next

MAZAMA MOUNTAINEERS CISM TEAM TRAVELS TO NEPAL(CONT'D)

morning for Phortse Tenga, a very small, remote farming village with beautiful views of Cho Oyu Peak, Mt. Everest Lhotse, and home to the Khumbu Climbing Center Program (KCC). The KCC was launched in 2003 by the Alex Lowe Foundation. For two weeks each winter, technical climbing skills are taught along with English language, mountain safety, rescue, and wilderness first aid. The intention is that increased skills and knowledge will save lives on mountain climbing expeditions. Nearly one thousand Nepali men



and women have now attended KCC since its inception.

Our next destination was the Mani Rimdu festival at Tengboche Monastery. We then moved on to Pangboche, where Marina debriefed two women on the back porch of the teahouse. The view of Ana Dablam from Pangboche is spectacular in the evening alpenglow. From Pangboche we started our return trek with stops in Namche Bazar, Phadking, Lukla and back to Katmandu.

We were able to provide direct support to all the people we intended, and others. We were so honored to be able to sit with people and hear their stories and provide support. The experience was very moving. What a simple and humane thing it is to sit and listen and be present for another person. That cuts across all cultural divisions.

Many individuals and organizations came together to make this trip happen. We all share



a common goal to improve life for the Nepali people in the Khumbu. At this writing, we are reviewing our mission, coordinating with partner organizations and beginning to plan a trip in Fall 2015 to, provide follow-up support and initial debriefing services if needed.

CISM CONTINUES TO EVOLVE

Continued from page 1

and decreased gamma-amino butyric acid may sensitize the brain, making it more irritable and potentially slower to recover from, or more vulnerable to, subsequent psychological injury.

Resilience

Another factor at the systems level is the emergence of an appreciation for the phenomenon of resilience. Resilience may be thought of as the ability to rebound from adversity. There is an emerging understanding of the importance of resilience at the individual, organizational, and community levels. In 2013, the Institute of Medicine (IOM) published its report on a “ready and resilient” workforce. In that report, IOM emphasized the importance of group resilience and how to foster it within organizations. Resilient

communications and resilient leadership practices were identified as ways an organization can become more resilient. Critical Incident Stress Management (CISM) may be seen as another mechanism by which individuals, organizations, and communities can rebound from adversity. We know that interpersonal support is a powerful tool to enhance resilience. CISM employs both individual and group interventions to aid in resilience. There are even programs designed to foster “Psychological Body Armor” in first responders who are at risk for psychological injury on a daily basis. It must be remembered however, that some individuals need no training in resilience. Resilience can occur naturally in trauma and disaster

survivors, “as well as first responders.” When doing crisis intervention, it is important to remember not everyone needs assistance. Many people are naturally resilient in the wake of all types of adversity. We must be mindful not to interfere with their resilience mechanisms. When crisis intervention and even psychotherapy prove ineffectual, it may be that the tactics employed were inadvertently destabilizing natural processes of resilience.

Core Factors in CISM

Given that the number of tactical interventions within CISM continues to expand, it was decided to create intervention factors that would house the current interventions and allow for innovation and expansion. So we have created six factors:

CISM CONTINUES TO EVOLVE (CONT'D)

- Surveillance and Assessment
- Strategic Planning
- Individual Interventions
- Informational Groups
- Interactional Groups
- Resilience

Certification in CISM

Lastly, since the early days of CISM in the late 1980s, and of disaster mental health in the early 1990s, there has been interest expressed in some form of content certification.

There has been recent movement toward certification in the body of knowledge represented by CISM. If further progress is made toward such certification, it should only be if it adds value to the field. Certification should not be the “gatekeeper” to the field, per se, although it may emerge as an aspect of the “standard of care.” It should never discourage participation. Rather, it should simply be a form

of attestation that the certificant possesses comprehension of a body of knowledge. This is the tack taken by the American Red Cross and the American Heart Association’s online certifications. Knowledge certification should never be confused with certification of applied competence. While the latter may be desirable someday, the former may nevertheless be a useful addition to our ever-evolving field.

RESPONDER TO REFUGEE

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reconciliation and recovery. Kevin teamed up with fellow police officer and Chaplain Jim, co-founding the Diakonos Retreat Society in 1997. The name Society whose name is derived from the Greek word for “servant”, fulfilling the vision of ‘Serving the Servants’ of our community heroes by “building family legacies of hope, mutual respect, trust and longevity to withstand the challenges of Police, Fire, EMS, Peace Officer, and Military professions”. The Calgary Police Association supported this initiative, and purchased a house in 1999. The Diakonos Retreat Society started serving its members immediately through this house, helping them to strengthen their resolve during difficult personal circumstances.

The residential refuge expanded to include fire fighters, paramedics, corrections and customs officers, conservation officers, park wardens, military personnel, and family members. These caring professionals might find themselves struggling with addictions, or facing separation, or just in need of a bed during urgent medical treatments. When this happens, they call an intake worker who is knowledgeable about Diakonos and its confidential process. A time is arranged to give the potential guest an introduction

to Diakonos and to provide a safety screening. Then the guest meets the house attendant to go over a few house courtesies and expectations. Throughout their stay the guest is encouraged to seek professional help to resolve their particular situation. Guests continue to work their assigned working shifts while staying at Diakonos House.

Diakonos Retreat Society eventually purchased their house in 2005. Guests are accommodated in nicely-appointed bedrooms, complete with linens which provide independence and privacy. A common area is available for those who need the occasional conversation. The home has shared laundry facilities, internet access, Wi-Fi and television.

Sharon became the house attendant in 2005, and brings down-to-earth character and a heart for service. Sharon keeps busy with family, yet finds time to sit and talk with guests while the aroma of fresh baking lingers around the conversation. If you are present at mealtime, you can enjoy a hearty home cooked meal, or if duty calls, you can pack a lunch from the abundant pantry.

Stan did get help that he needed, and is on the way to reconciling with his spouse. Mark found a

professional counselor, and is able to talk about work and is able to be home more.

The Diakonos Retreat Society is a non-profit organization and registered charity in Canada. The majority of funding is provided by corporate and private donations. Diakonos Retreat Society operates three homes in Calgary, Edmonton, and Red Deer. Together the three homes accommodate on average 3,000 night stays per year. Some stays at Diakonos houses are brought on by medical or marital issues, others by circumstances related to personal family losses. It has been encouraging in the “trial separations” to see many returning home to their families. Diakonos has further developed programs that support families in the services including family camps, marriage retreats, Mexico mission trips, Spousal Nights, and seminars.

One ongoing key initiative for Kevin, the Diakonos co-founder is to eventually have a ranch-style retreat, perhaps in the shadow of the snow-capped Rocky Mountains. The retreat would have family cabins and a lodge for seminars, meetings and workshops. All those staying at the retreat would enjoy nature walks, horseback riding, etc. Diakonos house, a place of refuge to regroup, to repair and rejoin the family.

THE TRAGIC DEATH OF A SANTA FE, NM DEPUTY

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into their hotel, they changed clothes and went out to eat and drink. At some point during the evening the two deputies began arguing and at one point, a bartender had to separate them. The deputies took a taxi back to the hotel, where they continued the argument.

At 12:38 AM, on October 28th, several hotel guests called 911 to report multiple gunshots. Las Cruces PD arrived and found Deputy Martin on the floor of the lobby, with multiple gunshot wounds to his back. During the search for the shooter, they found Deputy Chan trying to hide in the stairwell. Las Cruces PD arrested Deputy Chan and charged him with the murder of Deputy Martin.

People in various agencies began notifying the NM Crisis Support Team of the incident. About 3:00 AM, the Santa Fe County Sheriff's Department called Charles Schroeder, the team coordinator, to formally request intervention services. Mr. Schroeder called team members Deb Boehme, Eleni Fredlund, Jeff Eichorst, and Carl Russell (all trained peer and/or mental health team members) to meet at the Santa Fe County Sheriff's Department at 7:00 AM. He also called the NM State Police Peer Support Team which graciously sent two CISM trained officers to assist in the interventions.

On Tuesday, the NM Crisis Support Team and two state police officers conducted 3 Crisis Management Briefings (CMBs) with 84 participants and seven One-on-Ones. Lt. Joseph McLaughlin, of the Santa Fe Sheriff's Department, introduced the team members and gave the basic information concerning the event. The team provided information about stress

management, and stated the team would be there all day to provide One-on-Ones, to any personnel that wanted to talk. The City of Santa Fe Police Department and New Mexico State Police provided coverage of calls so the sheriff's department could take care of their personnel.

The team returned on Thursday the 30th of October to conduct two modified Critical Incident Stress Debriefings (CISD). Chaplain Russell returned on Friday to be with the department personnel during the viewing of Jeremy Martin. The community turned out to offer their condolences during Deputy Martin's memorial service on Saturday, November 1st. Team members, Mrs. Fredlund, Mr. Schroeder, and Dr. Russell returned to Santa Fe to conduct a CISD for the Santa Fe County Detention employees.

This tragic event was vastly different from, and more difficult to serve than, other events in which the NM Crisis Support Team has participated. Due to numerous factors, this event did not fit neatly into a standard CISD format. Nor did it meet the criteria for one of the "Big Five" complicated CISDs: Line of Duty Death (LODD), Suicide of a Colleague, Multiple Event CISD, Significantly Delayed Interventions, or Disaster/Multi-Casualty Incident. The closest thing to this particular CISD would be the LODD, but due to the particulars of the event, Deputy Martin's death was not classified as a LODD.

Deb Boehme, the team clinical director, consulted with ICISF and came to the conclusion to do a five-phase CISD before the funeral or memorial service, and leave out the Thought and Symptom phases. However, during the CISD, the participants themselves brought these phases into the discussion. Lt. McLaughlin of the Sheriff's Department spoke to the Fact phase

and emphasized that, because this event is still under investigation, there may be information that is not known or cannot be released at this time. He stated that the press had provided accurate information on the event.

The question is: What lessons did we take away from this event and the interventions we conducted. As has been stated, the CISDs did not follow a standardized format. Therefore, we had to be flexible, adapting our approach to the needs of the group. This is the principle of innovation.

A second lesson was keeping some specific group goals in mind. Irvin Yalom (1970) pointed out that groups have curative factors. One of those factors is group cohesion. This particular incident put stress on the group's cohesion. Some of the department's personnel felt the department had lost two deputies. While some personnel were sad, others were angry toward the shooter, and expressed their thoughts that the department had only lost one officer. There was also some tension between some of the deputies and some of the civilian personnel. One participant said there is a unique perspective on things "for those of us on this side of the badge."

Another one of Yalom's curative factors is "World View" awareness. The participants stated they know they work in a dangerous environment, and they are cognizant of the possibility of injury or death. They also know their life could depend on another badge watching their back. The idea that one of their own killed a brother deputy was a serious blow to all of them. They stated that disagreements are normal, but for one deputy to shoot another deputy because of a disagreement is unimaginable. This event challenged their world-view

THE TRAGIC DEATH OF A SANTA FE, NM DEPUTY (CONT'D)

that their Law Enforcement brother or sister would always have their back.

This event is not over, and will

not be over for a long time. As of November 19th, 2014, Tai Chan had pled not guilty and had posted bail. When the case goes to trial,

the emotional wounds may reopen. There may yet be a need for future interventions over this event.

THE EFFECTS OF TRAUMATIC SOCIAL MEDIA ON FIRST RESPONDERS

Continued from page 3

over 5,000 first-responders, most of which were law enforcement. "One recurring theme we heard in the groups was this:" why does the news have to keep showing pictures and videos of the jumpers? I don't want to see it, I don't need to keep seeing it. It was the job of the media to report what happened, to inform the masses, but for those officers we debriefed, it was just a reminder of what happened, and what they could not do for the hundreds of innocent people who died. We here may have survived the attacks, but we continuously struggle to escape the haunting images that are there in our sleep and even when we wake up.

Fast forward to 2014. Facebook has connected friends and families across thousands of miles. Over 1.4 billion people are logging on to share videos, photos and comments daily. Instagram is part of our daily routine, with over 300 million users sharing photos.

This past October, two young NYPD rookies were attacked by a radicalized terrorist with a hatchet. Within 30 minutes of the attack, one simple google search took you directly to photos of the officer who was struck in the head, lying on the ground, blood pooled around his head, another officer trying to aid him. This photo was now being shared all around the Internet with reckless abandon. For the civilian, this is what social media and technology is all about - immediate communication, information and live action. Various police Facebook pages allowed this photo to be

posted. For the first responders, both active and retired, this represented a substantial hurdle to the healing process after exposure to a critical incident.

I think back to the Ground Zero debriefing days, and remember that constant theme. The pictures being posted and shared "are" traumatic and disturbing. Who are we hurting by posting these photos? First, we have the officers that were on the scene at the time. Within several hours after a critical incident, they are defused by a CISM team. We tell them, when you go home, try to get back to your normal routines, eat healthy, get sleep, spend time with people that are good for you, exercise, avoid alcohol and other stimulants. Recently, I have started asking them to stay away from the Internet, and turn off the news on TV. After they start the work to achieve normalcy, they go to their favorite social media outlet, and what do they get exposed or re-exposed to? The exact trauma they are trying to deal with is now plastered everywhere. They need to be aware that their stories are going to be online, that their family and friends may come across these images years from now, and that their favorite downtime social media outlet may be a major source of anxiety for them. Not to be ignored are the rest of the first responder community who were not present, and are now witnessing the critical incident almost as if they were on the scene.

These images can be crucial for situational and tactical training for the Police Academy recruits and in

service training for the experienced officer. For some, they may serve as motivators to train harder and be more vigilant. Sessions should be prefaced that it is extremely graphic and that anyone with a personal connection or not wishing to view should leave the room. Further, there should be a peer team available to those that may need the support.

The recent executions of 2 NYPD officers was a punch to the gut for their families and the entire law enforcement community. The rest of the police force was naturally feeling the effects: difficulty sleeping, extremely high stress levels, irritability, preoccupation with their thoughts and hypervigilance. How many officers thought "it could have been me?"

For many officers, this event opened up old wounds, perhaps unresolved critical incidents resurfaced. The video that was posted on the internet was not overly graphic. It showed an overhead view of the two officers being worked on, before being loaded into the ambulance. I know for myself, it is vital to limit my exposure to both visual and audio trauma. I read newspaper and online articles to get the information, and quite frankly, that's enough for me.

How can we mitigate the stressors of first responders in a world where social media is still expanding? As trained Crisis Interventionists, I believe it falls to us to lead the charge of turning off the electronics. As part of our defusing and debriefing process, it is crucial

THE EFFECTS OF TRAUMATIC SOCIAL MEDIA... (CONT'D)

that we educate our first responders that they may impede their healing by turning to social media until they feel stronger. They can share that information with their families, as well. We can tell them if it becomes important to them to view the images, they should have an existing support system.

The world is more connected now than it has ever been. Social media is an integral part of our world, it is not going away, and will only become more enhanced. Obviously, we cannot stop civilians from filming, and taking pictures and posting pictures, but WE, as first responders, need to be aware of the effects on us and

our communities, and recognize the challenges and downsides to social media as a whole. Do you want these images imbedded in your head? I know I don't have the room for them. I challenge you to try to minimize the exposure to trauma.

Don't we all see enough of it?

ICISF STAFF MEMBER DON GOW RETIRES



During the course of a long career there are many dark days. Then there are those bright spots, those moments and events which make it all worthwhile, and make you thank a benevolent universe that you chose the path you did. Such a bright spot has been the opportunity to know and work with Don Gow—Marine, Firefighter, Peer Counselor, friend and brother. Today, as he retires, my colleagues at the Maryland Institute for Emergency Medical Services Systems (MIEMSS) honored Don for a career in public service nearly twice as long as my own. Don, it's been an honor and a privilege.

— with Don Gow, Ken Bohn, Randy Linthicum and Don Howell.

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