



Phoenix
AUSTRALIA

Coping with Trauma

Trainer manual



Acknowledgements

The *Rail Industry Trauma Management Training* resources were first developed in 2013 by Phoenix Australia – Centre for Posttraumatic Mental Health (at that time called the Australian Centre for Posttraumatic Mental Health (ACPMH)) for the TrackSAFE Foundation in consultation with TrackSAFE’s Trauma Advisory Committee. The contributors to the manual include: Anne-Laure Couineau, Jane Nursey, Alexandra Howard, Dzenana Kartal and Dr Andrea Phelps of Phoenix Australia – Centre for Posttraumatic Mental Health (Phoenix Australia). These have been updated in 2017 with the assistance of Maria Humphries.

Disclaimer

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Limitations on tailoring material for your organisation

Refer to sections on tailoring information throughout the trainer manuals for more information.

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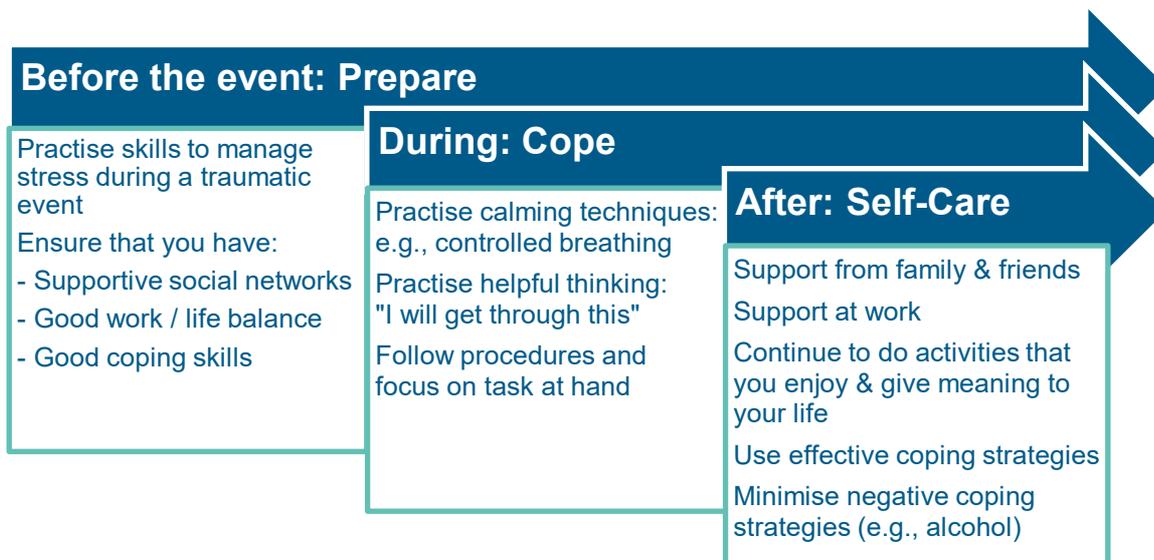
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Workshop background

The purpose of pre-incident preparedness training is to enhance a person's ability to cope with exposure to trauma. It does this by:

- increasing psychological preparedness for what may be confronted in the context of a traumatic event
- teaching effective coping strategies for managing any immediate psychological distress
- ensuring staff have a personal plan for using their own positive coping resources including social support.

The training will therefore cover the range of skills and strategies presented in the figure below:



Workshop aims

In this workshop you will help staff to:

- learn about the particular psychological hazards they may be exposed to at work
- develop an understanding of common reactions to potentially traumatic events (PTEs)
- gain an understanding of the kind of response they can expect from their organisation in the event of a PTE
- learn simple coping skills to help them deal with their experience
- learn about where to seek support from others in the organisation
- develop a personal coping plan that will help them prepare for, and cope with PTEs
- become familiar with the resource kit which will help them look after themselves following a PTE.

End audience

Although this workshop includes information and skills useful for a broad range staff, we recommend prioritising first training those staff in your organisation who are at greater risk of exposure to a PTE first. These higher risk groups may include:

- safety critical workers
- incident controllers
- incident investigators
- train drivers.

It is recommended that any individual training workshop have between 8 and 10 participants. Organisational needs may necessitate a larger group; however we recommend it be limited to a maximum of 20 to 25 participants.

Structure of workshop

The workshop is designed to be delivered over 3.5 hours. The workshop includes a variety of teaching methods, with a focus on experiential (i.e., 'hands on'), rather than didactic (i.e., lecture), learning. For example, it includes:

- the use of examples relevant to the rail industry to emphasise key points
- group, pair, and individual activities
- limited didactic teaching (i.e., lecture format)
- segments from the TrackSAFE trauma awareness video
- skill demonstration and rehearsal during the workshop, with an opportunity for feedback from trainers.

It is up to you how you run the group discussion sections, although we recommend a mixture of large and small group formats – just be aware that small group discussions are likely to take more time than ones conducted in a large group, so keep an eye on the clock.

Using this trainer manual



This symbol is used to indicate a slide (or group of slides) that may need to be modified by each organisation in order to fit with their policies and procedures.



This symbol is used to indicate that there is a participant activity associated with the slide. It may be a group, pair or individual activity.



This symbol is used to indicate that there is information in the participant workbook associated with the slide. This may consist of an overview of what has been presented or a worksheet for the participant to complete (during or after the workshop).

Copyright and acknowledgements

We would request that organisations promoting this training include the following acknowledgements where applicable.

PowerPoint slides

Organisations are able to use their own PowerPoint slide templates, however, the acknowledgement slide (3rd slide) always needs to be included, as do the small TrackSAFE and Phoenix Australia logos on each slide. For example, each organisation may wish to put their logo in the middle down the bottom of each slide.

Word documents

We request that each organisation use the workbook word template with the addition of your organisation logo.

Also, note that there are instructions throughout to alert trainers to sections that may need to be modified in the PowerPoint slides, trainer manual and participant workbook.

Limitations regarding tailoring content

During the train-the-trainer workshop you will be asked to consider and tailor specific content for your organisation. This includes tailoring for the length of the workshop. Guidance on the tailored content/timing is provided in the slides, the trainer manuals and during the train-the-trainer workshop.

We do not recommend tailoring the content of the workshop beyond the sections identified as ‘tailored content’ as it is important the workshop contents remain based on best practice principles for recovery from trauma. If however, you do have feedback about the content or wish to make changes outside this scope, please contact TrackSAFE

Workshop schedule

A half day (3.5 hours) is recommended to deliver this training as it allows maximum time for the interactive and skill rehearsal elements of the workshop.

The following workshop schedule is intended as a guide for trainers.

Half-day format (recommended)

Time	Topic / Activity
10 min	Introductions
5 min	Aims and rationale of workshop
The impact of trauma (40 min)	
30 min	The impact of PTEs and recovery patterns following a PTE
10 min	Risk factors for not coping following a PTE
Looking after yourself (1h 50 min incl. break)	
20 min	Introduction to strategies to help you be prepared for, and cope with a PTE
10 min	Managing strong emotions
15 min	BREAK
25 min	Helpful thinking to cope better with a PTE
5 min	Case studies: Coping better during a PTE
15 min	Myths about coping, and Do's & Don'ts following a PTE
20 min	Getting support from friends, peers and family to recover
Getting help and personal coping plan (45 min)	
15 min	When to get help, and support options
20 min	Develop a personal coping plan
10 min	Close and evaluation

Shortened format

If organisational demands require, it is possible to provide a shorter version of the workshop. The schedule below suggests timings for a 2.5 hour workshop.

Organisations and their trainers will need to use their discretion when presenting this material over shorter time periods. Considerable time can be saved by limiting discussion, but this has to be balanced by the benefits of active group involvement and skills rehearsal in maximising the benefits of training.

Time	Topic / Activity
5 min	Introductions
5 min	Aims and rationale of workshop
The impact of trauma (22 min)	
15 min	The impact of PTEs and recovery patterns following a PTE
10 min	Risk factors for not coping following a PTE
Looking after yourself (1h 30 min incl. break)	
10 min	Introduction to strategies to help you be prepared for, and cope with a PTE
10 min	Managing strong emotions
15 min	BREAK
20 min	Helpful thinking to cope better with a PTE
5 min	Case studies: Coping better during a PTE
10 min	Myths about coping, and Do's & Don'ts following a PTE
20 min	Getting support from friends, peers and family to recover
Getting help and personal coping plan (25 min)	
10 min	When to get help, and support options
10 min	Develop a personal coping plan
5 min	Close and evaluation

Changes to the shortened workshop include:

- reduce the length of the introductions, or remove completely
- make ‘The impact of PTEs and recovery patterns following a PTE’ section entirely didactic – present common reactions to trauma instead of conducting an exercise
- remove the improving wellbeing exercise from ‘Introduction to strategies to help you be prepared for, and cope with a PTE section’
- remove the ‘Coping following a PTE – tackling myths’ exercise and present information in a didactic manner
- ask participants to complete their personal coping plan after the session and ask them to rehearse one strategy they plan to practise in order to be prepared for a PTE and to improve their current lifestyle
- do not play the video during the workshop, but rather provide the participants with access to the full TrackSAFE awareness video at another time (i.e., outside the workshop).

Training instructions

These training instructions are based on delivery of the recommended half-day format.



At the start of the workshop – while the title slide is showing – there are several things you should consider saying.

- Welcome the participants to the workshop.
- Acknowledgement of country
- Introduce yourself by giving your name and profession; briefly outline your expertise; and convey your expectations for a positive training experience for all.
- Point out the participant workbook and associated material. Suggest that participants follow the talk using the slide printouts in the workbook, making their own notes as necessary.
- Quickly cover any housekeeping details, e.g., toilets, refreshments, etc.

Acknowledgments

The *Rail Industry Trauma Management Training* resources were developed by Phoenix Australia - Centre for Posttraumatic Mental Health for the TrackSAFE Foundation.



Introduce the organisations involved (whose logos are on title slide). Also state your organisation's support of the workshop.

- TrackSAFE Foundation was established by the Australian Rail Industry in March 2012 to endeavour to reduce near collisions, injuries and fatalities on the rail network resulting from suicide and reckless behaviour, in doing so creating a better workplace for rail employees.
- Phoenix Australia – Centre for Posttraumatic Mental Health (Phoenix Australia) is a not-for-profit organisation that specialises in the psychological effects of trauma. Phoenix Australia provides training, research, and policy advice designed to improve recovery following trauma and disaster. Note that Phoenix Australia was called the Australian Centre for Posttraumatic Mental Health (ACPMH) when this training was first developed in 2013.



Introductions

Briefly introduce yourself:

- Name & role
- Years in the organisation
- What you're hoping to learn today

Confidentiality in the workshop

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Ask participants to briefly introduce themselves to the group. Ask them to state their name, background, and what they hope to learn from the training.

Explain that the workshop will be interactive and will provide opportunities to share information and rehearse skills. Set ground rules about sharing information:

- Note that no one will be forced to speak, but that everyone is encouraged to do so – it makes for a better session for you and others.
- Acknowledge that the participants may have experienced trauma in the rail industry. They will be affected to various degrees by their experiences and will be in various stages of recovery. Use this as an opportunity to introduce the importance of looking after themselves and following the advice they hear today in their own lives.
- Also point out that this is not an opportunity to tell your own stories of trauma, or for an emotional release. But it is possible that aspects of the training, such as the DVD, might bring back distressing memories and emotions for you. If you need to step out for a few minutes, that's fine. State that participants can also come and talk to you if they think they require support and that you can point them to the right person or organisation to talk to.
- Confidentiality – although we hope that whatever is said in here is confidential, it is better that you don't say things that you feel are confidential or that you would not want repeated.

Workshop aims

In this workshop you will:

- gain an understanding of responses to PTEs
- develop an understanding of common reactions to PTEs
- learn simple coping skills to deal with PTEs
- learn to seek support from others in the organisation
- develop a Personal Coping Plan



Before providing an overview of the workshop, provide a rationale and broad aims.

This workshop is designed to help you feel more prepared should you be exposed to a stressful incident. It will:

- help you get a sense of what you might be confronted with
- provide you with tools to cope with any distress that you may experience both during and following an incident
- help make sure you have a plan for using these strategies so you are prepared if something does happen.

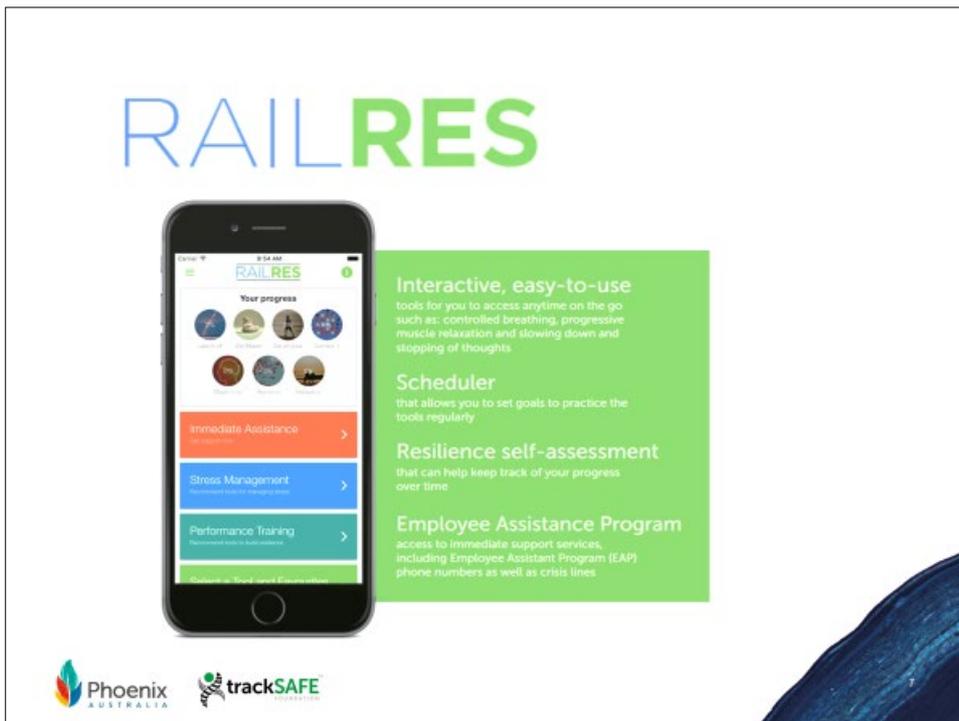
To do this we will cover:

- the types of incidents that you may encounter in your work that may be traumatic
- common reactions to these potentially traumatic incidents
- the kind of response you can expect from your organisation
- simple coping skills to help you deal with stressful experiences
- where you can get support from within your organisation.

Most importantly, you will have an opportunity to practise coping skills and will have time to develop a personal coping plan.

It is important to note that the skills covered in this workshop are not only useful after a traumatic incident, but are also useful for managing day-to-day stresses and improving your overall wellbeing. These skills could also be useful for your family members and loved ones.

You will also be presented with a participant workbook and other resources designed to help you look after yourself following a PTE.



Before continuing on with the content of this training, introduce the RailRes app as a tool that will be referred to throughout this training, and a useful resource to use beyond this training. Encourage them to download it today (even during the workshop break).

Facilitator note: Throughout the training, the RailRes logo is placed on slides that cover a skill the same as or similar to skills in the RailRes App. It is important that you are familiar with the app prior to conducting the training.

Below is some information about the RailRes App, as described by TrackSAFE:

- The RailRes App is a resource that has been developed by TrackSAFE as part of its suite of trauma management support tools.
- The App is designed to assist rail employees in managing stress if exposed to a traumatic event and build long term resilience to help employees stay healthy. The RailRes app has been informed by an industry reference group and the unions, to ensure that the app is relevant and beneficial to rail employees.
- The RailRes app will test a rail employee's physical, cognitive, emotional and behavioural reactions to stress, while helping the user adapt their response to the situation in real time.
- The App is available for free download (for both iPhone and Android devices) via the App Store

- **App features**

- Access to immediate support services, including Employee Assistance Programs phone numbers as well as crisis lines.
 - Interactive, easy-to-use tools that the user can access on the go such as: controlled breathing, progressive muscle relaxation and slowing down and stopping of thoughts.
 - A scheduler that allows users to set goals to practice the tools regularly.
 - A resilience self-assessment that can help users keep track of their progress over time.
- More information, a video, and downloadable posters are available here:
<http://tracksafefoundation.com.au/railres-app>



The impact of trauma – 40 min session

This part of the workshop will take approximately 40 minutes and aims to provide participants with:

1. a definition of what a PTE is and the kind of psychological hazards participants may be faced with
2. an understanding of common reactions to PTEs and what makes some people more at risk of developing problems.

For this session you will require:

- the TrackSAFE video (optional)
- a whiteboard
- butcher paper (required if the first exercise (responses to PTE) is conducted as a small group discussion).

Potentially traumatic events

Overwhelming threat to the physical or psychological integrity: i.e., a threat to survival as a person



Introduce the concept of a potentially traumatic event (PTE).

1. Provide a context

- Contrast “everyday” stress to “traumatic” stress. We all experience different forms of stress at work: working long hours, too many deadlines, conflict with colleagues, or being performance managed. What we call critical incidents or traumatic events (use appropriate language within your organisation) are quite different in nature and can lead to unique problems.
- Before we discuss the types of critical/traumatic incidents that can affect us in our organisation, I would like to provide you with a definition so that we are clear about what we are focussing on.

2. Present a definition of a PTE

- A PTE involves either **experiencing or witnessing** a situation that involved the threat of death or serious injury. In other words, during a PTE you could be threatened with death, or be seriously injured, or you could witness the death, injury or suffering of others.
- We say that an event is ‘Potentially’ traumatic because everyone responds differently.
- You can mention that the definition of Critical Incident is the same if this is a term used in your organisation.

3. Provide example of PTEs, especially those that may arise in the rail industry:

- hitting someone while driving a train/tram or being involved in a near miss
- witnessing someone being severely injured

- seeing body parts while trying to help an accident victim, investigating an incident, or cleaning rolling stock or tracks
- being assaulted or severely injured
- witnessing an assault.

Ensure that you include a mix of examples that are relevant to different roles in the organisation (e.g., include examples relevant to station staff as well as examples relevant to drivers).

VIDEO: Impact of trauma

Play section from TrackSAFE video that shows staff affected by trauma, including common reactions



This video excerpt presents rail staff's reactions to a number of traumatic events. Play the relevant sections from TrackSAFE video:

- Even good jobs have bad days (approx. 30 seconds)
- Impacts of trauma (approx. 1 minute)

The video serves as a bridge between providing a definition of PTEs and the exercise aimed at developing an understanding of reactions to PTEs.

Exercise: Responses to PTEs

Emotions Feelings	Thinking
Feeling distressed is normal: It's a sign that you're a human being	
Behaviour	Physical

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PARTICIPANT EXERCISE (small group or whole group)

5 min small group exercise with 10 min feedback to larger group.

Aims of exercise

1. To develop an understanding of common reactions following a PTE
2. To help participants understand that reactions can be varied and that there is not one “normal” response to a PTE.

Instructions

Ask participants to break into four small groups. Remind participants they should protect confidentiality of those involved in previous incidents when relating their experiences.

Each group to be allocated a set of reactions:

- emotional
- cognitive
- behavioural
- physical

Ask each group to select a person to report back to larger group and to brainstorm problems that a person might have in response to a PTE. Emphasise that there is no right or wrong way to answer.

Alternatively, conduct a 15 min discussion with the whole group. This may be a preferred option if time is short or you are training a small group.

During feedback:

- stress that a range of reactions is normal – feeling distressed immediately, or feeling numb, or “getting on with things” throughout the aftermath of an incident and a few days later and then experiencing distress
- differentiate between examples related to initial distress and prolonged significant distress that may indicate a mental health problem or inability to cope

Below are some examples of reactions to a traumatic event. Do not provide the audience with a list; this information is here to assist you to generate some reactions if the audience is having difficulty generating examples.

Emotions/ Feelings

- Shock
- Irritable, impatient
- Feel overwhelmed
- Blame
- Anger and suspiciousness
- Guilt
- Anxiety and panic
- Sadness and tearfulness
- Frustration
- Emotionally numb – don’t feel anything
- Helplessness
- Don’t enjoy things anymore
- Difficulty feeling happy and experiencing loving feelings

Physical

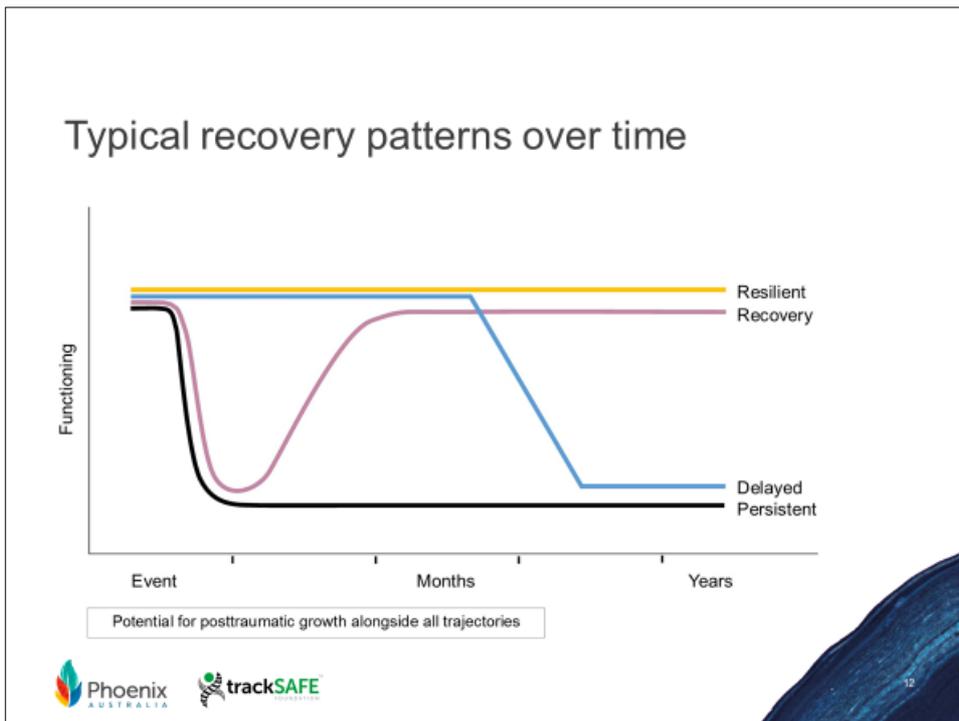
- Fatigued/tired
- No energy
- Trouble sleeping
- Heart racing – chest pain
- Feel on edge and jumpy
- Increased physical pain
- Headaches, dizziness
- Stomach aches, nausea, diarrhoea
- Decreased appetite

Thinking (cognitive)

- Difficulty concentrating
- Can’t make decisions
- Memory problems
- Can’t think straight
- Tunnel vision
- Feel spaced out
- Can’t get memories/thoughts out of your head.

Behaviour

- Lose touch with normal routines
- Lose track of time
- Work extra long hours
- Avoid work or other activities
- Unable to relax
- Overactive
- Inappropriate behaviour, e.g., laughter, yelling
- Abuse alcohol and other substances



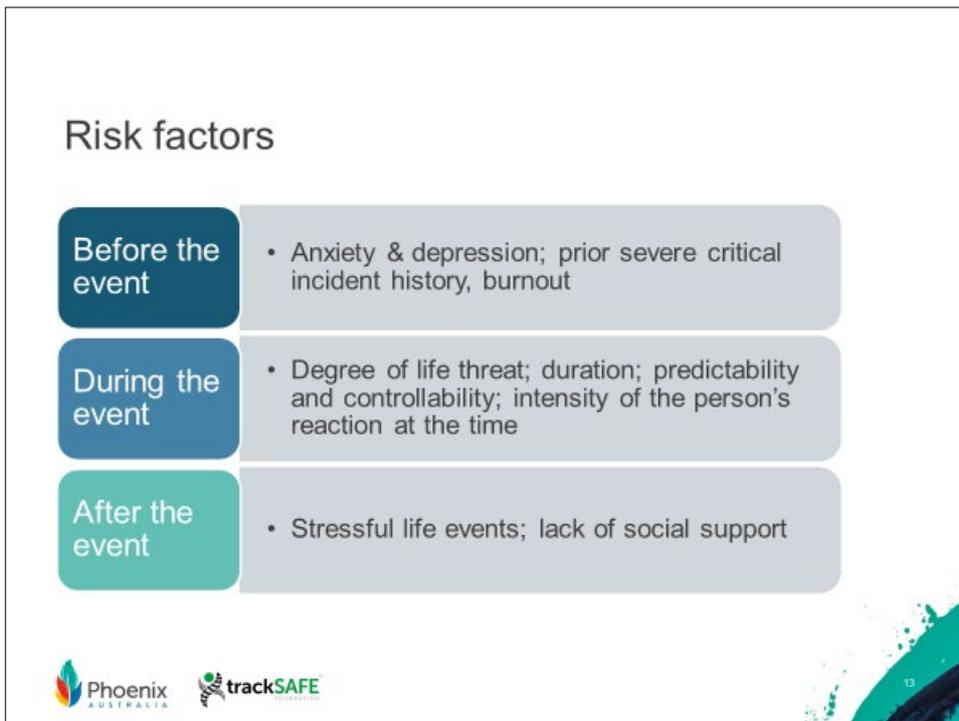
In presenting recovery patterns, ensure that the main message conveyed is that, by and large, people can cope with traumatic events and although initial distress can be expected, most people recover. Ensure that the following points are covered:

1. Before presenting the different types of recovery patterns, stress the difference between initial distress that usually dissipates, and prolonged significant distress that may indicate a mental health problem or need for help. You may wish to use the phrase ‘there are lots of ways people travel after a trauma’ to introduce this graph.
2. State that most people cope well after a PTE by drawing upon their training, usual coping strategies and support systems.
3. Explain that responses vary:
 - feeling temporarily distressed, but bouncing back
 - being largely unaffected (although some may find the effects are delayed)
 - feeling strengthened by the event(s)
 - developing more significant emotional or mental health problems such as depression, anxiety, posttraumatic stress disorder, substance misuse (e.g., alcohol).
4. Note that the variable response is why people need to be aware of a range of self-help strategies and why a flexible rather than “one size fits all” approach is required when supporting them.

Facilitator note: For your information, these are more detailed descriptions of each of the trajectories. This level of detail is not necessary for participants unless requested.

- Persistent: People who follow this course may not recover on their own or with assistance from family and friends, and will develop more severe and persistent mental health problems, drug or alcohol-related problems, or persistent relationship and occupational difficulties.
- Delayed: People who follow this course develop mental health issues only after a significant period of time has passed since the trauma.
- Recovery: These people display significant mental health problems (i.e.. subclinical or diagnosable mental health disorders) and disruption to functioning for typically at least several months, before returning to healthy functioning.
- Resilience: These people may show very little obvious distress or decline in functioning following a traumatic event.

Note that there is the potential for posttraumatic (personal) growth alongside all of these trajectories



Discuss risk factors for developing difficulties after a PTE.

1. **Provide a context and rationale for discussing risk factors.** Risk factors can be present before, during, or after a traumatic incident. While we don't have control over all risk factors (e.g., the number or types of events a person is exposed to), this workshop may help you manage some of these risk factors by asking you to:
 - consider activities that may improve your current lifestyle and ability to manage stress
 - learn skills to manage your immediate reactions to a traumatic event
 - think about the kind of supports for helping you cope with the impact of PTEs.
2. **Don't set up expectations of not coping.** Stress that not all people who experience these risk factors will go on to develop problems.
3. **Describe different risk factors.** Provide some concrete examples in the rail industry context.

Predictors of more serious reactions

Individual response is difficult to predict, but high-risk situations include:

- Person hurt was a child, known to staff, other personal significance
- Staff member believes he/she is responsible
- Previous fatality or near-miss exposure
- Very angry, tearful, numb
- No social support, other current life stressors



In presenting this slide ensure that the following points are made:

1. Having experienced these does not necessarily mean that a person will develop serious problems. These risk factors are presented so that should participants experience them they can pay particular attention to their emotional needs and seek extra support.
2. Increased support, particularly from a professional, may be required in these circumstances.
3. State that later in the session you will present warning signs for when to seek help.

What to expect after a PTE

<each organisation to insert information on standard organisation procedures after a staff member has experienced a PTE>



This slide will need to be modified for your organisation. The aim of this slide is to inform staff of what to expect after experiencing a trauma in terms of organisational procedures (this may include support provided by external contractors to the organisation). This slide should include at least the following information.

Immediate aftermath:

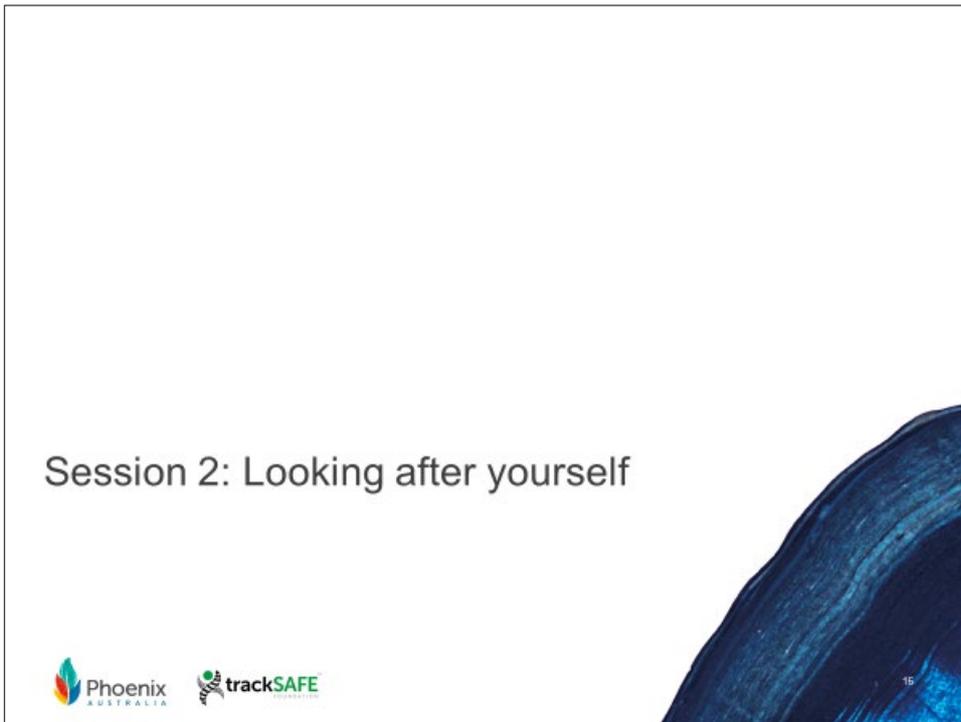
- Who will support the staff member in the immediate aftermath of the PTE? For example, first responder?
- If applicable to your organisation, it is important to acknowledge that it may take anywhere from minutes to hours for another staff member (e.g., first responder) to attend the scene (e.g., for geographical reasons).

Days and weeks after a PTE:

- Who is responsible for the wellbeing of the staff member in the days and weeks following a PTE?
- What trauma leave is the staff member entitled to, or what is recommended by the organisation?
- Are staff members automatically contacted by EAP and/or peer support after a PTE? (Or does the staff member initiate contact?)



We also recommend that each staff member be provided with an information sheet that includes this information. Refer to the worksheet template titled 'What to expect from my organisation after a traumatic event'.



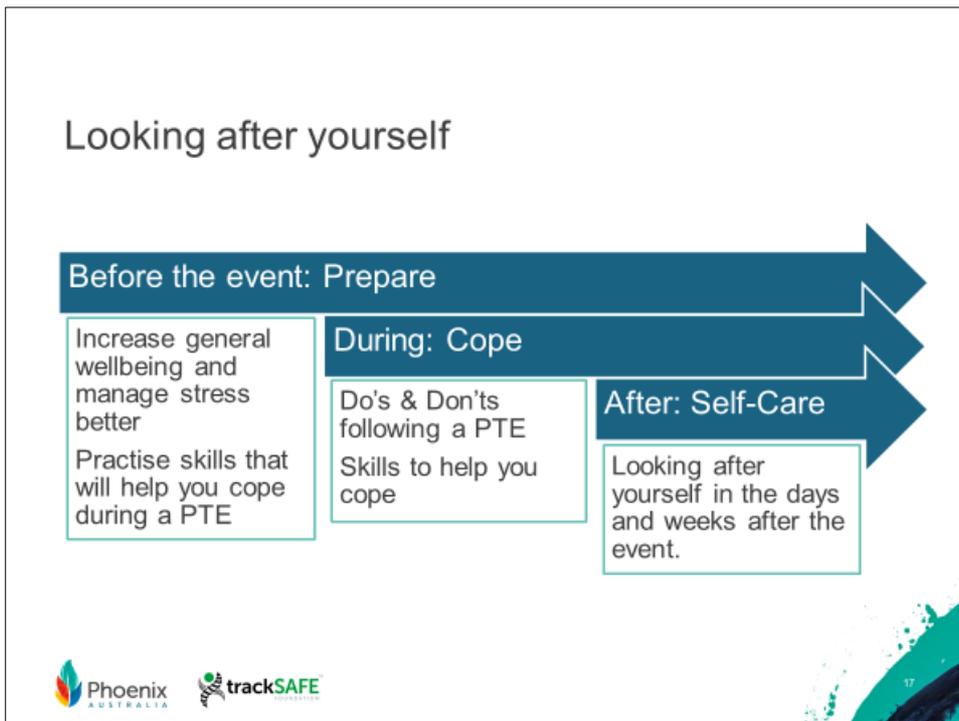
Looking after yourself – 1 hour 50 min session incl. break

This part of the workshop will take approximately 1 hour and 45 minutes and will include a 15 minute break. It aims to provide participants with:

1. an introduction to the types of coping strategies that are helpful both during and following a PTE
2. an introduction to the idea that these strategies can be practised immediately so that they are more effectively used at the time of an incident, and can also be practised to help participants improve their current lifestyle and therefore reduce the risk of not coping with a PTE
3. a list of do's and don'ts following a PTE
4. an opportunity to rehearse coping skills including breathing retraining, helpful thinking, and seeking social support.

For this session you will require:

- the TrackSAFE video *and* a whiteboard.



1. State that you will look at self-help strategies that can help participants cope better before, during and after a PTE.
2. Explain that you will help them rehearse some of these strategies so that they are better prepared and can:
 - manage their stress during a traumatic incident
 - look after themselves more effectively in the days and weeks following that incident.
3. Also state that, as previously indicated, you will discuss how they can better manage stress and improve their general wellbeing using these skills.



Using this slide, present the rationale for using self-help strategies as soon as possible and for developing a personal coping plan later in the session:

- The skills and strategies that we will teach you to improve your ability to cope with potentially traumatic incidents will be the same as the ones that will help you better manage stress in general.
- Regularly practising coping skills is the best way to ensure that you will use them if you are exposed to a PTE.
- Improving your ability to manage stress now and improving your lifestyle will put you in a better position to cope with the impact of a PTE. It is harder to cope with an incident if you are stressed, don't look after yourself, or have no supports in place.
- You can think of your capacity to manage stress as a bucket. There is only so much stress a person can handle. If a person has developed habits that put stress on their body and their ability to manage things in their life, it can leave little room for handling a very stressful event. This means that the bucket sits close to full from day-to-day, meaning that when something stressful or traumatic happen the bucket can overflow (i.e., the person can become very distressed).



The slide features the RAILRES logo at the top left, with 'RAIL' in blue and 'RES' in green. Below it is the title 'Improving wellbeing'. The content is organized into two columns. The left column is headed 'Make your life enjoyable' and lists three bullet points: 'Make time for things you enjoy', 'Stay connected with people who make you feel good', and 'Keep yourself healthy: regular sleep, healthy eating, exercise'. The right column is headed 'Reduce work stress' and lists three bullet points: 'Make the most of your breaks', 'Manage your time effectively', and 'Don't over-commit: prioritise tasks'. A fourth bullet point, 'Have holidays', is positioned below the right column. At the bottom left, there are logos for Phoenix Australia and TrackSAFE Foundation. The bottom right corner of the slide has a decorative teal and blue graphic with the number '19'.

Facilitator Note: Refer participants to RAILRES app – this has exercises, called Physical Activity and Healthy Sleep, that participants may wish to use after this training.

Remind participants that people are more likely to cope if they manage stress better and address potential risk factors like feeling burned out at work, or using alcohol to cope with stress.

Take participants through work and general lifestyle recommendations providing examples as needed.



The information on this and the following slide are included in the participant workbook - 'Improve your general wellbeing'.

Also, refer participants to the pleasant activity list in their workbook as a guide if they would like to have ideas about enjoyable activities they could engage in.

Improving wellbeing

Practise good coping skills

- Ask for help when you need it
- Don't rely on drugs & alcohol to feel better
- We'll cover some of these skills later in the session



20

Present positive coping strategies listed on slide, providing examples as needed.

Exercise: Improving wellbeing

Take a moment to consider the following questions and write down your answers. Do you:

- Have regular routines that help you feel good?
- Devote enough time to relationships & activities that you enjoy?
- Make the most of work breaks & breaks during the holidays?
- Tend to over-commit – never say ‘no’?
- Are you making time for things that are valued?
- *<each organisation to insert information on standard organisation procedures after a staff member has experienced a PTE>*



PARTICIPANT EXERCISE (individual)

5 min individual exercise with 5 min feedback to larger group



Handout from participant workbook – ‘Improving Wellbeing Worksheet’ – is required for this exercise.

Instructions

Ask participants to refer to the ‘Improving Wellbeing Worksheet’ in the participant workbook Ask them to reflect on the following questions and write down the answers on the worksheet.

- Do you have regular routines that help you feel good (e.g., exercise, reading a book)?
- Are you devoting enough time to relationships and activities that are enjoyable?
- Do you take regular rests from work – regular breaks during the day as well as holidays?
- Do you tend to over-commit – never say ‘no’?
- Are you making time for things that are valued?

Do you have regular eating, exercise and sleep patterns?

Managing strong emotions

Strategies that can be used during/after a PTE

Type of response	What can happen	Strategy
Physical	e.g., anxious, sweaty palms, heart racing	Breathing re-training; grounding
Thinking	e.g., "I can't cope with this"	Simple self-strategy
Behavior	e.g., freezing, yelling, drinking	Getting support, using time-out, or finding alternative activities



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Use this slide to introduce the range of strategies that will be covered in this session. Remind participants that PTEs can impact on how a person feels emotionally and physically, on how they think, and on what they do. In other words, when a person is distressed during or in the aftermath of a traumatic event, they may need different strategies to address physical symptoms of stress, negative thoughts, and unhelpful behaviours.



You can refer participants to a case study in their handbook illustrating how different strategies can help address physical and emotional responses as well as thoughts and actions. The case study is not meant to be used in the session as participants will work through to case studies later on in the workshop; rather it is a resource to be used as an overview and reminder after the training.

RAILRES
Exercise: Controlled breathing

Count to yourself

1 2 3 4 5 6
SECONDS

IN, TWO, THREE

RELAX, TWO, THREE

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PARTICIPANT EXERCISE (individual)

5 min individual exercise: skill demonstration

Aims of exercise

1. Help participants rehearse controlled breathing skill
2. Demonstrate benefit of controlled breathing

Instructions

Take participants through controlled breathing exercise (without explaining the theory behind it):

- Step 1: Ask participants to breathe normally and count their breath when they breathe out: “breathe in, breathe out one, breathe in, out 2, etc...” Tell them you will time them for one minute and ask them how many breaths they have counted. Write number next to initials on whiteboard.
- Step 2: Give participants the following instructions. ‘I will now teach you a different way of breathing. Take a normal breath in to the slow count of 3, and then breathe out to the slow count of 3. As you breathe out say the word “calm” or “relax” to yourself. When you do this exercise it is best not to shallow breath, i.e., high in your chest, but rather to breathe right down to your diaphragm. To do this, it can be useful to put a hand on your chest and stomach - as you breath in try to have the hand on your stomach move in and out, rather than the hand on your chest move up and down.’
- Step 3: Continue to breathe in and out slowly through the nose for one minute.

- Step 4: Ask participants to repeat Step 1 and compare breathing rates. After practising this technique in the workshop participants are likely to have found that breathing rate decrease from the Step 1 to a more relaxed breathing rate.

Explain to participants that they can use the technique in a couple of ways that will assist them to feel more relaxed when they feel intense emotions, are stressed, or over-breathe:

- Using this skill for 2-3 minutes each day will help them be more relaxed from day to day (could refer to bucket analogy), i.e., they will have a lower resting/baseline breathing rate.
- Regular practice makes it more likely that they will use this skill (and it be effective) in more stressful situations.



Refer to participant workbook telling them they have a handout with instructions – ‘Controlled Breathing Exercise’.

Facilitator Note: Refer participants to RAILRES app – this has an alternative (but similar) exercise that participants may wish to use after this training.

RAILRES
Grounding

Shifting attention away from negative feelings



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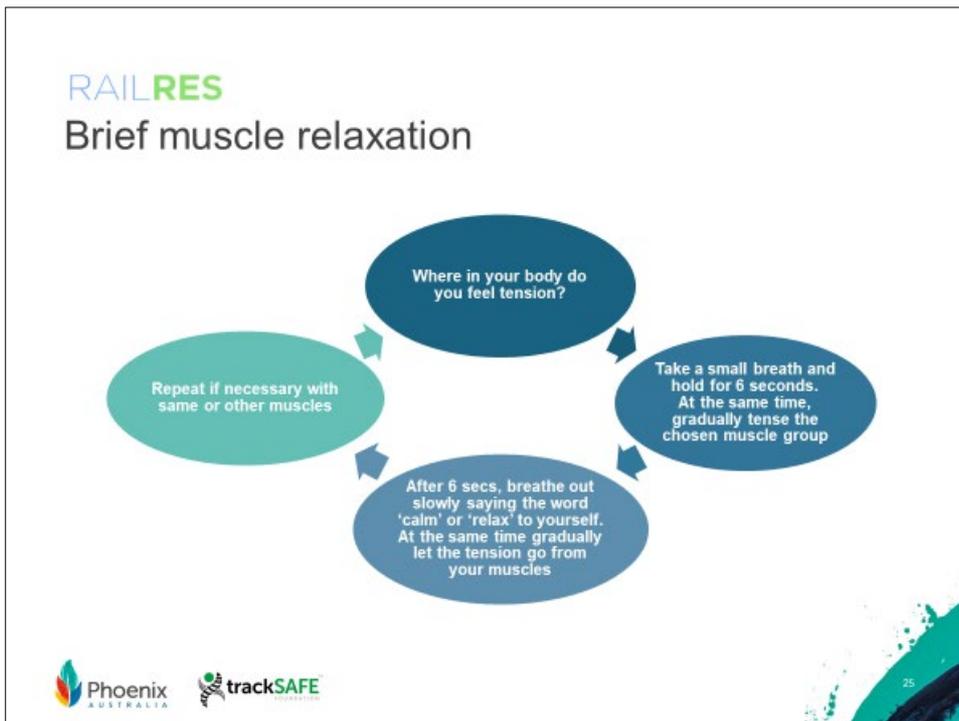
Present an overview of grounding techniques:

1. Grounding is a simple strategy you can use to distract yourself from strong negative emotions (e.g., anxiety, anger). Distraction works by focussing on the external world, rather than on internal feelings or physical responses to anxiety. It can help you feel in control again.
2. Grounding can be done at any time and anywhere. You can even do it in public, and no one will know.
3. There are different grounding techniques – you can pick the one that suits you most.
 - Describe your environment in detail, using all your senses, for example, “The walls are grey; I am sitting on a green chair ...” Describe sounds, textures, colours, smells, shapes, numbers, etc.... You can do this anywhere.
 - You can use counting to help focus: 5 things I can see; 5 things I can smell; 5 things I can feel; 5 things I can hear; then go down to 4, 3, 2 and 1.
 - You can also focus on your senses: Touch objects around you and describe them (texture, colour); feel the chair/steering wheel, etc.; run your hands under water.
4. When doing grounding, avoid any assessments or judgments about what is happening. Simply focus on concrete descriptions of what is around you and move on.
5. Focus on the present, not the past or the future.
6. Grounding is not the same as relaxation training. Grounding uses distraction so you can get away from bad feelings, and is intended to help manage strong negative emotions.



Refer to relevant section of participant workbook, telling them they have a handout with instructions – ‘Grounding’.

Facilitator Note: Refer participants to RAILRES app – this has an alternative (but similar) exercise that participants may wish to use after this training.



Present an overview of brief muscle relaxation:

- Brief muscle relaxation is a simple strategy you can use to reduce stress-related tension in your body. It can be done at any time and anywhere.

Steps of brief muscle relaxation

1. Pay attention to your body and consider, where in the body to you feel tension? For many people, stress-related tension is commonly felt in shoulders, neck and stomach muscles.
2. Take a small breath and hold for 6 seconds. At the same time, gradually tense the chosen muscle group, e.g., shoulders.
3. After 6 seconds, breathe out slowly saying the word 'calm' or 'relax' to yourself. At the same time, gradually let the tension go from the chosen muscle group, e.g., shoulders.
4. Repeat if necessary with same or other muscles where you feel tension.



Refer participants to the relevant page of the participant workbook – 'Brief muscle relaxation exercise'.

Facilitator Note: Refer participants to RAILRES app – this has an alternative (but similar) exercise, called Progressive Muscle Relaxation that participants may wish to use after this training.

Introducing helpful thinking skills

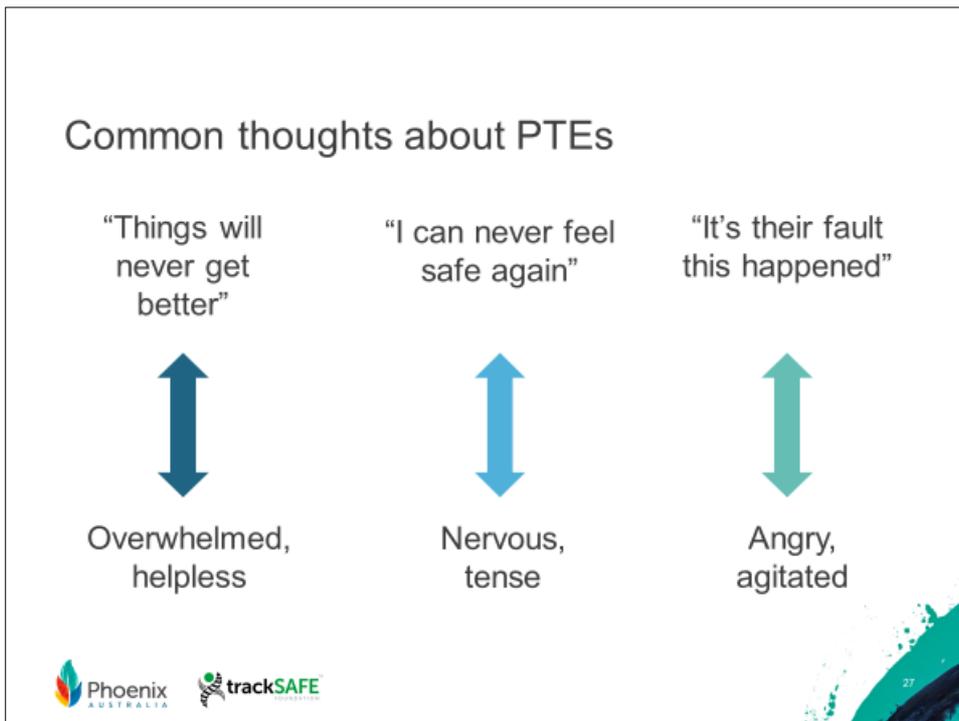
With this skill, the aim is to help yourself to:

- Learn to identify what you are saying to yourself about a PTE or your current situation and to choose less distressing ways of thinking
- Consider using this skill as a way of:
 - coping better during or after PTE,
 - increasing your wellbeing in day-to-day life



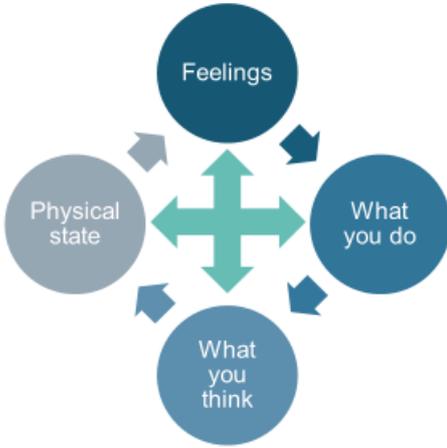
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Briefly present the aims of teaching this set of skills: to both increase coping during and immediately following a PTE, and to promote life skills to increase wellbeing.



1. **Describe types of negative thoughts often experienced during or immediately following a PTE:**
 - During a PTE, people may tell themselves things that reinforce how overwhelmed or distress they feel: “This is too horrible, I can’t bear this”, “I can’t breathe, I’m going to choke”.
 - After a PTE, it is common for people’s thoughts about the world and themselves to change. For example, staff who have experienced a PTE often see the world as stressful, unpredictable, or a dangerous place. They may have trouble trusting other people or see their situation as hopeless.
2. **Explain that distress is reinforced by negative thinking.** These types of beliefs can lead to intense and ongoing distress. Thinking that “absolutely nothing is going well”, or “things will never get better”, can leave a person feeling hopeless and overwhelmed. In the same way, thinking that “I will never be safe again” can lead to feeling tense and anxious.
3. Don’t debate with trainees whether or not their thoughts are justified; focus on whether they are helpful
4. *“After a PTE, it is common for people’s thoughts about the world and themselves to change. For example, staff who have experienced a PTE often see the world as stressful, unpredictable, or a dangerous place. They may have trouble trusting other people or see their situation as hopeless. Understandably, people feel deeply upset by things that happen during an incident. However, it helps to know that people under stress can develop habits of thought that actually make their situation even worse by increasing feelings of distress. “Unhelpful” habits of thought might include thinking that, “Absolutely nothing is going well”, or “Things will never get better.” We call these thoughts unhelpful because they can make it even more difficult to deal with the situation by increasing feelings of being overwhelmed or hopeless.”*

The way you think can help you cope



- Telling yourself to feel good does not work
- It is easier to change what you do or think, which will in turn change the way you feel

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Provide an introduction to Helpful Thinking skills.

1. Remind participants that they can manage distress or modify negative emotions by changing their thoughts, physical state (e.g., controlled breathing), or behaviours (e.g., following procedures during an incident or asking for support immediately following the incident).
2. Introduce how different thoughts bring about different feelings using an example: 'Today we are going to talk about how the way you think about things can change the way you feel. Let me give you an example about two different people. One morning, the first person wakes up and sees that it is raining hard outside. He thinks, "This is horrible! The traffic is going to be terrible on the way to work and I'll be late for the meeting. And I bet the boss is going to give me a hard time for turning up late." What do you think he is feeling? The second person wakes up and sees the rain. He thinks, "This may work in my favour. Even if I leave for work earlier, I'm sure I'll be late to work but at least it means I'll get to miss the beginning of the boring meeting. Others will probably be late too, so the boss can't really get annoyed." What do you think he is feeling? You see, how they thought about the rainy day made them have very different feelings.'

Helpful thinking is not positive thinking

- “Positive thinking” is not always realistic or accurate
- Negative thoughts may be (at least partly) accurate – even if they are unhelpful
- An over-focus on negative aspects of an experience often leads to more distress
- Focus on helpful thoughts can mobilise & energise



This slide is particularly relevant if you have a number of people in the room who have experienced a traumatic incident. This presentation will help them feel engaged and not judged by the focus on helpful thinking. However, its contents may feel much less relevant and somewhat abstract for those who have not had a traumatic experience and you may wish to skip, or very briefly cover the content, if you believe that no one in the room (or a minority) has had this experience.

Explain that developing more helpful thinking is about looking at alternative ways of thinking about a situation, not denying the person’s experience. Present the following points:

- The main aim of using this skill is to reduce distress by at least considering alternative, more helpful ways of viewing a person’s situation. The goal is not to eliminate negative thoughts or to replace them with thoughts that have nothing to do with the person’s situation like, “everything is all right”.
- “Positive thinking” is not always realistic or accurate. Often you hear people say things like, “If you’d only see things more positively, you’d be OK”. This does not acknowledge that people who have experienced trauma have come into contact with the darker side of life (e.g., death, someone being assaulted, or suicide), and may be worried about their reactions (e.g., nightmares, panic when reminded of trauma, etc.).
- However, an over-focus on negative aspects of an experience leads to more distress. This needs to be balanced with thinking about other aspects of a person’s experience, e.g., “I’ll never get better again” versus “I will struggle for a while but I know my family will stick with me”.
- Focussing on helpful thoughts can mobilise and energise.

RAILRES

Exercise: Practise helpful thinking

- Identify your most frequent unhelpful way of thinking
- Complete the entries on the worksheet to address this unhelpful thought
(*What do you expect the outcome to be?*)
- Rehearse the more helpful way of seeing things under your breath
- Spend a few minutes “seeing” yourself in a situation when this unhelpful thinking occurs, then rehearse the more helpful way of thinking again



PARTICIPANT EXERCISE (individual)

5 min demonstration, 10 min individual exercise, 5 min feedback



Handouts from participant workbook – ‘Helpful Thinking Examples’ & ‘Helpful Thinking Worksheet’ – are required for this exercise.

Aims of exercise

1. To help participants practise identifying negative thoughts.
2. To help participants practise developing more realistic, helpful way of thinking.
3. To help participants see the potential benefit of helpful thinking skills.

Instructions

Refer participants to ‘Helpful Thinking Examples’ and ‘Helpful Thinking Worksheet’.

Before asking the participants to complete the exercise, conduct a 5 minute demonstration. On the whiteboard, discuss and write up an example of the complete worksheet. Choose an example relevant to the audience, but it does not need to be an example related to a traumatic incident.

After the demonstration, provide the participants with the following instructions:

- Using the ‘Helpful thinking examples’ for assistance, identify your most frequent unhelpful way of thinking during the last week.
- Based on the helpful thinking examples, and using your own words, complete the entries on the worksheet to address this unhelpful thought. (What do you expect the outcome to be?)
- Rehearse the more helpful way of seeing things under your breath. Spend a few minutes “seeing” yourself in a situation when this unhelpful thinking occurs, then rehearse the more helpful way of thinking again.

Brief large group feedback discussion where some participants are invited to discuss how they found the exercise. Make sure that those who want to opt out of this discussion can. “Would anyone like to comment on how they found doing this exercise? What was hard/easy about it?”

Facilitator Note: Refer participants to RAILRES app – this has an alternative (but similar) exercise that participants may wish to use after this training. These exercises are called Thought stopping, Quick ways to reassess your thoughts and Challenging thoughts.

Exercise: Coping better during a PTE

James, near miss incident

- 47 year old freight train driver
- Experienced driver
- Involved in 2 previous incidents – both fatalities
- Deeply affected by last one – off work for a month
- Has to wait as incident occurred in isolated area

Derek, seeing body parts

- 27 year station staff
- Still 'learning the ropes'
- No previous exposure
- Man falls onto the tracks and hit by incoming train
- Jumps down to see if man can be helped



PARTICIPANT EXERCISE (whole group)

10 min discussion as a whole group

Aims of exercise

To review how the strategies discussed thus far in the workshop can be applied during a PTE.

Instructions

Two case studies are provided, although you may wish to modify the slide to only discuss the case study most relevant to the participants attending the workshop.

Encourage the group to consider and discuss potential strategies to use during and after these PTEs, and differences in needs and potential impact of these strategies for James and Derek.

For example, when discussing what each person can do *during* the PTE to better cope in each of these cases, the following points could be made:

- relaxation and breathing techniques can help manage the physical reactions to a trauma (e.g., racing heart, hyperventilating)
- knowing ahead of time what procedures need to be followed can be useful
- using helpful self-talk/thinking to keep focus on the task at hand can be useful
- strategies such as these may help minimise stress during a PTE.

**Exercise: Self-care after a PTE:
Tackling myths**

If I tell my colleagues, they will think I'm weak

Taking a lot of time off work is necessary for recovery

Having a few drinks helps settle my mind and get me to sleep

Talking makes it harder to get over it

I don't feel anything so I must be OK. Better to let things be.

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PARTICIPANT EXERCISE (whole group)

10 min group discussion

Aims of exercise

1. Help participants identify myths about coping
2. Help participants start to distinguish between coping behaviours that are helpful and those that are unhelpful.

Instructions

- Present myths about coping with PTEs listed on the slide.
- Ask participants to briefly discuss any other beliefs they or their colleagues have about what helps people cope with trauma.
- Write on whiteboard using two columns labelled “helpful” and “unhelpful”.
- Discuss helpful versus unhelpful strategies (Refer to information on the Do’s and Don’ts slides).

VIDEO: Looking after yourself

Play section from TrackSAFE video that shows staff affected by trauma, talking about self-help strategies



Optional – This video is very brief and you may wish to use it if you think it will assist with better engaging the participants.

This video excerpt presents staff discussing coping strategies that they use to manage their response to a traumatic event.

Play relevant section from TrackSAFE video:

- Looking after yourself (approx. 1 minute)

Self-care after a PTE



- Spend time with people who care
- Give yourself time
- Find out about impact of trauma and what to expect
- Try to keep your routine
- Return to normal activities
- Talk about how you feel or what happened when ready
- Do things that help you relax and that you enjoy



Present recommended coping strategies to cope with PTEs (Do's) listed on slide, providing examples as needed.

If you have played the TrackSAFE video excerpt, this slide and the following slide can be presented quickly, highlighting those dot points that were not covered in the video.

Self-care after a PTE



- Increase alcohol or drugs use to cope
- Work too much
- Engage in stressful family or work situations
- Withdraw from family and friends
- Stop yourself from doing things that you enjoy
- Avoid talking about what happened at all cost
- Take risks, e.g., dangerous driving, picking fights, etc.

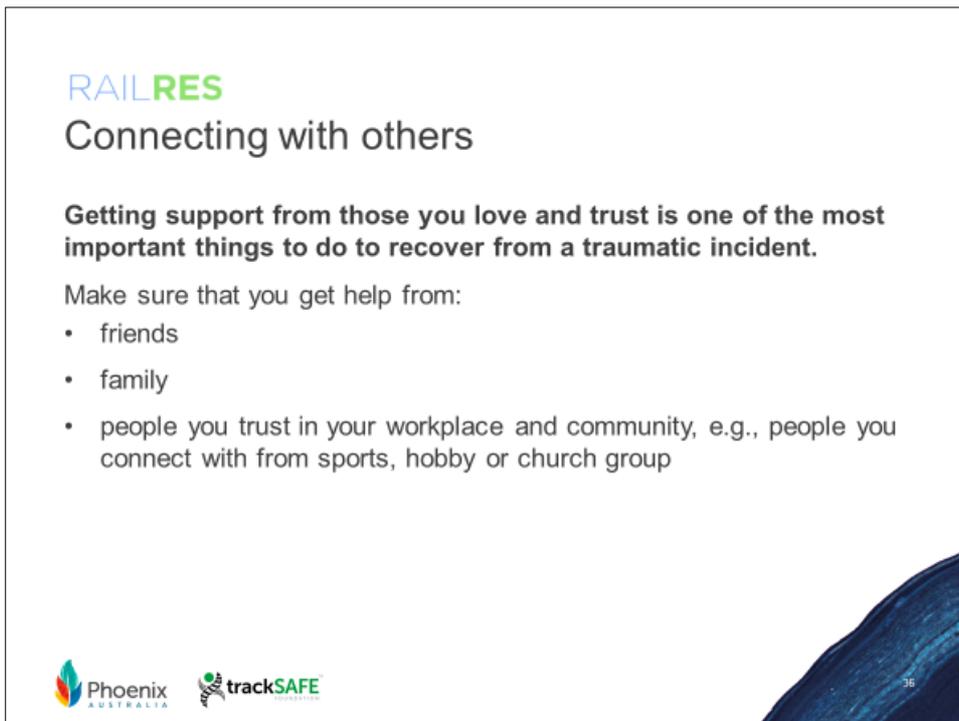


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Present negative or potentially harmful strategies to cope with PTEs (Don'ts) listed on slide, providing examples as needed.



Refer participants to the relevant page in the participant workbook – Self-care after a traumatic event; Do's and Don'ts after a traumatic event; explaining that they have a list of do's and don'ts in their workbook, and tips for self-care after a PTE.



RAILRES
Connecting with others

Getting support from those you love and trust is one of the most important things to do to recover from a traumatic incident.

Make sure that you get help from:

- friends
- family
- people you trust in your workplace and community, e.g., people you connect with from sports, hobby or church group

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Introduce the role of social support in coping with PTEs by covering the following points:

1. **Provide a rationale for focussing on social support.** Explain that good social support is the best predictor of recovery, “People with good support networks tend to cope better with the impact of a traumatic event. Getting support from those you love and trust is therefore one of the most important things you would need to do if you were exposed to a PTE”.
2. **State the aim of this section of the workshop.** Explain that the aim is to help participants think about how they might connect with social support networks, such as family, friends, colleagues and community organisations (e.g., church, sport or hobby group) in order to cope better with the aftermath of a PTE. “One of the goals of this workshop is to help you think about all the people in your life who could support you. Often there are people available for support who many of us do not think of accessing in times of stress. It is easy to forget the people who one sees or talks to every day can be important support systems, including family members (even children) and co-workers.”
3. **Briefly describe how relationships can be disrupted by a traumatic experience.** Explain that people can experience disruptions in their support network following a PTE for a number of reasons. For example:
 - Some people may feel overwhelmed and isolate themselves from their family, friends and/or co-workers.
 - Others may want to talk about their experiences but are struggling to find someone to listen, because people are not sure about how to react or how to help.
 - Some may be afraid of “burdening” their family, friends or co-workers with their problems.

- For some, the person who is their main source of support at work may have gone through the same incident and they may be avoiding that person because they feel they are not ready or able to talk about what happened.
4. **Finally, briefly address the role of negative relationships in coping with the immediate aftermath of a PTE.** State that relationships at home or at work that are not supportive can hinder recovery after a PTE, and that there will be time to reflect during this session on when social support is not working and how to improve participants' current social networks.

Facilitator Note: Refer participants to RAILRES app – this has an alternative (but similar) exercise, called Social Connection, that participants may wish to use after this training.

Types of support

People can support you in many different ways:

- **Practical support**
e.g.: a colleague helping with paper work or taking a shift
- **Emotional support**
e.g.: a friend listening to what happened to you; a spouse or partner spending time with you, not necessarily talking about the incident.



Introduce this slide by saying that many people think of seeking support as a sign of being “weak”, or that it is not what they need. They may think it’s only about talking about how they feel, or only relevant if they are no longer coping and need someone to “pick up the pieces”. Explain that there are many different kinds of support someone can access when faced with a stressful situation:

1. **Practical support.** Provide a few examples from the list below. If time permits, ask participants to generate examples.
 - A co-worker helping with paperwork or taking a shift.
 - A neighbour mowing the lawn for you.
 - A family member babysitting for you so you can relax or talk to someone about what happened.
 - A supervisor making sure you have the time off that you need and providing you with all the contact numbers you need.
2. **Emotional support.** Provide a few examples from the list below. If time permits, ask participants to generate examples.
 - A friend or family member listening to your experience.
 - A partner or child spending time with you doing things you like, not necessarily talking.
 - Someone, or a pet, being companionable – just being there for you.
 - A friend or co-worker giving you a hug when you need it.
 - Someone giving you space when you need it.



Refer participants to the relevant page of the participant workbook – ‘Connecting with others’.

Also, inform the participants that there is information in the workbook on helping others after a traumatic event – ‘Helping a colleague after a traumatic event’; ‘Helping a friend or family member after a traumatic event’. Participants may wish to provide this information to their family and friends.

Exercise: What kind of support do you have access to?



PARTICIPANT EXERCISE (individual)

10 min individual exercise, 5 min feedback



Handouts from participant workbook – Connecting with Others Worksheets 1 & 2 – are required for this exercise.

Aims of exercise

1. To help participants identify different spheres of support available.
2. To stress importance of going to already-established sources of support, not just relying on what is offered by work.
3. To start thinking about what needs to go in a self-help plan.

Instructions

Refer participants to 'Connecting with Others' worksheet. Ask participants to spend some time considering the following questions and then fill-out their 'social connections map' on the worksheet.

- Who are your most important sources of support at present?

- Who can you, or do you want to, spend time with socially at present?
- Who can you share your experiences or feelings with?
- Who provides you with practical support when you need it, both at work and at home (e.g., help with tasks, willing to babysit for you, or clean the house)?
- Who can you count on, no matter what?
- Who or what (including pets), provides you with companionship?

Also ask participants to identify what might need to be changed in their support network by answering the questions listed on the second page of their worksheet:

- Are there areas of your life where support is missing (e.g., someone to listen to you, help with the additional responsibilities, to do things socially with you)?
- Are there loved ones or friends who you are not currently connected with but would like to be?
- Who do you want to spend more time with?
- Who do you want to spend less time with?
- Are there some relationships that need improving?
- Do you want to increase your social activities or give to others by joining a community group?

Conduct a brief large group feedback discussion where some participants are invited to discuss how they found the exercise. Make sure that those who want to opt out of this discussion can: “Would anyone like to comment on how they found doing this exercise? What was hard/easy about it?”

What if I don't want to talk?

- There are alternatives to withdrawing entirely from your supports:
 - Talk in your own time
 - Spend time with people doing other things
 - Set limits - "I'm not ready yet..."
 - Some people push everyone away to avoid talking about what happened



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The content of this slide is designed for people who are afraid of being overwhelmed if they talk about a traumatic incident or about how they feel. Following a traumatic event some people can isolate themselves for these reasons. This slide provides alternatives to withdrawal or isolation by providing solutions that still enable a person to be connected to others while not necessarily having to talk about what happened or about how they are feeling. In presenting this content you need to cover the following:

1. Introduce the need for alternatives to social withdrawal.

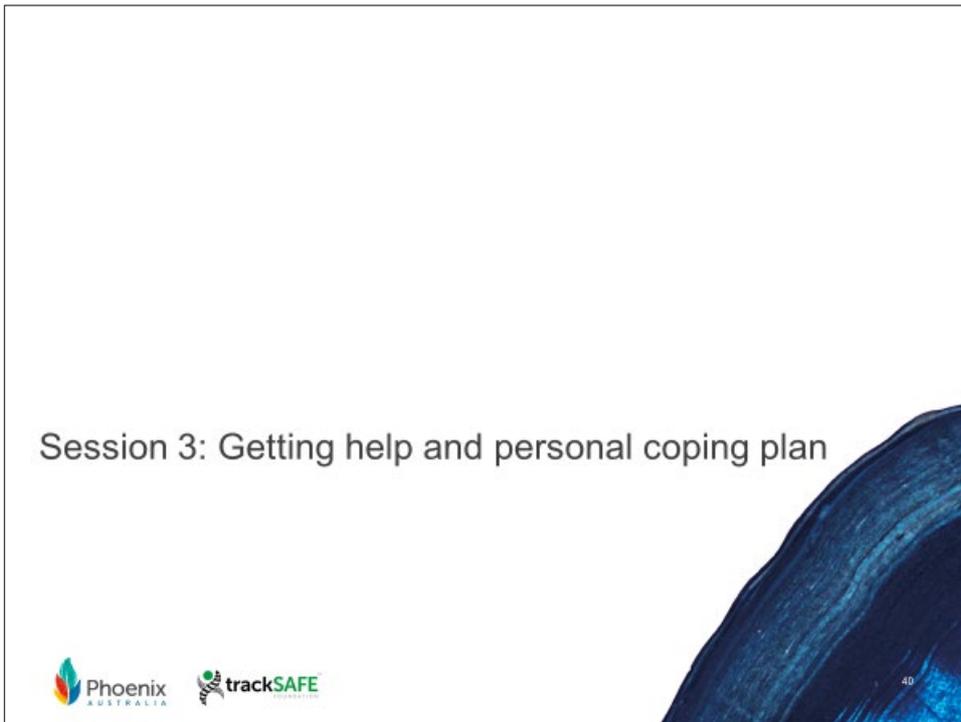
- “Some people are afraid of being overwhelmed if they talk about a traumatic incident or about how they feel. For some that fear may lead them to withdraw from others and to isolate themselves. As we have discussed already, it is not always necessary to talk about feelings or a traumatic experience to get support.

I will present a few alternative solutions that can help a person to stay connected with other people while not necessarily having to talk about what happened or about how they are feeling.”

2. Briefly describe alternatives to withdrawing from others.

- There is no rule about when to talk about what happened or when to share your feelings. Some people find it beneficial to talk about what happened after a PTE, others need to process it on their own at first or want to focus on other things in their life. You don't have to talk about what happened or how you feel, even if people ask you. If you choose to talk, you can talk in your own time, to the person of your choice.
- You can spend time with people without having to talk about your experience or your feelings. Playing a game of cricket with friends, spending time with your children, or going on regular walks with your partner may be just as beneficial. Sometimes people need to know what you need and telling them what you want to do with them can be a huge relief and will help them to be there for you.

- You can set limits for people without pushing them away completely. You could tell your partner, friend or co-worker things like, “I’m not ready to talk about it. I’ll let you know if I need to”, or “I’d rather we talk about other things. Let’s keep talking about the renovations we planned”. It may be useful to rehearse statements for these situations so that you don’t have to think about them too much or struggle to find the right words when confronted with people who are asking questions you don’t want to answer.



Getting help and developing a personal coping plan - 45 min session

This part of the workshop will take approximately 45 minutes and aims to provide participants with:

1. an understanding of warning signs of more serious emotional problems or an inability to cope, and when to seek help
2. an awareness of the type of help available (e.g., peer support, line supervisor, EAP)
3. an opportunity to develop a personal coping plan that includes:
 - strategies they can start to use immediately in order to be better prepared should they be exposed to a PTE
 - strategies to improve their current lifestyle
 - coping skills they would like to use during or immediately following an incident
 - a list of potential sources of support and help
4. an opportunity to familiarise themselves with the resource kit made available to them to help them look after themselves following a PTE
5. an opportunity to evaluate the workshop.

VIDEO: The importance of support

Play section from TrackSAFE video that shows staff talking about accessing supports



This video excerpt presents staff discussing the importance of accessing support, and types of supports available.

Play the relevant the section from TrackSAFE video:

- Importance of support (approx. 1 minute 30 seconds)

RAILRES
When to seek help

- Change in behaviour - e.g., “I can’t do the things I used to do”; “She is just not the same since that day”
- Problems are interfering with work or personal life
- No or very few signs of improvement after two weeks
- You’re worried about yourself
- Others are concerned about you - “Hey, you look like you’ve been struggling a bit lately. Are you OK?”
- Test your resilience on RailRes

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In introducing this slide it is important to cover the following points.

1. **Put help-seeking in context by reiterating the message that recovery is the most likely outcome of experiencing a PTE.** In other words, don’t set up expectations that people won’t be able to cope or will be “damaged” by a traumatic experience. Remind participants that many people cope well after a traumatic incident, or recover from their initial distress a few days or weeks later. Explain that it is nonetheless important to understand when to seek help in order to recover quickly if they feel overwhelmed or struggle to cope with a PTE.
2. **Describe signs of seeking help as listed on slide.** Provide concrete examples as needed.

Facilitator Note: There is a brief questionnaire on the RailRes app, called Test your Resilience, that participants may find helpful to track their progress. Note this is not a diagnostic questionnaires.



Describe signs for seeking help as listed on slide. Provide concrete examples as needed.

State that using drugs and alcohol to cope (e.g., to help with sleep, to feel less anxious or to numb feelings) is a common response and that this can spiral out of control if it is the only coping mechanism the person is relying on. State that moderating drinking or use of drugs after an incident can help ensure recovery.

Explain that withdrawal from others is also a common response, and that sometimes a professional can help a person find a safe way to reconnect with other people and get the support they need.

Other signs

- Have you had nightmares about it or thought about it when you did not want to?
- Tried hard not to think about it or went out of your way to avoid situations that reminded you of it?
- Were constantly on guard, watchful, or easily startled?
- Felt numb or detached from others, activities, or your surroundings?



Describe signs of seeking help as listed on slide. Provide concrete examples as needed.

Explain to participants that these four types of problems are common responses to traumatic incidents and that for many people these will dissipate in the days and weeks after the incident. State that if these problems last longer, or have an impact on a person's ability to work or engage in day-to-day activities, they may indicate the need for professional help.

Note that these questions are based on the Primary Care PTSD Screen (PC-PTSD)¹. You do not need to state this to participants as this may overload them with information and would not be relevant at this stage. However, if you get enquiries from participants about this set of questions, particularly from those who have had previous PTEs or have developed PTSD, the reference to this screen is in the footnote at the bottom of this page.

¹ Prins, A., Ouimette, P., Kimerling, R., Cameron, R. P., Hugelshofer, D. S., Shaw-Hegwer, J., Thrailkill, A., Gusman, F.D., Sheikh, J. I. (2003). The primary care PTSD screen (PC-PTSD): development and operating characteristics. *Primary Care Psychiatry*, 9, 9-14



Discuss support options for staff, e.g., EAP, peer support network, supervisor, management, professional counselling or treatment services.



Refer participants to the 'Getting help' handout in the participant workbook. This handout is one that you will need to modify for your organisation prior to training. The handout provides a list of support options available through the organisation as well as services that participants might find useful (e.g., confidential 24 hour helplines, database of psychologists). The handout also allows participants to add contact details of people in the organisation and professionals they trust (e.g., their GP).

Ensure that you leave some time for participants to ask questions about available support options if they need to.

Looking after yourself: Drafting a plan

Make a commitment to improve your wellbeing & practise strategies that will help you cope during a PTE

PREPARE Before a PTE	COPE During a PTE	SELF-CARE After a PTE
1-2 skills you can practise to manage stress during a PTE	Skills to help you cope	Skills to help you recover
1-2 things you can do at work to improve wellbeing	Procedure to follow	Support at work
1-2 things you can do at home to improve well being	Who to call	Support at home & activities that help you feel better



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In introducing the personal coping plan, ensure that you cover the following topics:

1. Introduce the 3 elements of the personal coping plan:

- **Prepare** before a PTE: consider skills to practise in order to better manage distress should you experience a PTE, and strategies for improving your wellbeing at work and at home.
- **Cope** during a PTE: list the skills, procedures or immediate supports to contact at the time of an incident.
- **Self-care** after a PTE: consider coping skills you may use and people who may support you at home and at work.

2. **Ensure that people focus on a range of strategies.** Explain that in thinking about self-care after a PTE or improving current lifestyle, it is important to focus on what can be done both at home and at work.

3. **Briefly describe the principles of an effective plan.** State that the strategies they are putting in their plan should be specific, realistic and measurable. Provide one or two examples: “Writing down that you will try to relax after work, for example, is not specific enough. It is hard to keep track of what you will do, when, or how. That makes it more difficult to make a commitment to do it. On the other hand, you could write down, ‘Every day after I get home from work, just before dinner, I will go for a 20 minute walk with the dog.’”

4. **Briefly review the rationale for starting to practise coping strategies as soon as possible, and for developing a personal coping plan.** When presenting this slide, remind participants that:

- the skills and strategies used to improve your ability to cope with potentially traumatic incidents are the same as the ones that will help you better manage stress in general
- regularly practising coping skills is the best way to ensure that you will use them if you are exposed to a PTE
- improving your ability to manage stress now and improving your lifestyle will put you in a better position to cope with the impact of a PTE. It is harder to cope with an incident if you are stressed, don't look after yourself, or have no supports in place.

Exercise: Complete coping plan

- Only include activities that you're confident you'll use, rather than activities you think you "should" do
- Highlight the activities that you plan to practise (e.g., controlled breathing) – see last box on your plan
- Make a note of when you'll practise them, e.g., put daily reminder with alert in your phone to practise controlled breathing for next month



PARTICIPANT EXERCISE (individual)

10 min individual exercise, 5 min feedback



Handout from participant workbook – 'Personal Coping Plan' – is required for this exercise.

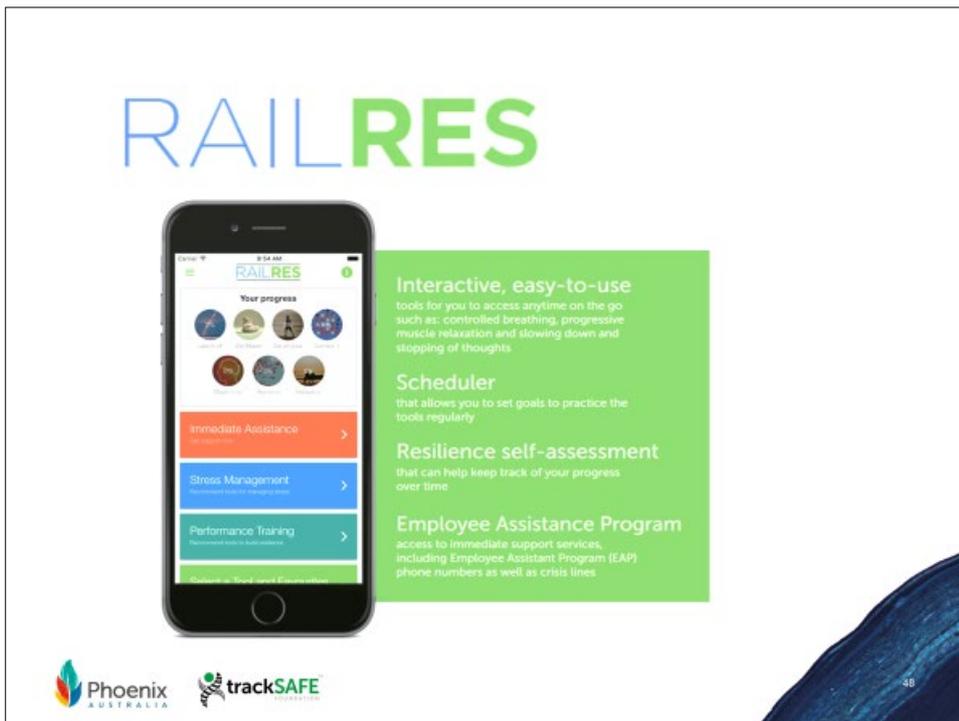
Aims of exercise

1. To help participants identify sources of support and self-help strategies they would use to cope better during and following a PTE or to improve current ability to manage stress.
2. To encourage participants to prioritise one or two strategies that they can start practising immediately.
3. To ensure that participants have a written record of what would help them cope better.

Instructions

Refer participants to the personal coping plan handout in their workbook and ask them to complete the plan.

Conduct a brief large group feedback discussion where each participant is asked to name one thing they plan to try out to improve their wellbeing. It is important to allow people not to provide feedback if they choose not to: "If you do not want to provide feedback or are not sure about what you want to do, it's OK to say: 'I will need to think about this or I'm not sure yet'."



- Remind participants of the RailRes App and encourage them to download it today.
- Remind participants of the activities that are relevant to the skills discussed during the workshop:
 - Physical Activity
 - Healthy Sleep
 - Controlled breathing
 - Grounding
 - Progressive Muscle Relaxation
 - Thought Stopping
 - Quick Ways to Reassess your Thinking
 - Challenging Thoughts
 - Social Connection
- Inform participants of the *other* features and skills on the App that they may find useful:
 - Goal setting and ability to track progress
 - Distraction
 - Emotional Control
 - Controlling Anger

Facilitator Note: Below is some information about the RailRes App, as described by TrackSAFE:

- The RailRes App is a resource that has been developed by TrackSAFE as part of its suite of trauma management support tools.
- The App is designed to assist rail employees in managing stress if exposed to a traumatic event and build long term resilience to help employees stay healthy. The RailRes app has been informed by an industry reference group and the unions, to ensure that the app is relevant and beneficial to rail employees.
- The RailRes app will test a rail employee’s physical, cognitive, emotional and behavioural reactions to stress, while helping the user adapt their response to the situation in real time.
- The App is available for free download (for both iPhone and Android devices) via the App Store
- **App features**
 - Access to immediate support services, including Employee Assistance Programs phone numbers as well as crisis lines.
 - Interactive, easy-to-use tools that the user can access on the go such as: controlled breathing, progressive muscle relaxation and slowing down and stopping of thoughts.
 - A scheduler that allows users to set goals to practice the tools regularly.
 - A resilience self-assessment that can help users keep track of their progress over time.
- More information, a video, and downloadable posters are available here:
<http://tracksafefoundation.com.au/railres-app>

Prompt cards

PHOENIX AUSTRALIA Centre for Posttraumatic Mental Health

trackSAFE FOUNDATION

Looking After Yourself: Self-Care After Trauma

Support at work

Support at home

PHOENIX AUSTRALIA Centre for Posttraumatic Mental Health

trackSAFE FOUNDATION

Coping During Trauma

Procedures to follow

Who to call & what to report

PHOENIX AUSTRALIA Centre for Posttraumatic Mental Health

trackSAFE FOUNDATION

Controlled Breathing

COUNT TO YOURSELF



This slide will need to be modified for your organisation. The aim of this slide is to inform staff about the prompt cards that have been provided (in soft copy) with this training package. This slide does not include all the prompt cards that are relevant to the Coping with Trauma workshop. Refer to the soft copy of the 'Prompt Cards' that are provided.

It is up to each organisation whether they print and provide these to their staff. Delete this slide if your organisation is not going to provide these.

Conclusion

- Questions?
- Please complete workshop evaluation form



At the end of the workshop, make sure that you:

- ask if participants have any questions, and address any remaining issues or concerns
- ensure all participants have completed the attendance list (Refer to Appendix of Trainer Manual – General) and evaluation materials (see Appendix 2)
- thank the participants for their involvement.

A discussion of the evaluation process at the end of the workshop is crucial. It is vital that participants provide feedback about how useful they found the training and which parts they felt were most useful or relevant. It is only by getting this information that the organisation can modify the training to ensure it meets the needs of staff. Distribute the relevant evaluation forms and make sure everyone understands what is expected of them.

Appendix 1

Coping with Trauma: Training Fidelity Checklist

Thinking about your delivery of the workshop, please answer the following questions:

1. Were you able to keep to the schedule for the training?

Yes

No

If you responded 'No', please indicate which parts of the training you spent extra time on and why

--

2. Did you cover the following topics? Please tick the column that indicates the appropriate response and explain why, if required.

Topic Area	Yes	Partially	No	If you ticked 'Partially' or 'No', please explain why
Aim and rationale of workshop				
The impact of PTEs and recovery patterns following a PTE				
Risk factors for not coping following a PTE				
Introduction to self-help strategies and rationale for being prepared ahead of a PTE				
Managing strong emotions				
Helpful thinking to cope better with a PTE (incl. case study)				
Myths about coping, and Do's & Don'ts following a PTE				
Getting support from friends, etc.				
Getting help: when and where				
Developing a personal coping plan				

3. When conducting the participant exercises, did you meet the following objectives? Please tick the column that indicates the appropriate response and explain why, if required.

Exercise objective	Yes	Partially	No	If you ticked 'Partially' or 'No', please explain why
Common reactions and responses to PTEs				
Managing stress and increasing wellbeing				
Controlled breathing				
Identifying negative thoughts and developing helpful ways of thinking				
Coping myths, helpful and unhelpful coping behaviours				
Identifying available support				
Identifying self-help strategies and developing a personal coping plan				

Appendix 2

Workshop evaluation

Your organisation may have existing methods for evaluating their training programs. However, we have included on the following pages two example forms that you may wish to tailor for your organisation. It is not intended that you use both these examples.

Coping with Trauma: Participant Evaluation Form (Post)

This form is administered at the end of the workshop and gauges participants' views on a range of issues, from how much they learned from the workshop to the quality of the delivery and facilities.

Coping with Trauma: Participant Evaluation Form (Pre/Post)

The first part of this form (Pre) is administered at the beginning of the workshop to get a sense of the 'baseline' or starting point of the participants' knowledge and skills in this area. The second part of this form (Post) is administered at the end of the workshop, and includes questions on knowledge and skills, as well as workshop quality and delivery. This method of evaluation allows you to get an indication of any changes in knowledge, skills and confidence that occurred during the workshop.

Coping with Trauma: Participant Evaluation Form (Post)

Workshop date: _____

1. How would you rate the **overall quality** of this workshop?

1	2	3	4	5
poor				excellent

2. To what extent did you gain **new knowledge**?

1	2	3	4	5
not at all				a large extent

3. To what extent did you gain **new skills**?

1	2	3	4	5
not at all				a large extent

4. To what extent do you think you will **practice and use the new skills** discussed in this workshop?

1	2	3	4	5
not at all				a large extent

5. How would you rate how well the presenter communicated the main **ideas**?

1	2	3	4	5
poorly				very well

6. To what extent did the presenter facilitate **useful discussion**?

1	2	3	4	5
not at all				a large extent

7. The organisation of the workshop was:

1	2	3	4	5
poor				excellent

8. The workshop facilities were:

1	2	3	4	5
poor				excellent

9. What were the best things about the workshop?

10. How could the workshop be improved?

11. Would you recommend this training to other people? Yes No

Thank you for completing this form. We value your feedback.

Coping with Trauma: Participant Evaluation Form (Pre/Post)

Pre-workshop questions

Workshop date: _____

How many years have you worked for this organisation? _____

As you understand it, what is this organisations current response/support for employees after they have been involved in a critical incident?

Please consider **how much to you agree with each of the following statements** regarding workplace trauma.

1. I am aware of the particular psychological hazards that I may be exposed to at work

1 2 3 4 5
Strongly disagree Strongly agree

2. I am aware of common reactions to potentially traumatic events (PTEs)

1 2 3 4 5
Strongly disagree Strongly agree

3. I am aware of what kind of response to expect from the organisation in the event of a PTE

1 2 3 4 5
Strongly disagree Strongly agree

4. I have some simple coping skills to help me cope with any trauma that I may experience

1 2 3 4 5
Strongly disagree Strongly agree

5. I know where to seek support from others in the organisation

1 2 3 4 5
Strongly disagree Strongly agree

6. I have a personal plan for how I would prepare for and cope with a PTE

1 2 3 4 5
Strongly disagree Strongly agree

Thank you for completing the pre-workshop questionnaire.

On the next page is the post-workshop questionnaire, please do not continue onto the next page until instructed to do so by your trainer at the conclusion of your training.

Post-workshop questions

Please consider **how much to you agree with each of the following statements** regarding workplace trauma.

1. I am aware of the particular psychological hazards that I may be exposed to at work

1	2	3	4	5
Strongly disagree				Strongly agree

2. I am aware of common reactions to potentially traumatic events (PTEs)

1	2	3	4	5
Strongly disagree				Strongly agree

3. I am aware of what kind of response to expect from the organisation in the event of a PTE

1	2	3	4	5
Strongly disagree				Strongly agree

4. I have some simple coping skills to help me cope with any trauma that I may experience

1	2	3	4	5
Strongly disagree				Strongly agree

5. I know where to seek support from others in the organisation

1	2	3	4	5
Strongly disagree				Strongly agree

6. I have a personal plan for how I would prepare for and cope with a PTE

1	2	3	4	5
Strongly disagree				Strongly agree

The following questions cover more general aspects of the workshop.

1. How would you rate the **overall quality** of this workshop?

1	2	3	4	5
poor				excellent

2. To what extent did you gain **new knowledge**?

1	2	3	4	5
not at all				a large extent

3. To what extent did you gain **new skills**?

1	2	3	4	5
not at all				a large extent

