## CRITICAL INCIDENT STRESS MANAGEMENT PROGRAM (CISM) Summary from March 2018 – June 2019

## Question from Legislative Oversight Committee 6/28/19

"How does the agency evaluate whether the Critical Incident Stress Management Program, established to provide support services to staff, is successful? What data, if any, is tracked (e.g. customer satisfaction from staff participating in the program)?"

The Critical Incident Stress Management Program (CISM) was established in 2018, within the Division of Victim Services, under Programs, Reentry and Rehabilitative Services, to support staff who have been assaulted or otherwise experienced trauma through work-related or personal events.

In October 2018, CISM Program staff conducted focus groups with staff around the state to identify work-related safety/stress/assault concerns as a baseline within the agency before the CISM Program was fully implemented. Eight focus groups were facilitated across the state and 51 SCDC employees participated. In addition, a staff survey was broadcast to every employee in August of 2018. A total of 120 employees participated in the survey. There are ongoing efforts to analyze the impact of CISM Program at many different levels. Through partnerships with the Medical University of South Carolina (MUSC), SC-LEAP (South Carolina Law Enforcement Assistance Program) and the University of South Carolina (USC) in addition to internal activities within SCDC (evaluations, etc...), we anticipate validating the success of the CISM Program continuously.

PCIS Participants complete a research instrument that is included in a larger, multistate/multijurisdictional research project, evaluating the impact of PCIS events on law enforcement staff. These instruments are forwarded to MUSC for independent evaluation. Each participant is contacted by MUSC three, six and twelve months following their participation in a PCIS to provide additional, longitudinal information to more effectively evaluate the impact. USC is currently administering a staff wellness and resiliency survey to be sent to every SCDC employee.

The following is a summary of services that have been provided to date, through the CISM Program:

March 2018 through December 2018 the CISM provided support services to a total of 373 staff/families.

- > Debriefing process of the Aftermath of Lee CI riots crisis = 255
- ➤ December, 2018 Post Critical Incident Seminar (PCIS) = 21

- $\triangleright$  Staff assaults = 59
- ➤ Hostage situation= 2
- > Staff/officers witness/experienced traumatic events = 33
- Work/personal related acute stress = 3

Facilitated Focus Groups = 51 participants

Conducted Staff Survey = 120 completed survey

CISM Peer Team Members Trained = 33

From January 2019 through June, 2019 the CISM Program provided support services to a total of **363** to staff/officers/families.

CISM Peer Team Members Trained = 32

- June PCIS (Post Critical Incident Seminar) 31
- Work Related Issues:
  - o Staff assaults = 55
  - Staff witnessed/involved in traumatic events = 173
  - o Death of coworker = 2
  - o General work-related stress = 19
- Personal Related Issues:
  - Death of loved one/grieving support = 10
  - o House fire = 1
  - o Personal Stress = 29
  - o Personal Crisis = 2
  - o Family Crisis = 9

Outreach/Education about the CISM Program = 241

The following are a few quotes from PCIS participants, describing their experience:

- "Peace that I desperately needed in my professional as well as personal life; so many coping tools to aid me in my healing process"
- "A means to move on from the incident"
- "To learn more self-control of life situations such as death, loss in a family or material things; dealing with life overall"
- "I don't have to be afraid or embarrassed to reach out for counseling"
- "It's okay to feel the way I do"
- "We all have a story to tell"
- "My life can finally begin again, starting now!"
- "Life-changing!"

## PCIS First Day Questionnaire - Principal Participant

Name		Date	
If you are a	ttending the PCIS with anybody, name of compar	nion:	
1. In w	hich state are you attending the PCIS?		
0 0 0 0	Georgia Kentucky North Carolina Ohio South Carolina Texas Virginia		
2. Date	of PCIS (month & year)		
	of birth (mm/dd/yyyy) Prefer not to answer		
4. Wha	t is your gender?		
0	Female Male Prefer not to answer Other (Please specify)		
5. Wha	t is your race? Please check all that apply:		

O High school O Some college O Associate's degree O Bachelor's degree O Some graduate school Master's degree O Doctoral degree O Prefer not to answer  7. What is your current relationship status? Please check all that apply: ONE Material Partnered/committed relationship Not in a relationship currently Committed relationship Partnered Married Separated Divorced Widowed Prefer not to answer Other (Please specify)  8. Are you attending the PCIS with anybody?  No, I am by myself Yes, I am with a spouse Yes, I am with a fiancé/fiancée Yes, I am with a fiancé/fiancée Yes, I am with a faincé/fiancée Yes, I am with a fainchofboyfriend Yes, I am with a fainchofboyfriend Yes, I am with a friend  9. In which state do you work? O Prefer not to answer  10. Are you a sworn officer? Yes No Prefer not to answer	<ul> <li>Some college</li> <li>Associate's degree</li> <li>Bachelor's degree</li> <li>Some graduate school</li> <li>Master's degree</li> <li>Doctoral degree</li> <li>Prefer not to answer</li> </ul> 7. What is your current relationship status? Please check all that apply: <ul> <li>Never married/partnered/committed relationship</li> <li>Not in a relationship currently</li> <li>Committed relationship</li> <li>Partnered</li> <li>Married</li> <li>Separated</li> <li>Divorced</li> <li>Widowed</li> <li>Prefer not to answer</li> <li>Other (Please specify)</li> </ul> 8. Are you attending the PCIS with anybody? <ul> <li>No, I am by myself</li> <li>Yes, I am with a spouse</li> <li>Yes, I am with a flaincé/fiancée</li> <li>Yes, I am with a girlfriend/boyfriend</li> <li>Yes, I am with a family member</li> <li>Yes, I am with a friend</li> </ul> 9. In which state do you work? <ul> <li>Prefer not to answer</li> </ul> 10. Are you a sworn officer? <li>Yes</li> <li>No</li>	U.	AATIGU	as the nighest level of education you have received?
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o Prefer not to answer  10. Are you a sworn officer?  o Yes o No o Prefer not to answer	<ul> <li>O Prefer not to answer</li> <li>10. Are you a sworn officer?</li> <li>O Yes</li> <li>O No</li> </ul>			
o Prefer not to answer  10. Are you a sworn officer?  o Yes o No o Prefer not to answer	o Prefer not to answer  10. Are you a sworn officer?  o Yes o No	g.	In wh	ch state do vou work?
10. Are you a sworn officer?  o Yes o No o Prefer not to answer	10. Are you a sworn officer?  o Yes o No	۶.		
o Yes o No o Prefer not to answer	o Yes o No		Ü	TICICI NOT TO WIDAACI
o No o Prefer not to answer	o No	10.	Are yo	ou a sworn officer?
o Prefer not to answer			o	Yes
	o Prefer not to answer		0	No
11 Number of years of mubble safety oversions (onto much or only)			О	Prefer not to answer
11 Number of years of public enfats experience (entar purchas entar)				
11. Ivalibel of years of public safety experience tenter number (iniv)	11. Number of years of public safety experience (enter number only)	11.	Numb	er of years of public safety experience (enter number only)

0	Prefer not to answer
12. For wl	nich department do/did you work? Please check all that apply:
	City Police County Sheriff Crime Lab Crime Scene Investigator Department of Corrections Department of Juvenile Justice Department of Natural Resources/Ranger/Conservation Law Enforcement EMT/Paramedic Federal Law Enforcement Firefighter Forensic Computer Investigator Highway Patrol Internet Crimes Against Children Task Force Military Law Enforcement Pardon and Probation Agent State Police Telecommunicator/Dispatcher Transit Police University/College Police Prefer not to answer Other (Please specify)
□ Or □ Tw □ No	hat reason are you at this PCIS? Please check all that apply:  ne work critical incident  vo or more work critical incidents  on-work related critical incident(s) (e.g., death of loved one or illness)  umulative stress from being a first responder
14. What check	stress management interventions have you done since your critical incident(s)? Please all that apply:
□ De □ Inc □ Pr □ Inc □ En □ Nc □ Pr	ebriefing dividual peer team member meeting(s) imary Care Provider dividual mental health professional meeting(s) inployer EAP one efer not to answer

15. Have you attended any PCISs/STLSs in the past?

- o Yes
- o No

15a. If "Yes,"

#	PCIS or STLS?	State	Date (Month & Year)	Did you attend for the current incident(s)/ loss(es) or different one(s)?
1				
2				
3				
4				
5				

	Fatally shot offender
	Non-fatally shot offender
1.1	Fired at offender, but missed
L	Shot at, but not struck
₽	Officer involved shooting
	Wounded in line of duty
C)	Physically assaulted
1.1	
CI	Suicide of fellow officer
	Fellow officer wounded in line of duty
[]	Off-duty death of fellow officer
Π	Motor vehicle fatality
Ü	High speed pursuit
_	Suicide – called to
	Suicide – witnessed
П	Suicide - offender-provoked
D	Multiple casualty incident
D	Incident involving children
IJ	Injury of innocent bystander
	Death of innocent bystander
E)	Personally knew victim or offender
	Scene with particularly disturbing or grotesque elements
	Long duration, drawn-out incident or aftermath
	Took too long for back-up or medical assistance to arrive
	Personally undertook unsuccessful life-saving measures
	Others undertook unsuccessful life-saving measures
	Friendly fire shooting
D	Believed I was going to die
	Thoughts of being powerless or helpless
C.I	Death of a loved one
	Prefer not to answer
	Other (Please specify)

16. Which of the following did your critical incident(s) include? Please check all that apply and note that "officer" is used to represent officer, deputy, agent, special agent, ranger, etc.

_	ou experience any additional stressors related to the critical incident(s) that occurred it? Please check all that apply:
D	Offender never apprehended
ta	Offender not found guilty
Ð	Excessive duration of trial
ñ	Excessive or negative media attention
ĽJ	Felt need to protect family from details
다	Negative response from family members or friends
IJ	Negative community response
U	Negative response from co-workers
11	Placed on medical leave
O	Placed on administrative leave
ū	Lack of departmental support
D	Worried that someone would retaliate against me
C.J	Thought that people/groups/agencies I looked to for support turned against me
п	Family had problems/conflicts because of the critical incident(s)
נו	Sued
41	Suspended
П	Fired
Ð	Charged
0	Indicted

Prefer not to answerOther (Please specify) \_

- 18. How would you rate your communication with your significant other about your critical incident(s)?
  - o I communicate much less than I need to do
  - o I communicate a little less than I need to do
  - o I communicate just enough
  - o I communicate a little more than I need to do
  - o I communicate much more than I need to do
  - Not applicable
  - Prefer not to answer
- 19. How would you rate the impact of your critical incident(s) on your relationship with your significant other?
  - o It has made our relationship much worse
  - o It has made our relationship a little worse
  - o It has not changed our relationship
  - o It has made our relationship a little better
  - o It has made our relationship much better
  - o Not applicable
  - o Prefer not to answer
- 20. How many problems do you see now in your family as a result of your reactions to your critical incident(s)?
  - I see many problems
  - o I see a few problems
  - o I don't see any problems
  - o I see less problems
  - I see a lot less problems
  - Not applicable
  - o Prefer not to answer
- 21. How would you rate the personal impact upon your significant other of your critical incident(s) and the aftermath of it/them?
  - o It has caused them significant distress
  - o It has caused them a little distress
  - o It has not affected them
  - It has made them feel a little better
  - o It has made them feel a lot better
  - Not applicable
  - Prefer not to answer

<b>22.</b>			
Please indicate whether your critical incident(s) currently impacts each of these areas.	Yes	No	Prefer not to answer
My general sense of well-being	0	0	0
My physical health	0	0	0
My emotional health	0	0	0
My sleep	0	0	0
My appetite	0	0	0
My meaning in life	0	0	0
My spiritual life	0	0	0
My sex life	0	0	0
My behavior	O	0	0
My family	0	0	0
My friends	0	0	0
My work peers	0	0	0
My work effort	0	0	0
My community involvement	0	0	0
My financial situation	0	0	0
<ul> <li>Prefer not to answer</li> <li>Have you experienced another critical incident(s) besides</li> </ul>	les the one(s)	that brought	you here?
o Yes (Please specify:			)
o No			·
o Prefer not to answer			
24. How would you rate your physical health since the cri	tical incident(s	s)?	
o Worse			
o Same			
o Better			
o Prefer not to answer			
24a. If you answered "Worse" or "Better," please spec "Prefer not to answer" if you need to do so.	ify how your	health has ch	anged. Write

your critical inci-	dent(s)?		•		·	you have ha	
0	0	_	. 0		0	0	
More than usual	Same as us	sual	Less than usi	ual Not	applicable	Prefer not to a	nswer
26. Since your critical alcohol?	al incident(s)	), have	you ever felt	you shou	ld cut down o	n your drinki	ng of
0		0		0,,,,,	0		
Yes		No	Not ap	plicable	Prefer not to a	nswer	
27. Since your criticalcohol?	al incident(s	), have	people anno	yed you b	y criticizing yo	our drinking	of
0		0		0	0		
Yes		No	Not ap	plicable	Prefer not to a	nswer	
28. Since your critic	al incident(s	), have	you ever felt	bad or gu	iilty about you	r drinking of	alcohol?
0		0	N7 4	0	O Destantable o		
Yes		No	Not ap	рисавіе	Prefer not to a	119ME1	
29. Since your critic to steady your n	al incident(s erves or to g	), have get rid	you ever had of a hangover	d a drink o	of alcohol first	thing in the 1	norning
0		0		0	0		
*/				<b>~</b> 97			
Yes		No	Not ap	plicable	Prefer not to a	nswer	
30. In the last month, your mind), or f	have you be	een bol	thered by feel				; away in
30. In the last month,	eeling that the o	een bot hings a	thered by feel are unreal?	ing like yo	ou are "spacing	g out" (going o	
30. In the last month, your mind), or f	eeling that t	een bot hings a	thered by feelure unreal?	ing like yo	ou are "spacing	g out" (going o	
30. In the last month, your mind), or form on Not at all	eeling that the control of A little bit	een bot hings a	thered by feel are unreal? O oderately Q	ing like yo O uite a bit	ou are "spacing o Extremely	g out" (going o Prefer not to	
30. In the last month, your mind), or form on the Not at all 31.  In general, in the	eeling that the ood of the bit is a second of	een bot hings a	thered by feel are unreal? o oderately Q Less than	ing like yo  o  uite a bit  About	ou are "spacing  o Extremely  Two or	g out" (going  o Prefer not to  Four or	
30. In the last month, your mind), or form on the last month, or form on the last month, how often the last month, how often on the last month, how often the last month, have month, how often the last month, have month, how often the last month, have m	eeling that the O A little bit c <u>last</u> n have	een bot hings a	thered by feel ore unreal? oderately Q Less than once a	o uite a bit  About once a	ou are "spacing  o  Extremely  Two or three times	g out" (going  O  Prefer not to  Four or  more times	answer
30. In the last month, your mind), or form on the last month, or form on the last month, how often you done the following the last month, how often you done the following the last month, how often you done the following the last month, how often you done the following the last month, how often you done the following the last month, how often you done the following the last month, and	eeling that the ood of the bit of	een bot hings a Mo	thered by feel ore unreal? oderately Q Less than once a week	o uite a bit  About once a week	ou are "spacing  o Extremely  Two or three times a week	g out" (going  O Prefer not to  Four or more times a week	answer Prefer not to answer
30. In the last month, your mind), or form on the last all states of the last month. In general, in the month, how often you done the following the last month.	eeling that the ood of the bit of	een bot hings a	thered by feel ore unreal? oderately Q Less than once a	o uite a bit  About once a	ou are "spacing  o  Extremely  Two or three times	g out" (going  O  Prefer not to  Four or  more times	answer Prefer not
30. In the last month, your mind), or form on the last month, or form on the last all states of the last month, how often you done the following bid not care if mended	eeling that the A little bit to be a little bit	een bot hings a Mo	thered by feel ore unreal? oderately Q Less than once a week	o uite a bit  About once a week	ou are "spacing  o Extremely  Two or three times a week  o	g out" (going  Prefer not to  Four or  more times  a week  O	Prefer not to answer
30. In the last month, your mind), or form of Not at all.  31. In general, in the month, how often you done the following Did not care if mended. Thought about experiences.	eeling that the A little bit to be a little bit	een bot hings a Mo	thered by feel ore unreal? oderately Q Less than once a week	o uite a bit  About once a week	ou are "spacing  o Extremely  Two or three times a week	g out" (going  O Prefer not to  Four or more times a week	answer Prefer not to answer
30. In the last month, your mind), or form on the last month, or form on the last all states of the last month, how often you done the following bid not care if mended	eeling that the control of the contr	een bothings a Mo	thered by feel ore unreal? oderately Q Less than once a week	O uite a bit  About once a week O	ou are "spacing  o Extremely  Two or three times a week o	g out" (going  Prefer not to  Four or  more times  a week  O	Prefer not to answer
30. In the last month, your mind), or form on the last month, or form on the last all.  31. In general, in the month, how often you done the following of the last about earth of the last about earth ought about he would end my life.	eeling that the one of the last on have one of the last of the las	een bot hings a Mo	thered by feel ore unreal? oderately Q Less than once a week	o uite a bit  About once a week	ou are "spacing  o Extremely  Two or three times a week  o	g out" (going  Prefer not to  Four or more times a week  O	Prefer not to answer
30. In the last month, your mind), or form on the last month, or form on the last all.  31.  In general, in the month, how ofter you done the following the last about emy life. Thought about how ould end my life. Made a plan for	eeling that the one of the last on have one of the last of the las	een bothings a Mo	thered by feel ore unreal? oderately Q Less than once a week	O uite a bit  About once a week O	ou are "spacing  o Extremely  Two or three times a week o	g out" (going  Prefer not to  Four or more times a week  O	Prefer not to answer
30. In the last month, your mind), or form on the last month, or form on the last all.  31. In general, in the month, how often you done the following of the last about earth of the last about earth ought about he would end my life.	eeling that the one of the last of the las	een bothings at the Mo	thered by feel ore unreal?  O oderately Q  Less than once a week  O	O uite a bit  About once a week  O	O Extremely  Two or three times a week  O	g out" (going O Prefer not to  Four or more times a week O O	Prefer not to answer

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.1	<i>1</i>

Which of the following activities have you engaged in to reduce the stress from your critical incident(s) during the <u>last six months?</u> (Select those that apply)	Of those you selected, please note if there have been any changes in them: (No Change / Started / Increased / Decreased / Stopped)
□ Exercise/sports/other physical activity (e.g., yard work)	
ii Hobbies	
Practiced religious faith	
□ Relied on personal spirituality	-
u Work	
Talked with my health care provider	
□ Talked with my clergyperson	
□ Talked with someone in the EAP	
Talked with someone in my family	
11 Talked with a friend	
□ Talked with my peer team	
☐ Talked with co-workers who are not on the peer team	
□ Mental health counseling	
Used alternative/complementary treatments (e.g.,	
acupuncture, chiropractic, massage, etc.)	
☐ Took prescription medication for stress, anxiety,	
depression, or mental health reason	
□ Took non-prescription agents for stress, anxiety,	
depression, or mental health reason (e.g., herbs, vitamins,	
nutritional supplements, etc.)	
☐ Took prescription medication for physical problem	
□ Took non-prescription agents for physical problem (e.g.,	
herbs, vitamins, nutritional supplements, etc.)	
Used someone else's prescription medication	
□ Sleep	
□ Sexual activity	
□ Alcohol use	
II Tobacco use	
□ Caffeine use	
□ Illicit use of a substance	
□ Gambling	
u Eating	
☐ Shopping/spending	
□ Internet use	
□ Watched television	
Stayed connected to my closest relationships	
□ Spent time alone	
□ Spent time with my family	
□ Social contact with people outside of work	
Did things to help others	

(continued) Which of the following activities have you engaged in to reduce the stress from your critical incident(s) during the <u>last six months</u> ?	Of those you selected, please note if there have been any changes in them: (No Change / Started / Increased / Decreased / Stopped)
Tried to increase work skills (e.g., practice defensive	
tactics, go to gun range)	
Read/listened to self-help materials (books, videos,	
audios, on-line support)	
Meditation or mindfulness	
☐ Thought about the incident(s)	
Tried to avoid thinking or feeling emotions about the	
incident(s)	
☐ Tried to figure out how to make sense out of this	
happening	
<ul> <li>Reminded myself that others have it worse</li> </ul>	
Tried to think positively about the situation	
Purposefully did things to distract myself	
☐ Worked to make something good come out of the bad	
Did things that could cost me my job/social status/	
relationships	
Did things in memory of what happened	
-	
32a. If there are other activities you have engaged in during t	If that are mounts to remain
your stress which have not been mentioned here, please there have been any changes in them (please see above).  answer" for this question if you need to do so.	specity below allo mulcale ii
your stress which have not been mentioned here, please there have been any changes in them (please see above).	Write "N/A" or "Prefer not to
your stress which have not been mentioned here, please there have been any changes in them (please see above).  answer" for this question if you need to do so.  33. How do you rate your overall management of stress for the cr	Write "N/A" or "Prefer not to
your stress which have not been mentioned here, please there have been any changes in them (please see above).  answer" for this question if you need to do so.	Write "N/A" or "Prefer not to
your stress which have not been mentioned here, please there have been any changes in them (please see above).  answer" for this question if you need to do so.  33. How do you rate your overall management of stress for the cr.  Very poor  Poor	Write "N/A" or "Prefer not to
your stress which have not been mentioned here, please there have been any changes in them (please see above). answer" for this question if you need to do so.  33. How do you rate your overall management of stress for the cr  Very poor Poor	Write "N/A" or "Prefer not to
your stress which have not been mentioned here, please there have been any changes in them (please see above).  answer" for this question if you need to do so.  33. How do you rate your overall management of stress for the cr  Very poor  Poor  Adequate  Good	Write "N/A" or "Prefer not to
your stress which have not been mentioned here, please there have been any changes in them (please see above). answer" for this question if you need to do so.  33. How do you rate your overall management of stress for the cr.  Very poor  Poor  Adequate  Good	Write "N/A" or "Prefer not to
your stress which have not been mentioned here, please there have been any changes in them (please see above). answer" for this question if you need to do so.  33. How do you rate your overall management of stress for the cr  Very poor Poor Adequate Good Very good	write "N/A" or "Prefer not to
your stress which have not been mentioned here, please there have been any changes in them (please see above). answer" for this question if you need to do so.  33. How do you rate your overall management of stress for the cr.  Very poor  Poor  Adequate  Good  Very good  Prefer not to answer  33a. Why did you rate "Very poor" or "Poor" for your management apply:	write "N/A" or "Prefer not to
your stress which have not been mentioned here, please there have been any changes in them (please see above).  answer" for this question if you need to do so.  33. How do you rate your overall management of stress for the cr.  Very poor  Poor  Adequate  Good  Very good  Prefer not to answer  33a. Why did you rate "Very poor" or "Poor" for your management apply:  I am not employing stress relief techniques	write "N/A" or "Prefer not to
your stress which have not been mentioned here, please there have been any changes in them (please see above). answer" for this question if you need to do so.  33. How do you rate your overall management of stress for the cr.  Very poor  Poor  Adequate Good Very good Prefer not to answer  33a. Why did you rate "Very poor" or "Poor" for your management apply:  I am not employing stress relief techniques Stress relief techniques are not working for me	write "N/A" or "Prefer not to
your stress which have not been mentioned here, please there have been any changes in them (please see above). answer" for this question if you need to do so.  33. How do you rate your overall management of stress for the cr.  Very poor  Poor  Adequate  Good  Very good  Prefer not to answer  33a. Why did you rate "Very poor" or "Poor" for your management apply:  I am not employing stress relief techniques  Stress relief techniques are not working for me  My support system is ineffective	write "N/A" or "Prefer not to
your stress which have not been mentioned here, please there have been any changes in them (please see above). answer" for this question if you need to do so.  33. How do you rate your overall management of stress for the cr.  Very poor  Poor  Adequate Good Very good Prefer not to answer  33a. Why did you rate "Very poor" or "Poor" for your management apply:  I am not employing stress relief techniques Stress relief techniques are not working for me	write "N/A" or "Prefer not to  itical incident(s)?

Stress relief techniques are working for me  My support system is effective  I am not affected by the critical incident(s)
My support system is effective     I am not affected by the critical incident(s)
I am not affected by the critical incident(s)
11 Prefer not to answer
Other (Please specify)
35. How do you rate the effectiveness of your coping with your critical incident(s)?
o lam coping very poorly
o I am coping poorly
o I am managing to get by
o I am coping fairly well
o l am coping very well
o Prefer not to answer
36. When it comes to my significant other and how they are doing in the aftermath of my critical incident(s):
o I am very worried
o I am a little worried
o I am not worried
o I am pleased
o I am very pleased
o Not applicable
o Prefer not to answer
37. Where are you when it comes to making sense of your critical incident(s)? (This does not mean the incident is "acceptable" to you, only whether or not you've been able to fit it into some kind of framework that explains why it happened.)
o There is no sense to it whatsoever
o I am working on this but haven't come to any conclusions yet
o I have an explanation that sometimes works for me and sometimes doesn't
o I have an explanation that now makes sense to me consistently (such as, "Bad things
can happen to good people," "This was a part of God's plan," "There is evil in the
world," "People get sick," and so forth)
o It is not something I have considered
o Prefer not to answer
38. If you do have an explanation(s) you use, please indicate what it is/they are below. If you would prefer not to answer, please write "Prefer not to answer."

- 39. Please rate how much work support you have received from your employer regarding your critical incident(s).
  - o I received much less than I needed
  - o I received a little less than I needed
  - o I received just what I needed
  - o I received a little more than I needed
  - o I received much more than I needed
  - Not applicable
  - o Prefer not to answer
- 40. Please rate how much social and emotional support you have received from others outside of work regarding your critical incident(s).
  - o I received much less than I needed
  - o I received a little less than I needed
  - o I received just what I needed
  - o I received a little more than I needed
  - o I received much more than I needed
  - o Not applicable
  - o Prefer not to answer
- 41. How many minutes did it take you to fill out this survey?
  - Less than 15 minutes
  - o 15-30 minutes
  - o 31-60 minutes
  - o More than 60 minutes