



Trauma Support Manual

This manual is based on experience and guidance from
US Marine Corps, Israeli Defense Forces and Red Cross

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Purpose and Scope

- Facilitating first aid and follow up after traumatic incidents.
- Support to SMTs to counter acute stress reactions and reduce risk of injury to the mental health.

Validity for the Ship Management Team

We cannot rule out that the Master is traumatized by the incident and needs help from shipmates.



As an example, he or she will be directly involved in a maneuvering failure leading to an allision, collision or grounding.

It is hence of value that all members of the Ship Management Team are familiar with this guidance, and able to act.

What situations can be traumatizing?

This varies significantly from person to person and each person's previous experiences. If you have previously seen and coped well with a dramatic incident, you are better prepared for another.

Still, as a general guide, you must expect that crew members are likely to be stressed if they experience:

- Personnel injury or fatality
- Serious near miss
- Perception of lost control
- Serious vessel accident (e.g., pollution case)
- Serious incident at home (e.g., accident, financial problems, loss of relation)

What to prepare for ?

In some cases, you need to counter or treat acute stress reactions in the situation itself. Example: Fire, explosion, or other dramatic situation where individual(s) display clear signs of acute stress:

Professional Assistance

**CONTACT NUMBERS**

 **Fleet Bergen +47 901 48 180**

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FOR PROFESSIONAL ASSISTANCE

In the case that you want *professional assistance* to handle such situation, we have prepared the Emergency Response Management Team and the Crewing offices to connect you with capable resources.

Acute Stress Reactions

An acute stress reaction occurs when symptoms develop due to a stressful event. The word '**acute**' means that symptoms develop quickly but do not usually last long. The events are usually very severe, and an acute stress reaction usually occurs after an unexpected life crisis.

Acute Stress Reactions



- **“Frozen”, failure to function**
- **Unable to act**
- **Pale**
- **Stunned**
- **Looking scared**
- **Sweating or shaking or both**

Follow the [5 Steps of Acute Stress Reaction Procedure](#) to manage such situations. (See next page for the handout format)

Acute Stress Reaction Procedure

<p>1. Connect</p> 	<p>a. Make eye contact. If necessary, remove the individual's hand from his or her face. b. Call the individual's name, ask if you can be heard. c. Grasp the individual firmly on the arm and ask him or her to grasp back.</p>	<p>Ensure that the individual pays attention using different sensory channels</p>	<ul style="list-style-type: none"> • "Harald! • Look at me! • Do you hear me? • I am squeezing your arm, squeeze me back!"
<p>2. Emphasize commitment</p> 	<p>Assure he individual that he or she is not alone, and that you are present</p>	<p>Break through the individual's sense of isolation</p>	<ul style="list-style-type: none"> • "You are not alone! • I am with you!"
<p>3. Inquire facts</p> 	<p>Ask the individual simple fact-based questions. They may be based on five types of facts:</p> <ul style="list-style-type: none"> • Chronology • Quantity • Names • Current role • Current task <p>The questions must have quick, short answers and be relevant to the present moment.</p>	<p>Deliberately engage the "thinking-part" of the brain (cortex, as opposed to the "emotional part").</p>	<ul style="list-style-type: none"> • "When did you start the task? • How many people are in the team? • Who is in charge of the work? • What is your role?"
<p>4. Confirm the sequence of events</p> 	<p>Describe in simple language:</p> <ul style="list-style-type: none"> • What has happened • What is happening • What will happen 	<p>Orient the individual using a variant of grounding</p>	<ul style="list-style-type: none"> • "We started the pumping and there was an explosion. • Now we are treating a wounded. • We must move away from the smoke".
<p>5. Give an order to prompt deliberate action</p> 	<p>Direct the individual to carry out a specific action.</p>	<p>Prompt the individual to start functioning, reducing the individual's sense of helplessness</p>	<ul style="list-style-type: none"> • "Pull out the fire hose from the cabinet in the locker over there."

When to provide First Aid?

Irrespective if the **Acute Stress Reaction Procedure** has been followed, the first 8 hours after an incident is important. Within this window you can do a lot to prevent the stress from developing into an injury.

What to do?

1. Bring the seafarer to a safe place
2. Calm the seafarer
3. Debrief the seafarer

Debrief Technique

- Find a sheltered and safe place
- Listen; Let the seafarer talk.
- Be patient. The more the seafarer talks, the better.
- Encourage; ask for the full story
- Establish facts
- Discuss self blame statements
- Ensure support
- Do not blame

4. Ensure there is no stigma or harassment from other crewmembers
5. Arrange for social support. Assign a colleague to keep close and maintain contact with the seafarer. Duration: 1 month
6. Arrange for contact with family at home.
7. During hours and days after the incident, assess and reassess: Are there signs of distress or loss of function?



Note: The debrief is very important. It should be arranged as a group session with those that were involved in the incident.

Try to focus on facts;:

- What happened
- When did it happen.

Try to avoid discussing emotions (e.g.; what did you feel)..

Stress Evaluation Form

As a guide to identify signs of distress or loss of function, see the **Stress Evaluation Form** at the end of this document. The questionnaire should be handed out to those involved in the incident, or you may use it as a list of topics for your assessment of the personnel

Immediately after an incident a higher score should be expected, for most persons the scores should drop over the following 3-4 weeks. Obviously, the higher scores are signs of distress. An average above 3 is reason for concern, and so is a single score on the far-right side.

Be aware that individuals will use the score differently, some have a tendency of avoiding categorical statements like never or always, thus getting more centralized scores.

You should assess the stress reactions several times over the days and weeks after an incident. The first assessment should be done within two days, and indicatively every second day until you are sure that the seafarer is OK. A rapid reduction is a sign of healing and indicates good prognosis.

To provide guidance to assess and act on the set of possible stress reactions, we have established Green, Yellow, Orange and Red stress zones. The Stress Evaluation Form is a good tool but there is nothing wrong in using alternative methods. The point is to find a representative zone to the seafarer's condition and take actions accordingly.

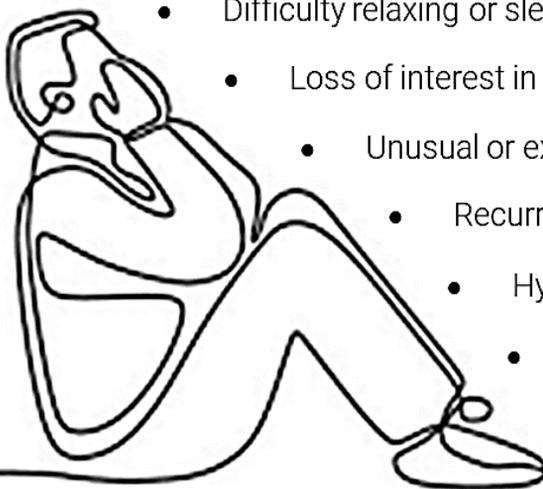
 Stress Evaluation Form		 Stress Evaluation Form	
Name: _____			
Instructions: Answer the questions based on the way you feel now and during the last couple of days. Mark the best fitting score.			
1: SLEEP PROBLEMS (Is it difficult to fall asleep or do you wake up repeatedly during your sleep)		7: EMOTIONS FLUCTUATE EASILY UP AND DOWN	
1 Rarely/never	2 3 4 5 6 7 Very often	1 Not	2 3 4 5 6 7 Very much
2: DREAMS WITH NIGHTMARES ABOUT THE INCIDENT		8: GUILTY CONSCIENCE, SELF-REPROACH, GUILT (feeling guilt for what happened or when thinking about own actions)	
1 Rarely/never	2 3 4 5 6 7 Very often	1 Not at all	2 3 4 5 6 7 Very much
3: DEPRESSION – FEELING DEPRESSED		9: FEAR OF THE PLACE OR SITUATIONS THAT CAN REMIND YOU OF THE INCIDENT	
1 Not	2 3 4 5 6 7 Very much	1 No	2 3 4 5 6 7 Very much
4: BEING JUMPY IN CASE OF SUDDEN NOISES OR SUDDEN MOVEMENTS		10: TENSION IN THE BODY	
1 Not	2 3 4 5 6 7 Very much	1 None	2 3 4 5 6 7 Very much
5: TENDENCY TO withdraw FROM OTHERS		11: MEMORY PROBLEMS	
1 Not	2 3 4 5 6 7 Very much	1 None	2 3 4 5 6 7 Very much
6: IRRITATION (becomes easily irritated or awkward)		12: DIFFICULTY CONCENTRATING	
1 Rarely/never	2 3 4 5 6 7 Very often	1 None	2 3 4 5 6 7 Very much
		13: APPETITE	
		1 Good	2 3 4 5 6 7 None
		14: INITIATIVE	
		1 Good	2 3 4 5 6 7 None
		15: SUICIDAL IDEAS	
		1 None	2 3 4 5 6 7 Very much

THE GREEN ZONE

If there are no such signs, the seafarer is good to go. But remember to reassess regularly over the coming 1 month.

THE YELLOW ZONE

SIGNS OF DISTRESS OR LOSS OF FUNCTION



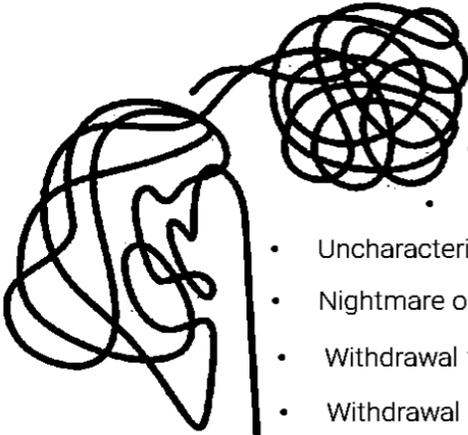
- Difficulty relaxing or sleeping
- Loss of interest in social or recreational activities
- Unusual or excessive behavior, worry or anger
- Recurring nightmares or disturbing memories
- Hyperactive startle or responses to noises
- Difficulty performing normal duties
- Any change from normal personality

If any of the above signs appear, the seafarer is in “the yellow zone” or worse. He or she is “reacting”. You must then:

1. Ensure adequate sleep and rest
2. Manage home-front stressors (reduce stressors from home or work situation)
3. Facilitate discussions in small groups
4. Refer to professional assistant, particularly if the problem worsens
5. Assess if the loss of functions is **severe**

THE ORANGE ZONE

SEVERE DISTRESS OR LOSS OF FUNCTION



- Inability to sleep or rest
- Inability to control emotions
- Serious suicidal and violent thoughts
- Loss of usual concern for moral values
- Uncharacteristic outbursts of rage or panic
- Nightmare or memories that increase heart rate
- Withdrawal from social or recreational activities
- Withdrawal from social or recreational activities

If the severe distress or loss of function has continued over time (indicatively one week), the person is in “the orange zone”. He or she is injured. You must then:

1. Keep safe and calm
2. Arrange controlled rest and healing (24 to 72 hours)
3. Refer to professional assistant
4. Mentor back to full duty and function:

Mentoring Guidelines

- Give simple tasks that can be easily managed
- Give positive feed-back, encouragement and friendly assistance
- Gradually increase the level of difficulty
- Make yourself available for discussions
- Be a listener

THE RED ZONE

If the severe distress or loss of function has persisted, i.e.

- They last for weeks
- They don't get better over time
- They get worse over time

then the seafarer is in “the Red Zone”. He or she is ill and requires professional help.

Stress Zones

RED ZONE (ILL)

SIGNS: PERSISTENT Distress or Loss of Function

- Stress problems lasting for several weeks, post-deployment
- Stress problems don't get better over time
- Stress problems get worse over time

ORANGE ZONE (INJURED)

SIGNS: SEVERE Distress or Loss of Function

- Inability to sleep or rest
- Withdrawal from social or recreational activities
- Uncharacteristic outbursts of rage or panic
- Nightmares or memories that increase heart rate
- Inability to control emotions
- Serious suicidal or violent? thoughts
- Loss of usual concern for moral values

YELLOW ZONE (REACTING)

SIGNS: Distress or Loss of Function

- Difficulty relaxing or sleeping
- Loss of interest in social or recreational activities
- Unusual or excessive behavior, worry or anger
- Recurring nightmares or disturbing memories
- Hyperactive startle or responses to noises
- Difficulty performing normal duties
- Any change from normal personality

GREEN ZONE (READY)

Stress Evaluation Flowchart

Seafarer Under Stress

Are there signs of DISTRESS or LOSS of FUNCTION?

NO

Green Zone (Ready)

- Good to go
- Continue monitor for signs of distress or loss of function

YES

SIGNS: Distress or Loss of Function

- Difficulty relaxing or sleeping
- Loss of interest in social or recreational activities
- Unusual or excessive behavior, worry or anger
- Recurring nightmares or disturbing memories
- Hyperactive startle or responses to noises
- Difficulty performing normal duties
- Any change from normal personality

Is the distress or loss of function SEVERE?

NO

Yellow Zone (Reacting)

- Ensure adequate rest and sleep
- Manage home/work-front stressors
- Facilitate discussions in small groups
- Consider external assistance
- Assess if the loss of function is severe

YES

SIGNS: SEVERE Distress or Loss of Function

- Inability to sleep or rest
- Withdrawal from social or recreational activities
- Uncharacteristic outbursts of rage or panic
- Nightmares or memories that increase heart rate
- Inability to control emotions
- Serious suicidal or violent thoughts
- Loss of usual concern for moral values

Has the distress or loss of function PERSISTED

NO

Orange Zone (Injured)

- Keep safe and calm
- Arrange controlled rest and healing (24 to 72 hours)
- Refer to professional assistance
- Mentor** back to full duty and function

YES

SIGNS: PERSISTENT Distress or Loss of Function

- Stress problems lasting for several weeks, post-deployment
- Stress problems don't get better over time
- Stress problems get worse over time

Red Zone (Ill)

- Refer to medical
- Ensure treatment compliance
- Mentor back to duty if possible
- Reintegrate with unit/crew

****Mentoring Guidelines**

- Give simple tasks that can be easily managed
- Give positive feed-back, encouragement and friendly assistance
- Gradually increase the level of difficulty
- Make yourself available for discussions
- Be a listener

STRESS EVALUATION GUIDE

STRESS LEVEL	SIGNS	INTERVENTION
Green Zone	<ul style="list-style-type: none"> No apparent signs of stress yet 	<ol style="list-style-type: none"> Good to go Continue monitor for signs of distress or loss of function
Yellow Zone	<ul style="list-style-type: none"> Difficulty relaxing or sleeping Loss of interest in social or recreational activities Unusual or excessive behavior, worry or anger Recurring nightmares or disturbing memories Hyperactive startle or responses to noises Difficulty performing normal duties Any change from normal personality 	<ol style="list-style-type: none"> Ensure adequate rest and sleep Manage home/work-front stressors Facilitate discussions in small groups Consider external assistance Assess if the loss of function is severe
Orange Zone	<ul style="list-style-type: none"> Inability to sleep or rest Withdrawal from social or recreational activities Uncharacteristic outbursts of rage or panic Nightmares or memories that increase heart rate Inability to control emotions Serious suicidal or violent? thoughts Loss of usual concern for moral values 	<ol style="list-style-type: none"> Keep safe and calm Arrange controlled rest and healing (24 to 72 hours) Refer to professional assistance Mentor back to full duty and function: <ul style="list-style-type: none"> Give simple tasks that can be easily managed Give positive feedback, encouragement and friendly assistance Gradually increase the level of difficulty Make yourself available for discussions Be a listener
Red Zone	<ul style="list-style-type: none"> Stress problems lasting for several weeks, post-deployment Stress problems don't get better over time Stress problems get worse over time 	<ol style="list-style-type: none"> Refer to medical Ensure treatment compliance Mentor back to duty if possible Reintegrate with unit/crew

Stress Evaluation Form

Name: _____

Instructions: Answer the questions based on the way you feel now and during the last couple of days. Mark the best fitting score.

1: SLEEP PROBLEMS

(Is it difficult to fall asleep or do you wake up repeatedly during your sleep)

1	2	3	4	5	6	7
Rarely/never						Very often

2: DREAMS WITH NIGHTMARES ABOUT THE INCIDENT

1	2	3	4	5	6	7
Rarely/never						Very often

3: DEPRESSION – FEELING DEPRESSED

1	2	3	4	5	6	7
Not						Very much

4: BEING JUMPY IN CASE OF SUDDEN NOISES OR SUDDEN MOVEMENTS

1	2	3	4	5	6	7
Not						Very much

5: TENDENCY TO withdraw FROM OTHERS

1	2	3	4	5	6	7
Not						Very much

6: IRRITATION (becomes easily irritated or awkward)

1	2	3	4	5	6	7
Rarely/never						Very often

7: EMOTIONS FLUCTUATE EASILY UP AND DOWN

1	2	3	4	5	6	7
Not						Very much

8: GUILTY CONSCIENCE, SELF-REPROACH, GUILT (feeling guilt for what happened or when thinking about own actions)

1	2	3	4	5	6	7
Not at all						Very much

9: FEAR OF THE PLACE OR SITUATIONS THAT CAN REMIND YOU OF THE INCIDENT

1	2	3	4	5	6	7
No						Very much

10: TENSION IN THE BODY

1	2	3	4	5	6	7
None						Very much

11: MEMORY PROBLEMS

1	2	3	4	5	6	7
None						Very much

12: DIFFICULTY CONCENTRATING

1	2	3	4	5	6	7
None						Very much

13: APPETITE

1	2	3	4	5	6	7
Good						None

14: INITIATIVE

1	2	3	4	5	6	7
Good						None

15: SUICIDAL IDEAS

1	2	3	4	5	6	7
None						Very much



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