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Federal Probation

Choosing the Future of American Corrections: Punishment or Reform? *James Byrne*
Mary Brewster

The Impact of Critical Incident Stress: Is Your Office Prepared to Respond? *Mark Maggio*
Elaine Terenzi

Probation Officer Safety and Mental Conditioning *Paul W. Brown*

Federal Detention: The United States Marshals Service's Management of a Challenging Program *Linda S. Caudell-Feagan*

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turing Justice in Russia: A New Era of Challenges *G. Frederick Allen*

the Future—Carving Out New Territory for American actions *J. Michael Quinlan*

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This Issue in Brief

ACQUISITIONS

Choosing the Future of American Corrections: Punishment or Reform?—What does the future hold for criminal justice and corrections in this country? Authors James Byrne and Mary Brewster examine the four most important predictions of John DiIulio, Princeton University professor and author of *No Escape—The Future of American Corrections*, and offer some suggestions to those state and local corrections policy-makers who believe the United States is moving in the wrong direction.

The Impact of Critical Incident Stress: Is Your Office Prepared to Respond?—Physical assault of an officer while on duty, unexpected death of a co-worker, a natural disaster—all can be considered critical incidents which affect not only the individuals involved but the organization as a whole. Authors Mark Maggio and Elaine Terenzi define critical incidents, explain the importance of providing stress education before such crises occur, and offer suggestions as to what administrator and managers can do to respond effectively and maintain a healthy and productive workforce.

Probation Officer Safety and Mental Conditioning.—Author Paul W. Brown discusses mental conditioning as a component of officer safety that is all too often overlooked or minimized in training programs. He focuses on five areas of mental conditioning: the color code of awareness, crisis rehearsal, the continuum of force, kinesics, and positive self-talk.

Federal Detention: The United States Marshals Service's Management of a Challenging Program.—Focusing on the detention of Federal prisoners, author Linda S. Caudell-Feagan discusses the work of the United States Marshals Service. She explains how detention beds are acquired, how the Marshals Service administers funds to pay the costs of housing Federal detainees, what the ramifications of increased detention costs are, and what actions the Marshals Service has taken to address detention problems.

Total Quality Management: Can It Work in Federal Probation?—Author Richard W. Janes outlines the principles of total quality management and their

application to Federal probation work. The article is based not only on a review of the literature but also on the author's experience in a Federal probation agency where these concepts are being implemented.

College Education in Prisons: The Inmates' Perspectives.—Author Ahmad Tootoonchi reports on a study to determine the impact of college education on the attitudes of inmates toward life and their future. The results reveal that a significant number of the inmates surveyed believe that their behavior can change for the better through college education.

Visitors to Women's Prisons in California: An Exploratory Study.—Author Lisa G. Fuller describes a study which focuses on visitors to California's three state women's prisons. The study, designed to

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The Impact of Critical Incident Stress: Is Your Office Prepared to Respond?

BY MARK MAGGIO AND ELAINE TEREZI*

SEVERAL YEARS ago a clerk working in a Federal probation office in New York City adopted a 13-month-old baby girl. Her fellow workers shared in the clerk's happiness by pooling their resources to provide baby clothes and genuinely lending their support to this single parent. After several months of parenting, the clerk beat her baby to death, sending shock waves through the office. In March 1993, a Federal probation officer was murdered by her estranged husband, a New York State parole officer, while she was waiting in family court for what she hoped was the beginning of the end of her divorce to this man. Around the time of this officer's murder, a 42-year-old supervising probation officer in the District of Michigan died unexpectedly of a heart attack. This recently promoted supervisor was highly respected and well liked by his colleagues. August 1991 saw Hurricane Andrew cut a devastating path of destruction across southern Florida. Federal probation and pretrial services officers in the Southern District of Florida had to cope with the tremendous loss of property and the subsequent psychological impact that was brought on by one of this country's most devastating natural disasters. On a September morning in 1986, Michael Wayne Jackson, an offender under supervision in the Federal probation office in the Southern District of Indiana, shot and killed his probation officer, Tom Gahl, as Gahl attempted a home contact. On August 5, 1993, a lone male, scheduled to be sentenced on drug and firearms charges, walked into the Federal courthouse in Topeka, Kansas, armed with a handgun and several homemade bombs. He killed a court security officer and injured several other persons before he killed himself. Most recently, a Federal probation officer from Texas, facing the strain of what was perceived to be insurmountable problems, decided to take his own life.

While each of these incidents occurred in different parts of the country at different times, they all have one thing in common. Each of these events can be considered a critical incident which not only affected the individuals directly involved but the organization as a whole. As you read this article, there are critical incidents occurring in other probation and pretrial services offices around the country that most of us may never hear about. A colleague finds out he or she has a terminal illness. An officer is

physically assaulted while working in the field. Another officer confronts an offender who threatens his or her life. These individuals are members of the Federal Probation and Pretrial Services System, and what happens in their lives may well have a direct impact on the lives of their colleagues. We need to remember that an organization is simply a collection of people brought together for a common purpose and that our mission can, at any time, be interrupted abruptly by a critical incident.

Day in and day out administrators rely upon the cooperation of staff at all levels within the system to get the job done. Without these dedicated and hard-working employees the system would not survive. Consequently, it seems intuitive to the authors that an effective administrator is one who values and actively protects this resource. This cloak of protection needs to extend beyond the traditional areas of personnel concerns and include a plan for those times when personal or professional tragedy strikes. Due to the nature of critical incidents, such as those mentioned, and our own personal reactions to these incidents, training and education are needed to respond effectively. Ignoring the potential effects of critical incident stress risks an escalation of symptoms over time and a disruption in an individual's abilities to cope effectively. This disruption may lead to depression, frustration, confusion, disillusionment, and a host of other symptoms. As administrators, friends, and colleagues we must be prepared to recognize when a critical incident has occurred and respond to our coworkers with intelligence and compassion.

Critical Incidents Defined

Before we go any further in our discussion, let's define what we mean by the term "critical incident." It is important to note that while some definitions focus on the actual event, others highlight the individual's reaction to this event. Event-based definitions include descriptions such as "incidents in which human lives are lost and/or serious injuries are witnessed" (Bohl, 1991). Bessel A. van der Kolk (1991) defines critical incidents as "sudden, terrifying experiences that explode one's sense of predictability of life." Definitions focusing on individual reactions to critical incidents include Dr. Jeffrey Mitchell's (1986) which states "a critical incident is any significant emotional event that has the power, because of its own nature or because of the circumstances in which it occurs, to

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cause unusual psychological distress in healthy normal people." Dr. Roger Solomon (1986) offers his definition as "any situation in which one feels overwhelmed by a sense of vulnerability and/or lack of control over the situation." Despite the varying types and magnitudes of critical incidents these events seem to share many common characteristics. It is these characteristics to which we will now turn our attention.

Critical incidents are generally sudden and unexpected. The reader should keep in mind that the impact of a critical incident is relative to the timing and nature of the incident. While the residents of Homestead, Florida, knew there was a hurricane heading for their area, no one could have predicted the degree of devastation that was to accompany this storm. In other words, the swiftness and fury of this storm characterize it as a sudden and unexpected event. In another example, most would agree that the suicide of a fellow officer would be a sudden and unexpected event for many. While individuals who contemplate suicide may exhibit signs of depression or engage in conversation about suicide, the finality of the actual event brings shock and dismay to those affected. Because critical incidents can be sudden and unexpected, administrators and managers will not have the time to research effective organizational responses or strategies to these events at the time they occur. The amount of preparation and training that takes place prior to a critical incident will, to a large degree, determine the cognitive, emotional, physical, and behavioral impact of the critical incident not only for the individual but for the organization as well.

A critical incident has the potential to disrupt one's sense of control. Loss of control is a key element in victimization, and anyone who is affected by a critical incident does, in fact, become a victim. Probation and pretrial services officers spend much of their careers struggling to gain and maintain control over offenders. This dependence on control, which tends to be part of the personality profile for those in law enforcement careers, can prove to be a key factor when coping with the aftermath of a critical incident. This dependence on controlling oneself (and others) in a variety of situations is a coping mechanism. Many in the criminal justice professions have found that when all else fails, society places great expectations on them to "control situations." This requires criminal justice professionals to place their reactions to whatever is happening on hold, while they employ their skills to resolve the crisis. If control has been maintained and the outcome of the event is positive, the desire to continue this controlling behavior is reinforced. It is only when things go wrong, when the "story doesn't end the way it's supposed to end," that we find our

primary rescuers have now become our primary victims. Consequently, this dependence on control has the potential to increase a person's vulnerability to a critical incident when that ability to control is suddenly and abruptly disrupted.

A critical incident disrupts beliefs, values, and basic assumptions concerning how the world, and people within it, work. Most, if not all, of us carry basic beliefs, values, and assumptions as to how the world and its people work. A mother is not supposed to beat her infant child to death. Murder is something that happens to those who are involved in illicit dealings as an avocation, not to a young aspiring officer. A family member or a good friend is not supposed to die in an accident or from some fatal illness. They are meant to be with us to share in our lives. Critical incidents disrupt not only how we view the world and its people but also how we view ourselves in relationship to the world. They often bring about a dramatic change in our lives and nothing, afterwards, is ever the same.

Critical incidents involve the perception of a life-damaging threat. It is not necessarily the incident itself which causes significant stress in our lives but rather our perception of the incident which can bring on our stress response. As alluded to in the previous section, while we are all aware of the inevitability of death, we do not usually focus upon the inevitability of our own death, the death of a family member, or the death of a fellow officer. Sluder and Shearer (1992) note "most psychologists would agree that much of what constitutes the normal set of psychological defense mechanisms function to prevent people from thinking too deeply, or often, about their own death." These very normal defenses can be severely displaced during and after a critical incident as we are faced with our own physical and emotional vulnerabilities.

Many critical incidents involve an element of physical and/or emotional loss. The homicide of Probation Officer Thomas Gahl poignantly demonstrates this factor. In a February 1993 interview Gahl's wife Nancy spoke of the tremendous sense of shock and disbelief she first experienced on hearing of Tom's death. Although she said she immediately knew what had happened when Tom's chief, Frank Hall, and Supervising U.S. Probation Officer Doug Wathen appeared at her door on the September morning, the first words she uttered were "isn't there anything you can do for him?" The same sense of shock and disbelief overwhelmed Tom's coworkers at the Indianapolis probation office. To this day, the members of Tom's office make special efforts to recognize Tom each year on the anniversary of his death. When new officers are brought in to the Indianapolis office, they are told about Tom Gahl and the events which led to his death. The physical and emotional loss these individuals experienced has not

only changed their lives forever, it has produced a lasting impact on the probation and pretrial system.

What exactly then is the impact on an organization when a critical incident occurs? Why should administrators and managers be concerned about the organization's response to critical incidents? Don't people realize that you simply deal with these events, put them behind you, and get on with life? What can an "organization" do in response? In the next sections, we will take a look at what an organization can do prior to a critical incident, the impact of an incident on the organization, and how the organization can respond to an incident to assist in mitigating its negative impact.

Inoculation Training

Effective managers throughout the probation and pretrial services system are concerned with the physical safety and well-being of the officers they supervise. Training is provided in officer safety procedures, in crisis intervention, and oftentimes in the use of chemical agents (e.g., Cap-Stun) and firearms proficiency. The role of training as a method of early intervention to avoid or reduce injury is so basic, it is almost intuitive. Training in advance to reduce emotional trauma and aid in recovery should a critical incident occur is less intuitive but equally as effective. Organizational intervention requires proactive development of both effective educational programs as well as a plan for post-incident response.

Providing stress education before the crisis event strikes helps to reduce the impact of traumatic events on personnel (Reese, 1991). This type of educational experience is often referred to as inoculation training. Inoculation training can be a powerful tool in reducing emotional injury because it recognizes the power of the individual in maintaining his or her own emotional health.

An inoculation program, to be effective, should begin at induction into the service and continue periodically to encourage an organizational culture that recognizes the humanity of its members: a culture through which the effects of both critical and cumulative stresses are recognized and in which open discussion as a means of prevention is valued. Stress training should include recognition of stressful events (both cumulative and critical), anticipation of "normal" stress responses, identification of symptoms that may indicate unhealthy levels of stress both in oneself and others, and specific strategies for aiding in the reduction of anxiety to avoid debilitating disillusionment, depression, frustration, and anger.

Inoculation training provides the organization with additional side benefits. It enhances the officers' skills in identifying other officers with symptoms of distress and provides a greater chance for early and positive

intervention. Clearly, empowering coworkers with the ability and responsibility for problem identification will be more effective than if this were to remain the sole domain of management. This is not to suggest that managers or coworkers should intrude on each other's privacy. The stressful event (e.g., divorce, family illness) is not what is at issue. Rather, it is the recognition of signs which may indicate the breakdown of an individual's ability to cope effectively with the event (i.e., excessive weight loss, poor work performance, distractibility) that is at the core of prevention.

Inoculation training provides an organization with a common structure for understanding the dynamics of stress and common vocabulary to facilitate dialogue at all levels within the organization. It provides for early recognition of the need for intervention and creates a climate that accepts the role of intervention in response to events as part of a healthy coping strategy. This will reduce resistance if and when post-incident intervention is needed. Finally, inoculation training serves to communicate to staff members administrative concern for their well being.

Organizational Impact and Response

As researchers have noted, trauma comes in various forms. Kreitler and Kreitler (1987) have reported that intense, often overwhelming, anxiety is a characteristic response to the stress of a major critical incident. As mentioned earlier, how an individual perceives and interprets the situation is crucial to the degree to which his or her anxiety increases (Garrison, 1991). We suggest that how an organization perceives and interprets a situation is crucial to the degree to which that organization responds to its personnel and facilitates in the recovery process. Were the leaders of an organization to assume that "everyone handles these things in his or her own way" and, thereby, choose a strategy of inaction, some (if not many) personnel will never be able to put the incident behind them. Administrators thus leave the door open to hostility and resentment towards them from their personnel. A strategy of inaction ignores the power inherent in the organization itself to facilitate or undermine recovery. However, if administrators respond quickly and effectively in the wake of a critical incident, the prospects for successful and positive resolution to the crisis are enhanced, and they are better able to maintain a healthy and productive workforce. So what can administrators and managers do to respond effectively when critical incidents do occur? We offer suggestions which include the recognition of factors that may affect the outcome for the organization, specific administrative actions to aid in recovery, and pitfalls to avoid in the process.

Recognizing Factors That Influence Recovery

Recognize that the probation and pretrial services system is a career-oriented organization. Most of us have worked with the same colleagues for many years, and while we squabble and argue at times, what affects one of us often affects us all. In this way we are very much like a family. But, unlike a family, we don't have a set of traditions or established roles to rely on during a time of "family crisis."

Administrators need to recognize that not everyone will cope in a positive fashion to a critical incident. Everyone brings lots of "psychological baggage" to his or her career. This may include prior experiences with unresolved critical incidents and less than positive patterns of coping with stressful events. These past events may cloud or distort the perception of the current event. Others don't have adequate support systems in their personal lives, and it is the presence of a support system which researchers have noted is of immense value when coping with critical incidents. Still others believe that consuming alcohol or drugs is an acceptable behavior for coping with trauma. Inadequate or inappropriate coping skills on the part of employees can have a detrimental effect on the organization.

Conversely, it may be that leadership during a crisis comes from unexpected and nontraditional sources. An individual by virtue of past experience or his or her personal coping strategy may assume an effective leadership role. After conducting a lecture on critical incident stress, one of the authors was approached by a Federal probation officer who advised that she had been through a critical incident stress debriefing after her husband (a law enforcement agent) had survived a hostage/shooting situation. She had sought out information and resources to help them as they struggled to restore normalcy to their lives. Although not in a traditional leadership role within her organization, she may emerge as a natural leader in the aftermath of a critical incident.

Recognize that as an administrator you are acting on behalf of every member of your department. It would be chaotic and inefficient for each staff member to independently respond to the tasks that are necessary and expected following an incident. Your actions and expressions are done on their behalf. If a eulogy is to be given following the death of a staff member, you speak for them. Your response to the crisis of one staff member is a barometer for others, providing them with an indicator as to how you would respond if they were in crisis. The response must be conducted with sensitivity and respect.

Be alert to signs and symptoms in individuals following a critical incident which may indicate a need for intervention. These signs and symptoms include

but are not limited to: a decrease in productivity from a previously productive employee, an increase in the use of sick leave, withdrawal from others in the workplace or at home, memory problems, inability to make decisions, poor problem-solving ability, a change in usual communications, poor concentration while at work, and angry outbursts triggered by seemingly innocuous events. If inoculation training was done prior to the event, staff at all levels will have been trained to recognize troubled employees so that their needs can be addressed.

Administrative Actions to Aid in Organizational Recovery

Disseminate accurate information. Very often the first individuals to know the details surrounding a critical incident are the top managers. Many staff members will have a need to know the details of the event so that they can begin "to make sense of it," struggle to understand it, and thereby move past it. Absent information, rumors will develop, distort, and gain momentum.

Administrators, managers, and staff members should make efforts to listen to their coworkers following a critical incident. Quite often those affected simply need someone who will listen to them. This act of listening can provide tremendous support to affected employees and greatly facilitate in the recovery process. Establish an atmosphere through which communication among staff regarding the incident is encouraged.

Make efforts to provide employees with some private time, if needed. Many individuals who have been affected by a critical incident do not want time off. They find a need to keep busy and in many instances would choose to come to work rather than stay home. However, while at work, an event may occur which stirs memories of the incident and the employee may wish to simply take some time to "regroup." The employee doesn't need to go home at this point, rather he or she is experiencing the grief which always accompanies a tragic event and simply needs a moment to process this grief. Quite often this scenario can serve to support other personnel who are experiencing similar reactions but who, for one reason or another, are denying their feelings and pretending that they were not affected as strongly as others.

Instruct staff members not to take the anger or other feelings expressed by their coworkers personally. Many of us understand that anger has been characterized as a "secondary emotion" masking other more intense emotions which lie at the root of our behavior. When individuals experience a critical incident, many are confused about what they are feeling. Anxiety is heightened, sorrow becomes overwhelming, and fear can be immobilizing. The inability on the part of the employee to get "in touch" with these emotions may

lead to overt responses which misrepresent what they are, in fact, experiencing. Coworkers who are alert to this behavior will be able to respond in an appropriate and supportive fashion. This may even lead to a positive resolution of the underlying emotions in the employee.

Lead by example. Administrators should be willing to acknowledge to staff that they too were affected by the critical incident. They should be willing to talk about their sense of loss, grief, frustration, and anger, as well as acknowledge the reactions of their staff. In times of crisis, staff members look to administrators and managers to provide leadership and to look out for their (the staff members') best interests. While many administrators are concerned that their staff members receive appropriate intervention following a critical incident, they often fail to address their own needs. The role of administrator does not mitigate the impact of a critical incident. In other words, simply because someone has attained the position of administrator does not render him or her immune from the impact of a critical incident. Administrators who are willing to admit their own vulnerabilities and demonstrate that they too were affected are often seen by staff in a positive light. It is not a sign of weakness to make such an admission, rather it is a signal to your staff that you will get through this together.

Pitfalls to Avoid in the Process

Avoid, and instruct staff to avoid, comments such as "they are lucky it wasn't worse." Virtually no one affected by a critical incident wants his or her feelings to be minimized by others. Comments such as this and others will only serve to undermine the recovery process. One of the authors had the opportunity to debrief several police officers who had witnessed a suicide just hours before the debriefing. One of the officers involved indicated that the worst part of the incident for him was the comments made by his coworkers following the incident. Quite often the organization can perpetuate the very problems it seeks to resolve following a critical incident.

Administrators should take great strides to avoid placing blame following a critical incident. The focus should be on recovery. There is a time and a place to conduct an operational critique of events should one be necessary. In order to facilitate both the individual's and the organization's recovery from a critical incident, administrators should focus on those activities which will provide support and comfort to all staff. Placing blame during this process will undermine immediate efforts and impede the long-term goals for a healthy recovery.

Fortunately, administrators do not have to face the management of a critical incident alone. Outside resources designed to assist with the recovery process do exist. One such resource is the International Critical

Incident Stress Foundation, established by Drs. Jeffrey Mitchell and George Everly, with offices in Columbia, Maryland. The foundation (ICISF) oversees the training of critical incident debriefing teams across the Nation. An international hotline (1-410-313-CISD) has been established in Howard County, Maryland, and can be accessed by the local, state, and Federal agencies which require assistance as a result of a critical incident. Personnel working the hotline can provide information regarding the location of debriefing teams in virtually every state. Additionally, on-call mental health professionals can be reached through the hotline. These professionals have expertise in dealing with many of the various aspects of critical incidents which may arise. As mentioned, administrators are able to contact a critical incident debriefing team via the hotline, and this team is prepared to render intervention services via a formal debriefing. In an attempt to clarify the function of the debriefing team, we would like to provide a description of the critical incident debriefing model.

The Critical Incident Debriefing Process

Research has shown that the impact of stressors following a critical incident appears to be mitigated, to some degree, by the availability of resources which may intervene at various stages following a tragic event. The Critical Incident Stress Debriefing (CISD) model is designed to yield just such a result. The CISD model assists the victims of critical incidents with the recovery process. The model incorporates seven phases: Introductory Phase, Fact Phase, Thought Phase, Reaction Phase, Symptom Phase, Teaching Phase, and Reentry Phase.

Debriefings are group meetings that are designed to allow participants an opportunity to discuss their thoughts and emotions about a distressing event in a controlled and rational manner and to understand that they (the participants) are not alone in their reactions but that many others share similar, if not the same, reactions. Debriefings represent a partnership between mental health professionals and peers of the target population. Peers are usually personnel who are interested in preventing and mitigating the negative impact of acute stress on their fellow workers. Mental health professionals serving on a CISD team possess at least a masters degree in psychology, social work, psychiatric nursing, psychiatry, or mental health counseling. All team members receive training in crisis intervention, stress, post traumatic stress disorder, and the debriefing process (Mitchell, 1991).

The Debriefing Model

The Introductory Phase. During this first phase the leader and team members introduce themselves to the participants. The leader describes how a debriefing

works and lists the ground rules for the debriefing. The rules include the following: no one is compelled to talk but participation is strongly encouraged, no notes or recordings of any kind are taken during the debriefing, strict confidentiality is maintained, and the debriefing is not intended to be therapy.

The Fact Phase. This phase begins by asking participants to identify themselves and briefly mention their degree of involvement in the incident. Participants may relate their role in the incident, how they came to hear of the news, where they were when they received the news, etc. This type of information serves to lay the groundwork for the remaining phases of the process.

The Thought Phase. Going around the room, each participant is asked what their first thoughts were surrounding the incident. The thought phase begins to personalize the experience for the participants. This is the first phase where some participants may begin exhibiting some reluctance to share.

The Reaction Phase. Participants are asked to discuss what was the worst part of the event for them personally. This phase generally causes participants to begin exploring some of their deeper, personal responses to this event. Depending on the intensity of the event and the number of participants, this segment could last as long as 30 minutes to 1 hour.

The Symptom Phase. Following the same pattern as the previous phases, participants are asked to describe the signs and symptoms of any distress they experienced, such as nausea, sweaty palms, or difficulty making decisions. Usually three occurrences of signs and symptoms are discussed: those that appeared at the time of the incident, those that arose during the next few days, and those that are left over and still being experienced at the time of the debriefing.

The Teaching Phase. During this phase the team leader and other team members will share information regarding the relationship between critical incident stress and the subsequent cognitive, emotional, behavioral, and physiological reactions that have been experienced by others involved in such events.

Reentry Phase. This phase signals the end of the debriefing. Participants are encouraged to ask questions and/or explore other issues associated with the incident which may not have surfaced prior to this time. Team members provide summary remarks, and the team leader makes a few additional statements in an effort to bring closure to the debriefing.

When to Call in a Critical Incident Debriefing Team

There is no absolute guideline for when a debriefing should be considered. It will largely depend upon the nature of the event and the impact that the incident

has had on the organization and its individual members. However, some of the criteria developed by other agencies provide guidelines that are also applicable to the probation and pretrial services system. Blak (1991) suggests CISD intervention in the following situations: the violent death of a fellow worker in the line of duty; on-duty shootings; suicide of a fellow worker; violent or traumatic injury to a fellow worker; responding to or handling violent or traumatic situations and observing an act of corruption, bribery, or other illegal activity by a fellow worker. While this list is far from exhaustive, we hope that these guidelines will help to reduce the time involved in deciding whether to use CISD intervention and reduce resistance to securing professional intervention for an organization when appropriate.

Should administrators determine that staff would benefit from a debriefing, it is recommended that the debriefing be held within approximately 72 hours of the incident. "For those experiencing psychological discomfort, assistance must be provided during this period of disequilibrium" (Reese, 1991). The debriefing process provides a safe, controlled, and well organized method of examining and discussing the incident and the information necessary to continue a positive recovery beyond the debriefing session. Experience has shown that debriefings are very effective with the primary goal of accelerating the recovery process and thus ensuring that a valued employee remains that way.

Conclusion

Dedicated and hard working staff are the probation and pretrial services system's most valuable resources. It is the responsibility of administrators and managers to provide the tools, training, and support needed by staff for the organization to remain productive. Critical incidents, and the reactions elicited as a result, can undermine individual and organizational health and negatively affect productivity. Critical incidents, by definition, occur unexpectedly, thus minimizing the time available to establish a plan for effective response. In addition, administrators and managers will themselves be affected by the event, which may impede their ability to organize a response effectively. Although unexpected, critical incidents can be anticipated and their negative impact reduced through pre-incident training and planning for post-incident response. The greatest investment an organization can make is in its human capital (*Newsweek*, 1982). Planning critical incident intervention represents a significant component of the organization's investment in that human capital.

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