

Center for Trauma Program Innovation

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“Miracle on the Hudson”

US AIRWAYS FLIGHT 1549:

CLINICAL CONSIDERATIONS

As you know, an Airbus en route from LaGuardia Airport to Charlotte, NC was disabled minutes after take-off and was forced to make a water landing on the Hudson River south of the George Washington Bridge near midtown. There were 150 passengers and 5 crew members on board. Due to the expertise and experience of the pilot and crew, the swift and level-headed evacuation by the passengers, and the nearly instantaneous arrival of first responders and emergency rescue teams, there were no fatalities.

Watching from office windows, river craft and pedestrian walks were probably hundreds of witnesses. The media was on site within 15 minutes of the plane hitting the water and then all of NYC was aware of the event.

What did you experience when you heard about it? Shock? Awe? Disbelief? Fear? Relief? Thankfulness? Did it bring back images of an upsetting event in your life; or witnessing something traumatic; or thinking of the safety of your family or others; or memories of a particularly unsettling flight? And then, in all our memories is 9/11.

Traumatic events occur. When it comes to clients, what do we do when a traumatic event takes place in the community? Do we mention it, if our clients do not?

It is important to be mindful of reactions that may be stimulated by witnessing or hearing about a near disaster or other traumatic occurrences. Clinicians must be open to discussing the event and be careful not to prematurely close off a discourse that may reveal underlying stress or anxiety held by the client.

Clients with a known trauma history, prior exposure, or suffering from anxiety disorders or avoidance disorders should be encouraged to speak about their reactions. Active questioning about the event may be necessary. Clients with children may need guidance with explaining the event, reducing fear, or helping their children to feel less vulnerable.

Depending upon the event, the severity of exposure, the mental health issues related to the client, the developmental age of children, etc., the following resources will help guide you in your effort to reduce the level of anxiety, encourage coping, and re-establish a sense of safety.

www.jbfc.org Center for Trauma Program Innovation (articles)
www.nctsn.org (follow links)

Trauma Exposure Fact Sheet

Remember:

- ❖ Symptoms of psychological stress related to a traumatic event are **normal reactions to an abnormal situation**. Symptoms become illness if many persist for month or more after the trauma.
- ❖ Not everyone reacts in the same manner.
- ❖ People heal at their own pace. Help can facilitate healing.

Common Symptoms of Psychological Stress

- ❖ Anxiety, nervousness, worrying, fear
- ❖ Irritability, moodiness
- ❖ Difficulty concentrating, absent mindedness
- ❖ Difficulty making decisions
- ❖ Low energy, listlessness
- ❖ Feeling numb, withdrawn, disconnected
- ❖ Suspiciousness
- ❖ Disbelief
- ❖ Relief
- ❖ Sleep disturbances, nightmares, insomnia
- ❖ Grief, depression, hopelessness
- ❖ Easily startled
- ❖ Changes in appetite
- ❖ Feeling disoriented, confused
- ❖ Feelings of ineffectiveness, shame, guilt
- ❖ Avoidance of thoughts, discussions, activities, places that remind you of the event
- ❖ Flashbacks
- ❖ Increased marital or other interpersonal conflict
- ❖ Excessive alcohol or drug use
- ❖ Impulsive and self-destructive behavior

Common Physiological Symptoms

Headaches, stomachaches, shortness of breath, fatigue, pounding heart, tightness in chest, tightness in throat, dry mouth, muscle weakness, empty feeling in body

Building Resilience: The Road to Recovery

- ❖ Get enough rest, sleep, nutrition, exercise
- ❖ Recognize your feelings
- ❖ Be tolerant of other people's reactions
- ❖ Talk to others about your feelings. Use support but don't feel forced to talk and talk.
- ❖ Do not become isolated from others, use your support systems
- ❖ Use relaxation techniques: deep breathing, thought stopping, progressive muscle relaxation, meditation, relaxation tapes, visualization, grounding
- ❖ Use creative arts techniques: drawing, writing, poetry, journaling
- ❖ Use your spiritual and/or religious resources

If reactions persist and you find it difficult to return to your normal level of functioning, you should consider seeking professional assistance to aid in recovery, especially if reactions continue to persist one month after the trauma ends.

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