

From *Psychologically Speaking*. Newsletter of the Australian Psychological Society (WA Branch), April 1991, p. 1-2. Copyright © 1991, Australian Psychological Society (WA Branch). Reprinted by permission of the APS(WA) and Tony White.

# **The Life of an Ambulance Officer**

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We see them in the street, sometimes with lights flashing and sirens blazing. We see them on television attending devastating disasters, and if you are ever the first at the scene of a car accident you are certainly glad to see them come around the corner.

The life of an ambulance officer can certainly be routine and monotonous, but at other times can be challenging, demanding and rewarding. An example of such a moment occurs when an ambulance officer is confronted with a critical incident, an event that has a strong emotional impact.

What are these critical instances? Can these incidents be classified? What are common reactions? These and other questions have been answered in a series of workshops with the St John Ambulance Association and this article gives some findings of this 'pilot' research.

## **Critical incidents**

Critical incidents are personal. What is distressing for one ambulance officer may not be for another and what may be distressing one day, may not have any effect the next. Specific examples illustrate this diversity.

A reaction of fright and build-up of trauma occurred when an officer attended an accident where a twin's head had been crushed and the remaining twin was playing with the dead body. Another example was two train fatalities all within two weeks of each other.

An officer felt inadequate and sad when a distraught woman lost her second child which drowned in the same swimming pool as her first.

Anger and frustration was felt when an ambulance officer had to call for back ups for a multiple patient accident in the country. He suspected that an unavoidable delay in doing so may have resulted in the loss of a patient.

In a motor bike accident where the body was grossly mutilated and the officer was in attendance for the first time, he reacted, naturally with shock and fright.

## **Distress**

Another distressful situation occurred when a youth died as a result of an accident and the officer felt concerned and sad as he prepared the mother and sister to view the dead body.

From these examples it seems difficult to predict how an ambulance officer would react to accident scenarios. But there are some common scenes that were repeatedly reported, all difficult for the officers to handle, which is easy to understand when one looks at the incidents described. These include: Sudden Infant Death Syndrome (the trauma of dealing with the parents), multiple deaths, death or injury to children, and incidents where the ambulance officer can do nothing to help the victim.

### Categories

Although there is an extreme diversity in the types of incidents, they can be put into four categories. Each describes the set of factors which may turn an average incident into a critical incident or trauma.

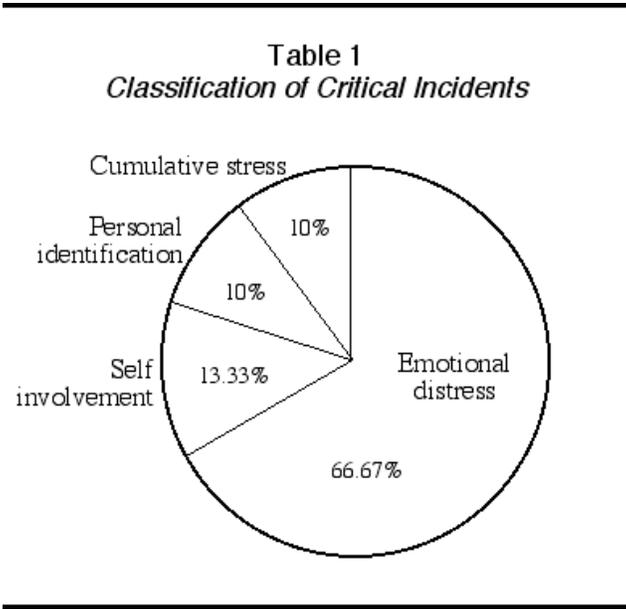
The first is emotional distress, those incidents that have an emotional impact on the ambulance officer. These are incidents that in some way cause distress at the time whether that be a reaction of anger, shock, helplessness, fear, sadness, guilt and so on. These events will tend to be remembered and recalled for extended periods of time.

If adequately dealt with at the time, the memory of the critical incident will carry no distress with it. If not properly dealt with, the recalling of the event will be accompanied by some discomfort.

The second category of critical incidents occurs when the ambulance officer is personally affected by the events. Examples of this are: Fear for one's own safety, threats of violence against self, knowing the victim, fear for the safety of loved ones, death or injury to a colleague and questioning of one's own competence.

Identification with the victim or the situation can create distress for an officer, as can cumulative stress. Cumulative stress may occur when an ambulance officer's life is generally stressful and a mildly stressful event can be the "straw that breaks the camel's back".

In total, 30 critical incidents were recorded. The percentage breakdown of those examples into the four categories of incidents is shown in the pie graph in Table One.



Clearly, emotional distress was the most prevalent category. The other three categories share approximately the same weighting.

## **Coping**

How does the officer cope with all these challenges? It can range from 'black' humour to the "having-a-chat-over-a-cuppa" approach.

But that is a whole additional area that falls outside the goal of this article. All that remains to be said is that, in my opinion, the demands on an ambulance officer are not understood or appreciated by the community in general.

The ambulance personnel that I met I found to be a fine group of people who are in the business of helping others in difficult circumstances. I believe they do that with a high degree of excellence.

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