

## Bad Kid Calls: First Responders Reactions to the death of a child, by Anne Bisek, Psy.D

Why are bad kid calls different? Why do they affect us so much?

A call for service becomes personal when you can identify with the victim. For example, you may have had a similar experience in life such as almost drowning at summer camp. If you respond to a child that has drowned it could activate a feeling of "I could have died."

Other ways you can identify with the victim is having a child the same age, or having a similar family background to the victim (i.e. you are a stepfather and you respond to a child killed by her stepfather). Perhaps you are in a similar stage of life as the family. If your son is two months old, a SIDS call may impact you differently than other officers.

Coping techniques are important during stressful events. Four effective coping techniques are humor, rationalizing, relying on training and experience, and blaming. First responders have a certain dark or gruesome sense of humor not always appreciated by others. However, it is almost impossible to joke about a child's death. An example of rationalizing is, "My kids wear seatbelts so they will be safe. If you respond to a car accident, which involves a car similar to yours, you may lose this helpful coping strategy.

Training, training, training! If you cope by relying on your training and experience then you may feel helpless if the child died before you arrived on scene.

Blaming a drug dealer for getting shot, or a smoker for dying of lung cancer are ways to distance yourself from tragedy. Because children are basically innocent, another typical coping tool is missing from the toolbox. If you can't blame the victim, do you start to blame yourself? Do you find yourself thinking, "If only I had...then the child would be alive"?

The death of a child call can leave an impact when the first responder can identify with the victim, and when usual coping strategies aren't available.

So what do you suggest to a peer who has had a bad kid call?

- \*Tactical, or triangle breathing
- \*Offer to call a chaplain
- \*Exercise off-duty, 30 minutes of cardio
- \*Share how you coped in a similar situation

What do you advise a peer NOT to do?

- \*Pretend it did not affect you
- \*Drink alcohol for the first few days after the call
- \*"Woulda, coulda, shoulda" or magical thinking
- \*Isolate

Anne Bisek, Psy.D. is a clinical psychologist in Fremont, CA. Her practice focuses on first responders. She is the mental health professional on the San Mateo CISD team, and also provides debriefings for the California Highway Patrol. She is a volunteer at West Coast Posttrauma Retreat Center.