

The Emotional Toll of Motor Vehicle Accidents

By Dennis Kramer, PhD.

In "Anatomy of an Accident," an article in the Sept. 13, 2000 Transport Topics, the reporter likened the cost of a truck crash to an iceberg, stating that the indirect costs are four times greater than the obvious direct costs. One hidden cost that has not received attention is the potential emotional or psychological toll of an accident on the truck driver.

Only recently have doctors begun to realize that exposure to motor vehicle accidents can result in a number of psychological and emotional reactions. While the majority of those involved in an accident will not develop any serious emotional problems, evidence from a number of studies, focused on the general public, suggests that many will develop at least some stress reactions.

First, the accident may be persistently re-experienced. A driver could experience intrusive thoughts, memories or dreams of the accident. In some cases, when suddenly reminded of the accident, a driver may experience a pounding heart, sweating or difficulty breathing. For example, a driver involved in an accident during a rainy night on a two-lane highway might have difficulty driving when faced with those same conditions again: rain, nighttime, two-lane highway.

Drivers may also persistently try to avoid thoughts, feelings or activities associated with the trauma. They may avoid certain roads or traffic conditions that resembled those of the accident. Some may completely avoid any driving for pleasure. Others may be unable to ride as a passenger because of feelings of fear resulting from not being in control. Such a reaction would be particularly troubling for a member of a sleeper team. Even if one never completely avoids certain driving conditions, avoidance symptoms can manifest themselves in a "driving reluctance" or loss of confidence.

Drivers may also display avoidance reactions by emotionally shutting down. One may feel distant from people, emotionally numb or have difficulty expressing tender feelings.

Drivers exposed to crashes may also suffer from persistent anxiety and increased physical tension. These can be serious problems for professional drivers, as they may have difficulty falling or staying asleep and getting adequate rest. They may show chronic feelings of irritability and become easily agitated, angry or resentful. Coupled with difficulties in concentration, such tension could be dangerous in congested driving conditions if the driver, normally safe and professional, is overcome with frustration and anger and takes risks. The anger and irritability could further express itself in a deteriorating relationship between driver and supervisor.

In most cases, involvement in crashes may cause personal distress and impede job performance for up to a month. However, some drivers may be more deeply affected and experience more significant impairment, developing a psychological disorder called Post-Traumatic Stress Disorder, or PTSD, characterized by the reactions we've mentioned. However, in PTSD, these effects can last for years and can be extremely debilitating.

Once a driver has been involved in a serious crash, what steps can carriers take to help the driver and protect themselves? It is important for safety and line-haul supervisors to be aware of the more common reactions to trauma and how they may show up in driver behavior. Next, supervisors should not be afraid to go beyond the cursory question, "Are you OK?" Showing your drivers that you care about their emotional health can go a long way and may also speed driver recovery. Research has repeatedly shown that social support -- feeling that you are among people that care about you and being able to talk to them -- can not only speed trauma recovery, but also boost immune system functioning, protect you from colds and actually prolong life. Showing concern and encouraging the driver to talk about the trauma may also prevent the onset of PTSD.

Drivers who have a history of depression have a heightened risk of developing PTSD. Supervisors should be especially concerned if a driver has had recent significant losses, such as divorce, death of loved one, financial hardship. Substance abuse is a frequent response to PTSD. Supervisors should be aware that drivers may use alcohol in an attempt to "self-medicate."

If you have a driver that you are concerned about, you should consider a referral to a mental health professional who has experience in the assessment and treatment of trauma-exposed individuals. Treatment is often effective, and can hasten recovery from stress reactions. If a driver develops PTSD, the goal in treatment is to have the person face their fears. These fears can be thoughts or images associated with the accident. Drivers may not be aware of this and instead may have come to believe that they are "going crazy." Helping them understand how PTSD develops and encouraging them to talk about their fears can be of great benefit.

A skilled counselor would also want to help the client evaluate the validity of guilty assumptions such as "I should have been able to prevent it," or "I'm never safe behind the wheel because you never know what might happen." Unexamined, these assumptions could delay recovery.

Even without professional treatment, most drivers will improve with time. The rate will vary across individuals, but some researchers have found as many as 50% of those initially diagnosed with PTSD to be symptom-free at three months.

In sum, PTSD and other stress reactions may be more common after motor vehicle crashes than previously believed. Research is just beginning to examine how those involved are affected by the trauma. As yet, no research has looked specifically at reactions in long-haul truckers.

One could make an argument that the risk for displaying stress reactions or developing PTSD is less for long-haul truckers than for the general public. This may be so because they are professional drivers and have more incentive to "get back on the horse" after an accident. But one could also point to factors that might predict that truckers may be at greater risk. It has already been established that social support is important in aiding recovery from trauma.

Given the nature of trucking, there may be fewer opportunities to talk about or process the meaning of the trauma with friends and family. Truckers may also be at heightened risk from having witnessed or having been first on the scene at serious crashes. Only recently have we begun to realize that those who witness trauma can become traumatized themselves. Police,

firefighters and journalists who have had to cover grisly stories at one time suffered in silence because of the stoic cultures in which they worked. Many felt compelled to hide their distress out of fear of being labeled as flawed or possessing a weak character. These groups now realize that if a person experiences something too overwhelming, stress debriefing or counseling may be more effective treatments than "taking a day off" or "downing a couple shots."

It is in the interests of both carriers and drivers to recognize that impaired functioning after exposure to an accident is not a rare event and does not reflect negatively on the character of those distressed. Once we recognize that post-trauma reactions are to some degree "normal reactions to abnormal events," those who suffer can feel free to admit and talk about their fears and concerns. Then, as an industry, we will have truly helped reduce one of the hidden costs of motor vehicle accidents.

This article appeared in Transport Topics (week of August 27, 2001 p.9.) The writer, an ex-over-the-road driver, is an assistant professor of psychology at Middle Tennessee State University, Murfreesboro, Tenn. He and other psychologists are developing research to assess the reactions of professional drivers coping with post-crash trauma.

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