

Key Concepts of Disaster Mental Health

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Guiding Principles

(Adapted from the Centers for Disease Control, 2005)

- All individuals who experience a disaster are impacted in some ways
- Most people can pull together and function during and after a disaster, but not as well
- Mental health concerns impact on aspects of preparedness, response, and recovery
- Feeling stress and grief reactions after a disaster are “normal responses to an abnormal situation”

More Guiding Principles

- Survivors respond to active, genuine interest and concern
- Disaster mental health is often more practical than psychological in nature
- Disaster relief assistance can be confusing to disaster survivors. They may experience frustration, anger, and helplessness and reject assistance

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Survivors' Needs and Reactions

- First concern is for basic survival
- Most feel grief over loss of loved ones and loss of valued possessions
- Many show fear and anxiety about personal safety and that of loved ones
- Many show sleep disturbances
- Many express concerns about relocation, separation from familiar, and crowding

More Survivors' Needs

- Survivors need to talk, often repeatedly, about events and feelings associated with the disaster and need others to listen
- It helps survivors if they can feel a part of the community and its recovery efforts.

Referral for mental health services is needed when you observe

- Disorientation
- Depression
- Anxiety
- Mental Illness
- Inability to care for self
- Suicidal or homicidal thoughts or plans
- Problematic use of alcohol or drugs
- Family conflict, child abuse, elder abuse

Steps in Crisis Counseling and Psychological First Aid

(Principles adapted from National Child Traumatic Stress Network, Psychological First Aid)

- Importance of knowledge of crisis and recovery counseling
- Importance of cultural sensitivity
- Important to know about development in responding to children of different ages and their families
- Important to be sensitive to needs of elderly

Adaptation of Psychological First Aid and Crisis Counseling

- Respectful collaboration with local providers and caregivers
- Engaging with victims and community
- Helping to establish safety and comfort

Crisis Counseling

- Gather information and assess current needs and concerns
- Provide practical assistance
- Connect with social supports
- Provide information on coping
- Recognize that needs change during the crisis and recovery

After Hurricane Katrina

- Immediate Services for first responders and their families
- Resilience building programs
- Rebuilding mental health infrastructure
- Providing structure and support for volunteers
- Outreach programs in communities

Serious Mental Illness Pre and Post Hurricane Katrina

Before Katrina

6.1% prevalence of serious
mental illness

Since Katrina

11.3% prevalence of serious
mental illness

Kessler, 2006

Availability of Local Mental Health Services Two Years after Katrina

Pre Katrina

2.8 % did not
receive care

Post Katrina

17.8% did not
receive care

Sirois, 2007

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Mental Health Problems

- Worsening of pre-existing symptoms
- Development of new symptoms
- Less use of treatment, both medication and psychotherapy
- Self-medication to handle stress (example, use of alcohol, drugs, available medications)
- Co-occurring mental health and physical problems

Mental Health Problems

- Increased incidence of suicide
- Increased community violence
- Increased family conflict
- Special problems for the elderly
- People become “tired,” worn down by problems
- Feelings of helplessness and hopelessness (depression)

911 Police Calls for Serious Mental Illness or Threat of Suicide

- July 2006 – 187
- August 2006 – 194
- September 2006 – 182
- October 2006 - 202
- January 2007- 196
- February 2007 - 167
- March 2007 – 207



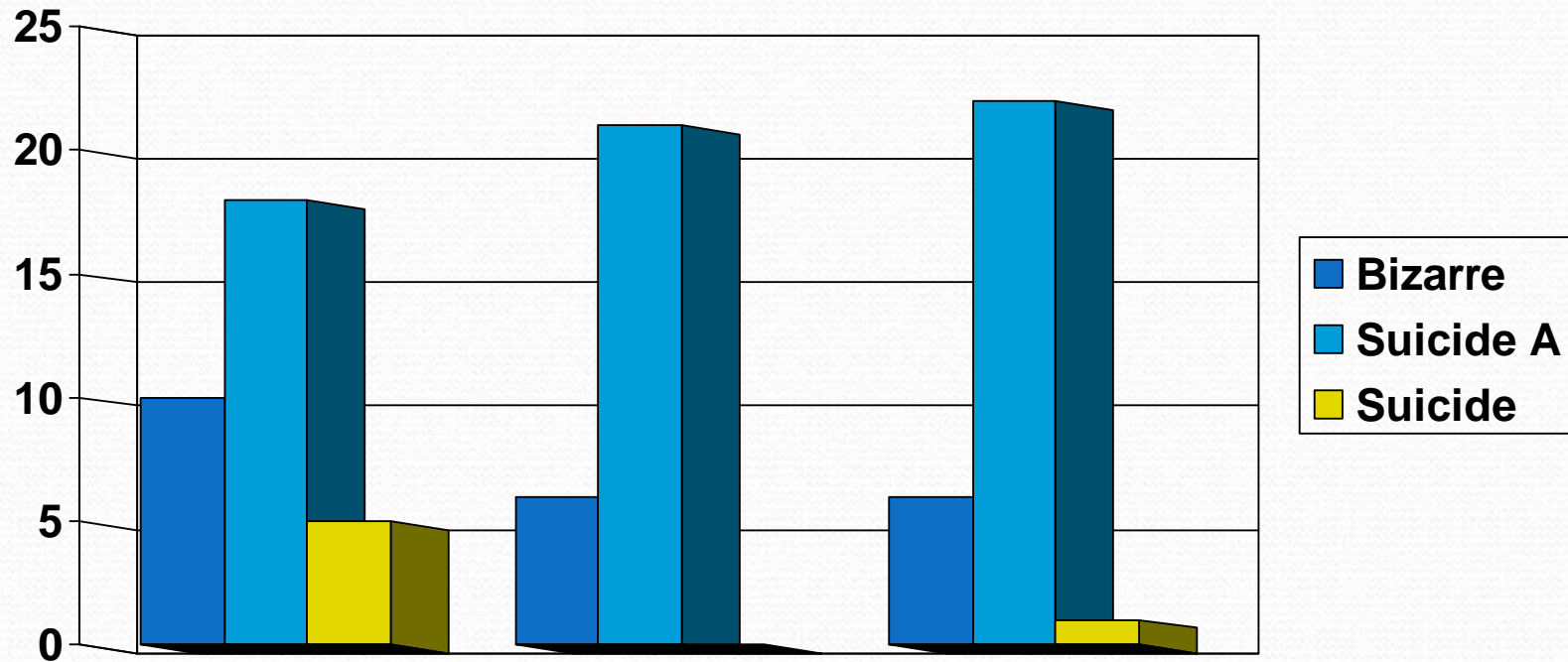
Influence on Community Violence

- New Orleans Police Department reports that a number of violent crimes, suicides, and homicides are linked to inadequate mental health treatment and services

Emergency Service Calls after Hurricane Katrina

(Markedly increased after the hurricane)

February-April 2007



Survivors of Disasters who are also Responders and Treaters

- Secondary traumatic stress
- Vicarious traumatization
- Compassion fatigue

Effects of Traumatization on Adults

- Parents and caregivers
- Teachers
- Interveners
- Treaters (health care, mental health)
- Media
- First responders (Police, Firefighters, Emergency workers)

Possible Outcomes with Unrecognized or Acknowledged Vicarious Traumatization

- Inadvertent insensitivity to victims
- Loss of boundaries
- Concerns about competence
- Absenteeism
- Mental Health problems
- Self medication with alcohol or other substances



Lessons Learned

- Psychological First Aid
- Need to rebuild infrastructure
- Need to support resilience building
- Outreach service delivery in community settings
- Using strengths of local providers and communities
- Supporting the providers and self care